

Request for a NOMINATION to an Executive Position 2024

TO BE SUBMITTED NO LATER THAN Feb 21, 2024 Nominations to be sent in PDF format to info@cimpa.ky

As a CIMPA member, I	(Name) (the "Proposer") hereby
nominate the following person as an Officer a	nd Director of CIMPA:
Name	
CIMPA Position Requested	
CIMPA Member Since (Month and Year)	
Current Job Title	
Current Employer	
Telephone Number	
Email Address	
Marketing Experience	
Linkedin Profile	

I have read and understand the following:

- The requirements of the role description outline and that all time generated to do the role will be on a pro bono basis for the interest of the members only.
- The term is for two calendar years (extenuating circumstances will be considered by the Chair for a



request to resign before the term limit).

- A member can apply for one Executive position only.
- A third of members are required to vote to confirm election positions.
- Votes will be counted by the current Executives who are stepping down from their role.
- All nominees must be a member of CIMPA.

PLEASE ATTACH A HIGH-RE	S PROFESSIONAL PHOTO WITH YOUR APPLICATION
	(Name of another member tion) (the "Seconder") hereby second the above nomination.
	(Signature of the Proposer)
	(Date)
	(Signature of Seconder)
	(Date)
of the members only. CIMPA has	(Name of Nominee) consent to the time generated to fulfil the role will be on a pro bono basis for the interest my permission to share my nomination with CIMPA's members via including social media channels, website and email.
	(Signature of Nominee)
	(Date)