



FOSTER CARER MEMBER REPRESENTATIVE BOARD MEMBER NOMINATION FORM

Use this form to nominate a Foster Carer Member Representative to the Caring Families Aotearoa Board at the next Annual General Meeting.

Please ensure that both the candidate and two nominators sign and fill in the form.

Candidate Name:		
Contact details:	Daytime ph:	Mobile:
Email:		
Address:		
Occupation:		

Please refer to the constitution, particularly to the following paragraphs:

- 11.3 The Board comprises no less than seven (7) but no more than nine (9) governors – made up of Foster Carer members and other governors with governance/specialist skills.
- 11.6 Any election for Foster Carer Members on the Board shall be held at the Annual General Meeting. The Board must approve each and every nomination before eligibility for election as a Foster Carer Member.
- 16.4 No Foster Carer member nominations shall be accepted from the floor at the Annual General Meeting.

All Caring Families Aotearoa Board members will need to sign:

- Code of Conduct
- Confidentiality Agreement
- Governor's Agreement
- Conflict of Interest form
- Officer Confirmation Checklist (to confirm you are qualified to be an officer under Section 16 of the Charities Act 2005).

Voting for all positions will be carried out at the AGM according to the Caring Families Aotearoa Constitution.

I, _____ agree to be nominated for the position of Foster Carer Member on the Caring Families Aotearoa Board.

Signed:

(Candidate)

Date

Nominator's Details:

Nominator's must be either full members or life members. Our current full member definition is:

A full member is an individual foster carer or a person who the CEO deems is actively involved with the organisation.

Nominator 1 Name:		
Contact details:	Daytime ph:	Mobile:
Email:		
Signature:		Date:

Nominator 2 Name:		
Contact details:	Daytime ph:	Mobile:
Email:		
Signature:		Date:

