



Nominating Organization

Leave Blank if Not Applicable

Nominee for:

First Name

Name

Address

Address 2

City

Prov.

Postal Code

Email

Telephone

Mobile

I was made aware and I understand the mandate of the CDAC Board of Directors OR CDAC Accreditation Review Committees OR CDAC Standards Review Committee, and the meeting frequency/time commitment required of a Director of the Board or a Committee Member.

Date

Signature of the Nominee

Date

Signature of the nominating organization (if applicable)

Name

Title

Please return this completed form, along with a copy of your current curriculum vitae and a letter of interest outlining how your skills match the requirements, to:

Cheryl Beaupre, Governance and Executive Assistant, CDAC

Email: cbeaupre@cdac-cadc.ca