

Nomination Form

Murray Conservatorium Board of Management

I, _____
(full name of applicant)

of _____
(address)

Phone: _____ Email: _____

Nominate for a position on the board of management

Signed _____ Date _____

Nomination Checklist

- ☐ Two referees provided with CV
- ☐ Working with Children Check number provided on EOI
- ☐ References checked with satisfactory results
- ☐ Date available to commence _____

Board of Management Support

The Witness and Secunder must be financial members for the current year.

Witness Name	Signature	Date
Secunder Name	Signature	Date

