



Nomination and Consent Form
(Election to the PSSO Board of Directors)

Section 1: Nomination

I, the undersigned, nominate _____ as a candidate for election to Parkinson Society Southwestern Ontario Board of Directors for a three-year term for the years 2018-2021.

Section 2: Nominee Contact Information

Address of Nominee: _____

Telephone:	Home:	_____	Cell:	_____
	Work:	_____	Other:	_____

Email: _____

Section 3: Nominator Contact Information

Name of Nominator: _____

Telephone:	Home:	_____	Cell:	_____
	Work:	_____	Other:	_____

Email: _____

Date: _____ Signature: _____

Section 4: Nominee Area of Expertise

List briefly your area of expertise/skills:
RESUME MUST ACCOMPANY FORM

Section 5: Additional Information

Canadian living with Parkinson's Disease (PD):	Person Living with Parkinson's (circle below):		Caregiver (i.e., spouse, child, other: _____)		
	YES	NO	YES	NO	

Languages:	Bilingual (circle below):		Languages spoken / written (list below):
	YES	NO	

Gender (circle): MALE FEMALE

Other: _____

Why are you interested in being a PSSO Board member? _____

Where did you see this posting advertised? _____

Section 6: Consent of Candidate

I, _____ consent to my nomination as a candidate for election to Parkinson Society Southwestern Ontario Board of Directors for the year 2018-2021 representing a three-year term of office. I agree to stand for election and serve as Director if elected.

Date: _____ Signature: _____