|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| * **Nominating bodies** who wish to nominate candidates in the above election must complete this form. * All boxes must be completed**.** Incomplete forms may be returned and this may deem the form invalid. * Paper copies must be completed in black ink. | | | | | | |
| Nominating body information | | | | | | |
| Service Group | | | | | Region | |
| Name of branch or self-organised group | | | | | | |
| Branch code | | Telephone number | | | | |
| Branch or self-organised group postal address | | | | | | |
| Nominating body email address | | | | | | |
| Meeting information | | | | | | |
| * Any physical or online (virtual) meetings held to nominate candidates must take place during the nomination period laid out in the timetable * All meeting information, including quorum information, must be provided below * Branches whose approved branch rules allow online meetings may make a decision to nominate candidates using electronic means * Types of acceptable meetings are branch and committee meetings | | | | | | |
| Was the meeting physical or online? | PHYSICAL MEETING  Number of members at physical meeting? | | | | | ONLINE MEETING  Number of members involved in making online meeting decision? |
| What is the quorum (actual number of members) required for this meeting? | | | | Was this meeting quorate? YES  NO | | |
| Meeting date*?* | | | (Meetings must be held between 28 February 2017 and 31 March 2017) | | | |
| Type of meeting (e.g. branch, committee)? | | | | | | |

Page 1 of 2

|  |  |  |
| --- | --- | --- |
| Candidate information | | |
| **Community Eastern General** candidate name | | **RMS number** (if known) |
| **Local Government Cymru/Wales Female** candidate name | | **RMS number** (if known) |
| **Local Government Yorkshire and Humberside Reserved** (low pay) candidate name | | **RMS number** (if known) |
| **Police and Justice East Midlands General** candidate name | | **RMS number** (if known) |
| **Police and Justice North West General** candidate name | | **RMS number** (if known) |
| Nomination certification | | |
| * This nomination is made in accordance with UNISON rules and the election procedures for this election * Names of the secretary and chairperson correspond with those recorded on the RMS * Where only one post is filled, we require the signature of another branch officer, i.e. 2 signatures are needed | | |
| Secretary’s name |  | |
| Secretary’s signature | Date | |
| Chairperson’s name |  | |
| Chairperson’s signature | Date | |
| Please provide an explanation if this form has been endorsed by a officer other than the secretary or chairperson listed on the RMS. | | |
| Submit this form:  By email [elections@unison.co.uk](mailto:elections@unison.co.uk)  By post Member Liaison Unit, UNISON, UNISON Centre, 130 Euston Road, London, NW1 2AY  By fax 020 7121 5196  **Deadline for receipt of nomination forms is 5pm, 31 March 2017.**  Page 2 of 2 | | |