

## APPLICATION FOR NOMINATION TO THE BOARD OF DIRECTORS

l,,	hereby agree to let my name stand for nomination to the Board of
Directors of Golf Manitoba Inc.	
	(signature of nominee)
Club Official	
Name:	
Position held:	
Signature:	
Nominee Information (to be com	pleted by Nominee)
Name of Nominee:	
Member Club:	
Nominee Address:	
Home Phone:	Cell Phone:
Email:	
1.Please highlight your work exp	perience, education, and professional development:
2. List the Boards on which you	serve or have served:
3. List any other volunteer activity	ties and your involvement:



4. (A) Please indicate your level of knowledge, skill and experience for each of the following categories.

Category	None	Fair	Good	Advanced
Board and Governance				
Strategic Planning				
Administration & Policy				
Human Resources Management				
Finance				
Accounting				
Government Relations				
Quality & Performance Management				
Risk Management				
Legal				
Marketing				
Fundraising				

4. (B) In a short paragraph, summarize one accomplishment that illustrates those skills that you have indicated as good or advanced, from the knowledge, skills and experience categories listed above

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5. In a short paragraph, describe your interests with Golf Manitoba.						
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6. Record other	pertinent information you wi	sh to share with us				
Please s	end in your completed Nom	ination Form at least 30 days prior to the ann	ual AGM.			
	420	0-145 Pacific Avenue				
	Winnip	peg, Manitoba R3B 2Z6				
	ام	info@golfmb.ca none: 204-925-5730				
	Pr	10116. 204-920-01 30				
		FFICE USE ONLY:	•			
	Date received:	Date sent to Nominations Committee:				

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