



## CONVENOR (LIBRARIES) NOMINATION FORM

We wish to nominate the following person as a **Convenor (Libraries)**  
for the period until the AGM 2018:

**OFFICER ROLE** .....

**NAME (IN BLOCK CAPITALS)**.....

**Signed** ..... **Proposer; Name(in block capitals)**.....

**Signed** ..... **Seconder; Name (in block capitals)**.....

**Consent of Nominee:**

I consent to the nomination and, if elected, I will act as a Convenor for the period until the AGM 2018 and I confirm that I will carry out the relevant duties and responsibilities as laid down in the UNISON Rule Book and Code of Good Practice.

**Signature** ..... **Date** ..... **Membership No** .....

**JOB TITLE** .....

**FULL Workplace Address** .....

..... **Location Postcode** .....

**Your work telephone number** .....

**Your work e-mail address** .....

**Your line manager**.....

**DIRECTORATE/DEPARTMENT**.....

**FULL Home Address** .....

..... **Postcode** .....

**Home/Mobile telephone number** .....

**Home e-mail address** .....

**Please return to:** **UNISON, Coventry City Branch**  
Koco Community Resource Centre  
Archest Industrial Estate  
Coventry  
CV1 3JQ  
**Tel:** 024 7655 0829  
**Email** [office@unisoncoventry.co.uk](mailto:office@unisoncoventry.co.uk)

