

FORMER FAO AND OTHER UN STAFF ASSOCIATION
****FFOA****

ELECTION/2016-2018/02

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ELECTION FOR THE EXECUTIVE COMMITTEE: 2016 - 2018

NOMINATION FORM FOR CANDIDATES

-to be submitted in a closed envelope

1. Nomination as a candidate

I, the undersigned herewith confirm my decision to stand for election as a member of the Executive Committee 2016-2018 according to the rules and procedures prevailing for this elections. **Moreover: (1)** I declare that I live in the Rome area and can reach FFOA Room E-005, FAO without difficulty; **(2)** I affirm my determination to dedicate sufficient time to attend meetings and to accomplish assigned tasks; **(3)** I confirm that I shall loyally carry out my duties and collaborate on a friendly basis with the members of the Executive Committee and Office Staff; **(4)** I have verified that I and the members supporting me have paid all membership fees that are due.

2. Information concerning the candidate

First and Last Name:

FFOA no

E-mail:

Telephone:

Mobile:

Functions held in associations/groups/official UN committees/staff bodies while in active service and/or in FFOA (please indicate "from-to") – Not to exceed 100 words

Statement of intention regarding activities to be performed and objectives to be achieved if elected: Not to exceed 100 words.

3. Signed in:

on:

(place)

(date)

(signature)

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4. Names, FFOA membership number and signature of members nominating the candidate

	<u>Name</u>	<u>Membership Number</u>	<u>Signature</u>
4.1
4.2
4.3
4.4
4.5

For the use by the Election Sub-Committee

Validation of Nomination

Nomination received before or on Monday, 1 September 2015: ☐ Yes ☐ No
Membership of the candidate LM ___ AM ___ All membership fees paid ☐ Yes ☐ No
Membership of 1st nominating member: LM ___ AM ___ All fees paid ☐ Yes ☐ No
Membership of 2nd nominating member: LM ___ AM ___ All fees paid ☐ Yes ☐ No
Membership of 3rd nominating member: LM ___ AM ___ All fees paid ☐ Yes ☐ No
Membership of 4th nominating member: LM ___ AM ___ All fees paid ☐ Yes ☐ No
Membership of 5th nominating member: LM ___ AM ___ All fees paid ☐ Yes ☐ No

ALL CONDITIONS HAVE BEEN MET ☐ Yes ☐ No

Decision of the Election Sub-Committee

Nomination valid: ☐ Yes ☐ No President's initial:

Receipt of nomination acknowledged on:..... by: email ☐ letter ☐