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## **2025 Director Nomination Form**

I agree to be nominated for the position of Director for the Ambulance Provident Fund Ltd (APF). I declare that I am a fit and proper person to serve as a director and I have not been disqualified from serving as a director. I also understand that if elected as a director I must diligently exercise the powers and discharge the duties required of me as a director under the Corporations Act 2001 (Cth).

Only Full Members who have been Voting members for 24 months are able to stand as a Director. See Constitution clauses 7.2 and 34.3.

Nominee, nominator and seconder must be current financial members of the APF.

Full Name of nominee: (Please print)	
Place and country of birth:	
Current residential address:	
Director ASIC ID number:	
Signature of nominee:	Date:
Nominated by: (Please print)	
Signature:	Date:
Seconded by: (Please print)	
Signature:	Date:

Nomination Forms are to be submitted with the Director Application Coversheet, Director Skills and Attributes Assessment, and a current CV of no more than 5 pages. Nominations submitted without all required documentation will be considered incomplete and will not be accepted.

The completed forms must be returned by COB on Saturday 09 August 2025 to: AGM@ambprov.org.au