



**EXECUTIVE OFFICER:  
WORKSITE 72 VICE-PRESIDENT  
NOMINATION FORM**

I,

\_\_\_\_\_  
(NAME OF NOMINATOR - PLEASE PRINT NAME)

**A member in good standing of Worksite 72 of the Manitoba Nurses Union, do hereby  
nominate:**

\_\_\_\_\_  
(NAME OF NOMINEE - PLEASE PRINT NAME)

\_\_\_\_\_  
(NOMINEE MAILING ADDRESS)

\_\_\_\_\_  
(POSTAL CODE)

\_\_\_\_\_  
(NOMINEE PERSONAL EMAIL)

\_\_\_\_\_  
(NOMINEE PERSONAL PHONE)

**A member in good standing of the Worksite 72 of the Manitoba Nurses Union, for  
election to the position of Worksite Vice-President for the 2 year term starting May  
1<sup>st</sup>, 2026, to April 30<sup>th</sup>, 2028.**

Signed this \_\_\_\_\_ day of \_\_\_\_\_ ,  
\_\_\_\_\_

\_\_\_\_\_  
(SIGNATURE OF NOMINATOR)

\_\_\_\_\_  
(NOMINATOR MAILING ADDRESS)

\_\_\_\_\_  
(POSTAL CODE)



**EXECUTIVE OFFICER:**  
**WORKSITE 72 VICE-**  
**PRESIDENT**

## **NOMINATION FORM**

**Supported by the following MNU members in good standing, of Worksite 72:**

**1.**

\_\_\_\_\_  
(PLEASE PRINT NAME) (ADDRESS)

\_\_\_\_\_  
(SIGNATURE) (PERSONAL EMAIL)

**2.**

\_\_\_\_\_  
(PLEASE PRINT NAME) (ADDRESS)

\_\_\_\_\_  
(SIGNATURE) (PERSONAL EMAIL)

**I accept the nomination:**

\_\_\_\_\_  
(SIGNATURE OF NOMINEE)

### **CHECKLIST:**


**NOMINATION FORM REQUIRED, BOTH PAGES.**

**ALL BLANKS ARE FILLED IN THE NOMINATION FORM.**

**RESUME REQUIRED.**

**COMPLETED NOMINATION FORMS & CORRESPONDING RESUMES ARE REQUIRED TO BE SUBMITTED TO THE NOMINATIONS COMMITTEE AT [worksite72@mymts.net](mailto:worksite72@mymts.net), OR BY LEAVING THEM IN THE MNU MAILBOX IN THE STAFFING OFFICE, NO LATER THAN MIDNIGHT ON MONDAY FEBRUARY 16<sup>TH</sup>, 2026.**

**NO OTHER FORM OF CORRESPONDANCE WILL BE EXCEPTABLE.**