



COP YOUTH CONGRESS
213 Caroni Savannah Rd., Charlieville
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COP YOUTH CONGRESS ELECTION NOMINATION FORM

1. NOMINATOR INFORMATION

Please clearly print the following details about yourself BEFORE proceeding with your nomination. You must ensure that all sections of this form are completed or your form may be rejected.

Surname: _____

First Name: _____

Other Given Names: _____

Title: _____ Date of Birth: _____

Address: _____

COP Party Card Number: _____

Occupation: _____

2. NOMINEE INFORMATION

Please clearly print the following details about the person you wish to nominate.

Surname: _____

First Name: _____

Other Given Names: _____

Title: _____ Date of Birth: _____

Address: _____

COP Party Card Number: _____

Occupation: _____

3. STATEMENT OF NOMINATION

In this section, space has been provided for you to set out details of why the nominee is suited for the relevant post. It is important that you give ample information about significant contributions your nominee may have made, whether in the COP Youth Congress or otherwise, which makes him/her stand out against others.

"I, _____, wish to nominate _____,
Nominator's Full Name *Nominee's Full Name*

for the position of _____.
Executive Post

I believe that _____ should be given the chance to serve as
Nominee's Full Name

_____ of the COP Youth Congress because:
Executive Post

Nominator's Signature

Date

FOR OFFICIAL USE ONLY

Nomination Form Received by: _____

Were all spaces filled? Yes () No ()

Signed: _____

Date: _____

