



*Addictions Professionals Association
of Saskatchewan, Inc.*

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APASK EXECUTIVE COUNCIL NOMINATION FORM

I hereby nominate _____ for the APASK Board of Directors..

Printed name of nominator

Signature

Consent of Nominee:

I hereby stand for election to the APASK Board of Directors, and, if I am elected, will accept the responsibilities accruing to the position.

Signature

Remember, the nominee must be a voting member in good standing of APASK. (*Outgoing board members may also leave their names stand for re-election*).

NOMINEE INFORMATION

Please give a brief description of your work background, and the reasons you are interested in serving on the APASK Board. (Please write legibly and use the back of this page if you require more space. What you provide us with will appear in the "Candidate Profile". Unfortunately, we do not have the space or editing capabilities to accept resumes so please **do not** forward your resume.
