



## NOMINATION FORM FOR COPA DIRECTOR

NOMINEE \_\_\_\_\_ COPA MEMBERSHIP # \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ PROV. \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TELEPHONE: HOME: \_\_\_\_\_ CELL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

### NOMINATORS

NAME \_\_\_\_\_ COPA MEMBERSHIP # \_\_\_\_\_ PROV. \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

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IN ORDER TO PROVIDE MEMBERS WITH COMPARATIVE INFORMATION ON CANDIDATES, NOMINEES WILL BE REQUESTED TO COMPLETE A CANDIDATE QUESTIONNAIRE AND A 200 TO 300-WORD BIOGRAPHY, BOTH OF WHICH ARE TO BE SUBMITTED WITH THE NOMINATION FORM.

### SUBMIT BY:

EMAIL: [NOMINATION@COPANATIONAL.ORG](mailto:NOMINATION@COPANATIONAL.ORG)

MAIL: C/O TANYA STORING, 75 ALBERT ST. SUITE 903 OTTAWA, ON K1P 5E1

FAX: 613-236-8646