**Council Nomination Form 2024**

First Nomination  Nomination for re-election

This nomination is for:

*(tick one box only)* *PLEASE USE* ***ONE FORM*** *PER NOMINATION*

Speaker of the General Assembly Councillor

**DOCUMENTATION REQUIRED**

**Written presentation from the Nominee in English** (Maximum 500 words for Council)  
 Included

**Curriculum Vitae (CV) / personal record in English in a Word format**  
 Included

### **NOMINEE’S INFORMATION**

|  |
| --- |
| Title: |
| Name: |
| Address: |
| Member Association: |
| The nominee declares that he/she is willing to serve in this position  Yes **Signature** |

### **NOMINATING ASSOCIATION/ORGANIZATION’S INFORMATION**

|  |
| --- |
| Name of the Association/Organization |
| Name of Official representing this Association/Organisation (President/NLO/President-elect). The Nominee may not nominate himself/herself. |
| Position of Official |
| **Signature** |

To be eligible for election, nominees should meet the specific criteria for the positions listed below. Please tick the boxes below if the corresponding criteria are met.

### **Speaker of the General Assembly:**

Dentist  
 Knowledge of FDI  
 Proven knowledge / experience in parliamentary procedures

### **Councillor:**

Dentist  
 Able to communicate effectively in English, verbally and in writing

### **CLOSING DATES FOR NOMINATIONS TO COUNCIL:** **16 June 2024**

This form must be signed and returned **preferably** **by email** to:

Ms Djerdana (Gina) Ivosevic at [divosevic@fdiworlddental.org](mailto:divosevic@fdiworlddental.org)

with copy to Ms Maria Kramarenko [mkramarenko@fdiworlddental.org](mailto:mkramarenko@fdiworlddental.org)

or **by fax** at +41 (0)22 560 8140