



STERILISING RESEARCH ADVISORY COUNCIL OF AUSTRALIA (VIC) INC

P. O Box 1697 Geelong VIC 3220
Inc. No. AOO 0023038Z ABN: 77 565 015 941

Committee Nomination Form 2019

FOR NOMINATION OF FULL MEMBERS TO THE COMMITTEE OF
THE STERILISING RESEARCH ADVISORY COUNCIL OF AUSTRALIA (VIC) INC.

Nomination of Full members is requested to fill vacancies on the Committee.
If the number of nominations exceeds the number of vacancies, SRACA (VIC) Inc.
members will be given an opportunity to vote for their preferred committee
members by a ballot, conducted at the AGM.

In preparation for election to the Committee, Nominated Full members should
prepare a 50-100-word statement to introduce themselves to the members present
at the AGM.

This Nomination Form must be completed, signed by the Nominators and the
Nominee and returned the Secretary no later than Friday 15th November 2019.

Nominators

Name of Proposer: _____

Address: _____

Signature: _____

Name of Seconder: _____

Address: _____

Signature: _____

Nominee

Name of Nominee: _____

Address: _____

I, _____
being a Full member of SRACA (Vic) Inc, for at least one year
and currently actively engaged in some aspects of
sterilisation. Hereby accept the nomination to the Committee.

Signature: _____

Date: _____

E-Mail: _____

Telephone: _____

Return to: SRACA (Vic)
email to sraca@bigpond.com
Please contact any committee member for assistance