



## SDAA COUNCIL NOMINATION FORM

The Saskatchewan Dental Assistants' Association is inviting nominations for the following:

### **DIRECTOR to COUNCIL**

#### **Term of Office**

- The term of office for other directors shall not be more than two consecutive three-year terms.

#### **Eligibility:**

- Members in good standing may be elected as members of the council with the following exceptions:
- Employees of the association shall not hold elected office.

### **NOMINATING INDIVIDUAL or ORGANIZATION**

NAME:

CONTACT PERSON:

PHONE NUMBER:

EMAIL:

SIGNATURE: \_\_\_\_\_

### **PROPOSED NOMINEE:**

NAME:

ADDRESS:

POSTAL CODE:

PHONE NUMBER:

EMAIL:

SIGNATURE: \_\_\_\_\_

Please submit your completed nomination form by email to [sdaa@sasktel.net](mailto:sdaa@sasktel.net).

**Deadline for Nominations is**