



NOMINATION FORM FOR ARCHBISHOP'S APPOINTMENT TO

THE BOARD OFSUBURB/TO		SUBURB/TOWN		
To be co	To be completed by the person nominated.			
Name:_				
Address				
Postal C				
Phone:	(Home)			
	(Work)			
	(Mobile)			
Email: _				
Occupat	ion:			
	<u> </u>	ment, skills, qualities applicable to the role:		
■ I hav		sponsibilities of a Bishop's appointee.		
of the	e Education Act 1989 (Pa ee and have duly signed	ne ineligibility criteria for school trustees, under section 103 art B criteria) and declare that I am eligible to become a the Eligibility Attestation form (as attached). I hereby ion that I have listed on this form is true and correct.		
Signed: Date:				
Parish F	Priest/Lay Pastoral Lea	der's Signature:		

Return to: Jenny Gordon, Vicar for Education

Archdiocese of Wellington PO Box 1937, Wellington 6140 Email: <u>i.gordon@wn.catholic.org.nz</u>