

**Nomination Form  
For Election to the Board of Directors of Carers NSW  
2021 to 2024**



**Nominator** (please print)

I (Name): \_\_\_\_\_ Phone: \_\_\_\_\_

Of (Address): \_\_\_\_\_ Postcode: \_\_\_\_\_

and **Secunder** (please print)

I (Name): \_\_\_\_\_ Phone: \_\_\_\_\_

Of (Address): \_\_\_\_\_ Postcode: \_\_\_\_\_

being members of Carers NSW nominate and second:

**Nominee** (please print)

(Name): \_\_\_\_\_ Phone: \_\_\_\_\_

Of (Address): \_\_\_\_\_ Postcode: \_\_\_\_\_

*For the position of **Elected Director of the Board of Carers NSW***

I, \_\_\_\_\_ accept nomination for the position of elected Director of the Board of Carers NSW. I have not accepted any other nomination for election to the Board. I support the object and charitable purposes of Carers NSW. I am: 1) at least 18 years of age, 2) a current member, 3) have been a member of Carers NSW for at least 12 months, 4) am not an employee of or in receipt of fees from Carers NSW, 5) am not bankrupt or in financial insolvency, 6) have not been convicted of an offence involving fraud or dishonesty as per section 45.1(i) of Carers NSW Constitution, and 7) am not ineligible to be a Director under the *Corporations Act 2001 (Cth)* or the *Australian Charities Not-for profits Commission Act 2012 (Cth)*.

\_\_\_\_\_  
Signature of Nominated Person

\_\_\_\_\_  
Date

\_\_\_\_\_  
Nominator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secunder's Signature

\_\_\_\_\_  
Date