PARRA LEAGUES

DIRECTOR NOMINATION FORM



Title:	
First Name:	
Last Name:	
Address:	
Phone Number:	
Email:	
Date of Birth:	
Parra Leagues Membership Number:	
Do you agree to a Police Check? Or can provide valid police check as required by the Constitution	Yes 🗆 No 🗆
Do you agree to a Bankruptcy Check? Or can provide valid Bankruptcy check as required by the Constitution	Yes 🗆 No 🗆
Do you agree to undertake the Mandatory Directors training course?	Yes No The training will need to be completed within 12 months of appointment
Signed Statutory Declaration attached:	Yes 🗆 No 🗆
Do you agree to abide by the PLC Constitution, By-laws and Directors Handbook? Including electioneering requirements	Yes 🗆 No 🗆
CV attached:	Yes 🗆 No 🗆
Nominee Signature:	
Date:	
Signed by two PLC Full Members: Full member means a person who is an Ordinary Member or a Life Member of the Company	Full Name: Membership Number: Date of Birth: Signature: Date:
	Full Name: Membership Number: Date of Birth: Signature: Date:

Please submit your application to <u>plcdirectornomination@parraleagues.com.au</u> by 06/02/2022

Nominees should familiarise themselves with the Club's Constitution and By-laws, including the provisions about candidate qualifications and disqualifications at https://www.parraleagues.com.au/about-us/policies-notices/ It is the primary responsibility of a Candidate to ensure that they meet those qualifications and to lodge their completed nomination with the Returning Officer prior to the close of nominations. The Returning Officer is not able to provide any legal advice to candidates or prospective candidates on those matters.



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Qualifications:



Experience: Including past or present Directorship

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