

Jaffna Central College Old Boys' Association Colombo Branch
EXECUTIVE COMMITTEE MEMBER NOMINATION FORM

Year:

1. Nominee Details

- Full Name :
- Address :
- Contact Number :
- Email Address :
- Member Category : **Life** **Ordinary**

2. Position Applying

(Please tick ✓ one)

- President** **Vice President** **Secretary** **Ass. Secretary**
 Treasurer **Ass. Treasurer** **Committee Member**

3. Proposer Details

- Full Name :
- Contact Number :
- Email Address :
- Member Category : **Life** **Ordinary**
- Signature : Date:

4. Seconder Details

- Full Name :
- Contact Number :
- Email Address :
- Member Category : **Life** **Ordinary**
- Signature : Date:

5. Nominee Consent

I hereby accept the nomination for the above position and agree to serve if elected.

- Signature of Nominee : Date:

6. For Office Use Only

- Nomination Received By:
- Date Received:
- Eligibility Verified: Yes No
- Remarks: