

Annex 2: Voter nomination form

ACQF NETWORK
Presidency elections

VOTER NOMINATION FORM

Voting Body:	
Country:	
Full name of the person nominated as Voter (the Voting Representative):	
Position of the Voting Representative in the organisation:	
E-mail address of the Voting Representative (which will be used to cast the vote):	

NOMINATOR/ AUTHORISED DECISION-MAKER*

Full name of the nominator:	
Position in the organisation:	
Signature of the nominator:	Date:
Official stamp:	

* Head of the candidate authority/department in charge of NQF