



## AFL CENTRAL VICTORIA COMMISSIONER - NOMINATION FORM

| NAME:   |           |           |       |
|---|-----------|-----------|-------|
| NOMINATOR:  | NAME      | SIGNATURE | DATE  |
|   |           |           |       |
| SECONDER:   | NAME      | SIGNATURE | DATE  |
|   |           |           |       |
| RESUME (100 words max):                                 |           |           |       |
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|   |           |           |       |
| Why would you make a good Commissioner (100 words max): |           |           |       |
| why would you make a good Commissioner (100 words max): |           |           |       |
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|   |           |           |       |
| NOMINATION  | SIGNATURE |           | DATE: |
| ACCEPTANCE:   |           |           |       |
|   |           |           |       |

Please return completed nomination forms by COB Monday 26 February, 2018. Forms can be returned via email (carol.cathcart@aflcentralvic.com.au) or AFL Central Vic Commission, PO Box 871, Bendigo, Victoria, 3552.