



## Board of Directors Nomination Form

### Nominee Information

Name.....

Address.....

Telephone Mobile.....Home.....

Present Employment.....

### Qualifications

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Are you a member of WSPiC?    Y/N

Is there any legal reason why you cannot be a director of an organisation?    Y/N

### Experience

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.....  
.....

### Skills that would be of value to the board

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Please return to [chair@westsussexpartnersincare.org](mailto:chair@westsussexpartnersincare.org) for consideration at the  
AGM on 14 November