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| **Cork County PPN Nomination Form** | |
| **Note: any person who wants to be considered as a PPN Representative, member of the Secretariat, or for another PPN role; must**  1. Complete in full the appropriate nomination form  2. Nominees should ensure that they understand the time commitment, required attendance etc. relating to the position applied for [Read our Reps Charter [here](https://corkcountyppn.ie/resources/ppn-representatives-charter/)]  3. Be proposed and seconded by 2 members of their own PPN Member Group  4. Include a **short Biography (max 200 words) of the nominee** for inclusion on the Ballot Sheet  5. Ensure nomination form is returned to Cork County PPN by closing date for applications by **5th November 2021** | |
| Committee | |
| Choose an item. | |
| Nominating Group | |
| Click or tap here to enter text. | |
| Membership Number  You can find your membership number in our members’ directory on our website [here](https://corkcountyppn.ie/cork-county-ppn-members/) | |
| Click or tap here to enter text. | |
| College | |
| **Social Inclusion**  **Community & Voluntary**  **Environment** | |
| 1. Nominee Details | |
| Nominee name | Click or tap here to enter text. |
| Nominee address | Click or tap here to enter text. |
| Nominee Phone Number | Click or tap here to enter text. |
| Email | Click or tap here to enter text. |
| 2. Proposed by | |
| Name | Click or tap here to enter text. |
| Position in Group | Click or tap here to enter text. |
| Signed by proposer | Click or tap here to enter text. |
| 3. Seconded by | |
| Name | Click or tap here to enter text. |
| Position in Group | Click or tap here to enter text. |
| Signed by Seconder | Click or tap here to enter text. |
| Signed by nominee | |
| Click or tap here to enter text. | |
| Date | |
| Click or tap to enter a date. | |

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| Include a **short Biography (max 200 words) of the nominee** for inclusion on the Ballot Sheet |
| Click or tap here to enter text. |
| Thank you for filling in this nomination form. Please submit fully completed forms by  **Email:** [**ppn@corkcoco.ie**](mailto:ppn@corkcoco.ie) **or**  **Post:** Cork County PPN, The Business Growth Hub, Cork County Council, Cork, T12 A243  For further enquiries email [ppn@corkcoco.ie](mailto:ppn@corkcoco.ie) or call 021 428 5340  **Incomplete forms will be deemed invalid.** |

**This form collects your name, email & phone number only for the purpose of Cork County PPN elections**

**and related communications; it will not be used for any other purpose.**

Notes:

* In the event of more nominations than vacancies available; an election will be held
* A panel will be created following election process to fill any current or future vacant positions
* Cork County PPN Representatives are expected to gather and present the views and opinions of member organisations (including, but not limited to, his/her own group) of the PPN body which elected him/her
* All Cork County PPN Reps are required to sign the Representatives Charter and to adhere to Cork County PPN reporting mechanisms, Constitution, Policies etc.
* PPN representative expenses will be paid in accordance with the Cork County PPN Travel and Expenses Policy
* Cork County PPN is non-political, non-sectarian and adheres to CVSP 8/2018 re PPNs and Engagement in the Political Process