



The Professional Institute of the Public Service of Canada
L'Institut professionnel de la fonction publique du Canada

ONTARIO REGION

N O M I N A T I O N F O R M

POSITION FOR

NOMINATION:

ONTARIO REGIONAL EXECUTIVE

NAME OF NOMINEE:

ADDRESS:

E-MAIL

TELEPHONE:

[home] _____ [work] _____

BRANCH:

GROUP:

I hereby accept this nomination for the above position.

SIGNATURE:

DATE:

NOMINATED BY:

Nominees may attach a brief resume of their qualifications and experience.

Nominees must be a member in good standing (not a rand).