

NOMINATION FORM

FARTA		
l,	nominate _	
for the position of _ <u>Neighbourhood Ho</u>		for <u>Harbourview Childcare</u> (Kiwassa
NOMINATOR's sign	nature	
PART B		
I, that I am a membe	r in good standing of the B.C. Gover	accept the nomination and certify rnment and Service Employees' Union.
NOMINEE's signati	ure	

This form must be faxed to **604-215-1410** or emailed as an attachment to <u>areao3@bcgeu.ca</u> to the attention of Jody Olsson, Staff Representative at the Lower Mainland Area Office, and received no later than

5:00 pm on Monday, February 15, 2021.

Lower Mainland Area Office Phone: 604-215-1499

Fax: **604-215-1410** Email: **area03@bcgeu.ca**