



## FORM for NOMINATION of ELECTION OF FELLOWS

We, the undersigned, being financial members or representatives of an NZILA group or branch, nominate:

\_\_\_\_\_ (Nominee's Name)

**as Fellow** (Must be a Registered Member with at least 10 years professional experience)

**Proposed by:**

\_\_\_\_\_

Date: \_\_\_\_\_

**Seconded by:**

\_\_\_\_\_

Date: \_\_\_\_\_

### CONTACT DETAILS FOR:

Proposer: \_\_\_\_\_

Nominee: \_\_\_\_\_

### NOTE:

All proposals shall be in accordance with the NZILA Procedure for the Nomination & Assessment of Candidates for Election as Fellows.

The Form shall be accompanied by a detailed Statement of Contribution as per the criteria indicated in the procedural document.

### RETURN BY:

Nomination Forms must be returned no later than close of business  
**Friday 29 September 2023.**

To: NZILA

Email: [admin@nzila.co.nz](mailto:admin@nzila.co.nz)

Phone: 0800 843 694