

## AGREEMENT FOR NOMINATION OF CSMLS BOARD OF DIRECTORS

**(Please print)**

**A. Name:** \_\_\_\_\_ **CSMLS ID#** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_ Postal Code

**Phone Number** (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

**Email** \_\_\_\_\_

**CSMLS Certification level:**  MLT  MLA  ART  FCSMLS

**B. Please give a brief bio for publication with the ballot form. Please type as per directives.**

**Director Region** \_\_\_\_\_

**C. Please submit a CV/resume as well.**

### **NOMINEE'S STATEMENT:**

*I agree to allow my name to stand for election to the position indicated above. If elected, I pledge to uphold the Bylaws and Policies of the CSMLS and to carry out the duties and responsibilities of the office and such additional duties as may be assigned to me during my term. I have read and agree to abide by the CSMLS Conflict of Interest Guidelines.*

Date \_\_\_\_\_

Signature \_\_\_\_\_

- Note:**
- Names of nominees will be removed from the ballot if their membership fees are not received by January 1<sup>st</sup> of the election year.
  - CSMLS does not provide salary replacement for its elected/appointed officers attending meetings. It is suggested that nominees discuss the availability of paid leave of absence for this purpose with their employer before agreeing to nomination.
  - It is recommended that nominees contact the Chair of the Nominating Committee or any member of the Board for more details of what it means to serve on the Board of Directors.