



NOMINATION FORM (SELF AND OTHERS)

Kanata Seniors Council Board of Directors

Name of Nominee: _____

Email or Telephone Number of Nominee: _____

Nominator: _____

Email or Telephone Number of Nominator: _____



Please briefly describe the reason(s) why you believe this Nominee would be a suitable candidate for membership on the Board of Directors of the Kanata Seniors Council. Include specific skills the nominee would bring to the Board.

.....
Name of Nominator

.....
Name of Nominee

.....
Signature

.....
Signature



Deadline for submission of nomination is 4:00 pm on April 2nd, 2026
Full job descriptions are available on our website

Please bring this completed form to the Council Office or the Front Desk at the Kanata Seniors' Centre, or mail to 2500 Campeau Drive, Kanata, ON K2K 2W3

Please note that nominations will not be accepted from the floor at the Annual General Meeting on May 20th, 2026

Thank you for your interest in the Kanata Seniors Council