



**National  
Indigenous  
Diabetes  
Association** | **Association  
nationale  
autochtone  
du diabète**

202-160 Provencher Blvd.  
Winnipeg, Manitoba  
R2H 0G3  
(204)927-1221  
nada.ca

## NATIONAL INDIGENOUS DIABETES ASSOCIATION

### NOMINATION FORM

I wish to nominate the following to the NIDA Board of Directors:

Name of Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Signature of one (1) NIDA Board of Directors Member required:**

|                   |                     |
|-------------------|---------------------|
| <b>Name:</b>      | <b>Membership #</b> |
| <b>Signature:</b> |                     |

#### **Submissions must include:**

1. Personal resume of nominee.
2. Letter of intent to serve from nominee.
3. Short autobiography of the nominee.

Nominees should be prepared to give a 2–5-minute presentation at the Annual General Assembly before elections (if possible, to attend).

Your presentation should include your reasons for wanting to become a NIDA Board member.

Nominations and Resolutions will continue to be received at the NIDA office.

National Indigenous Diabetes Association  
C/o Celeste Theriault, Executive Director  
celestetheriault@nada.ca  
202-160 Provencher Blvd, Winnipeg, MB R2H 0G3

