

# Board Nomination Form



Annual Election 2024	
Full name of Candidate	
Address	
Contact Number	
Email Address	

All applications must be supported and seconded by two current financial members of PCQ – a proposer and a seconder. Please contact PCQ if you would like assistance to identify supporters.

**We nominate the above member as a candidate for election to the position of:**

- President
- Vice President
- General Committee Member

*Note: If you are nominating for more than one position, please use separate forms.*

Name of Nominator	Address	Signature	Date

## AGREEMENT OF CANDIDATE

**I am a current PCQ Individual Member, I agree to be nominated as a candidate and if elected will undertake the duties of the position.**

Signature		Date	
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**Please include a photo and biography with your nomination.**

(For examples of biographies see the current PCQ Board member biographies on our website [here](#).)

This form must be completed and received by the PCQ Secretary by  
**5:00pm, 14 November 2024**

Please email to: [secretary@palliativecareqld.org.au](mailto:secretary@palliativecareqld.org.au)