

ᐃᑦᑏᑏᑦ: _____

ᐅᑦᑏᑏᑦ ᑎᑦᐃᑏᑏᑦ: _____

Seconded by (Please Print): _____

Address: _____

Phone/Fax Number: _____

ᑭᐃᑭᑦ ᐱᑦᑏᑏᑦ ᑭᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ:

Explain the reason why you are nominating this woman:

ᐃᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ, ᑎᑦᑏᑏᑦ ᐃᑎᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ?

In accepting this nomination, what do you hope to contribute to the Pauktuutit Board of Directors and its work?

ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ, ᐱᑎᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ ᑎᑦᑏᑏᑦ?

Do you have specific skills, knowledge or expertise that will enhance the work of the Board of Directors?

ᐱᖅᐅᐅᑦᐅᑦᑦᑦᑦ ᑖᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦ
 Please attach your resume or other background information of relevance.

ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ (ᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦ)
 Nomination accepted by the candidate (Signature of Candidate Required)

ᑦᑦᑦᑦᑦᑦᑦ Candidate	ᑦᑦᑦᑦᑦᑦᑦᑦᑦ Nominator	ᑦᑦᑦᑦᑦᑦᑦ Secunder
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ᑦᑦᑦᑦᑦᑦ/Date: _____

ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ:
 ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦ.
 ᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ

Note:
 Please reproduce these forms as required.
 Only Inuit women can nominate and only Inuit can be nominated for the Pauktuutit Board of Directors.

ᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ 12 ᑦᑦᑦᑦᑦᑦᑦ
 (ᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦ), ᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦ 21, 2020, ᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦ: 613-238-9913
 ᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦ: CWAPACHEE@PAUKTUUTIT.CA

PLEASE FAX THESE FORMS BY 12 (EST), FEBRUARY 21, 2020
 TO: 613-238-9913
 OR EMAIL TO CWAPACHEE@PAUKTUUTIT.CA