

# **NOMINATION TO UWIAA (TRINIDAD & TOBAGO CHAPTER)** **EXECUTIVE COMMITTEE**

**NOTE:** *Nominees are advised to complete and sign the nomination form, have their proposers and seconders sign the form, and submit the same with a resume of relevant experience (**not exceeding two (2) pages**) and a (**maximum**) one page biography to support their application to The UWI Alumni Association (Trinidad & Tobago Chapter), The University of the West Indies, St. Augustine Campus via email at [trinidad.tobago@alumni.uwi.edu](mailto:trinidad.tobago@alumni.uwi.edu)*

Candidate's Full Name: \_\_\_\_\_  
(Block letters)

Membership number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact No: \_\_\_\_\_ Email address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_  
(If self employed, please state)

Address: \_\_\_\_\_

Nominee for (please tick)

First Vice-President ☐ Second Vice-President ☐

Secretary ☐ Assistant Secretary ☐

Treasurer ☐ Assistant Treasurer ☐

Public Relations and Promotions Officer ☐

Membership and Data Officer ☐

Social Media Facilitator ☐

Young Alumni Facilitator ☐

Faculty Representative ☐ (State Faculty) \_\_\_\_\_

Proposer: \_\_\_\_\_ Membership # \_\_\_\_\_

Proposer's signature: \_\_\_\_\_ Contact No. \_\_\_\_\_

Proposer's email: \_\_\_\_\_

Second: \_\_\_\_\_ Membership # \_\_\_\_\_

Second's signature: \_\_\_\_\_ Contact No. \_\_\_\_\_

Nominee's signature: \_\_\_\_\_ Dated: \_\_\_\_\_