**AUCKLAND CATHOLIC DIOCESE**

**.............. Parish, ................**

Nomination Form for Parish Pastoral Council elections (*Date)*

**Name of nominee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Contact details: Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to being nominated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Signature of nominee)*

Name of person nominating\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Ph or email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Seconder\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Ph or email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The term of office is two (or three) years. There are ....... positions up for election*

*On the back of this form please give your reasons for nominating this person, or give a brief CV.*

 *Nominations close on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*