



## CMHA-NL Board of Directors NOMINATIONS

**TO BE COMPLETED BY ALL NOMINATORS and NOMINEES FOR VACANT DIRECTOR POSITIONS. THIS FORM IS CONFIDENTIAL AND WILL ONLY BE USED FOR CMHA-NL PURPOSES.**

To be nominated to serve as a Director on the CMHA-NL Board, please complete this form and submit it along with the Letter of Consent and Biographical Summary.

*Please note: All nominations will be considered within the skillset(s) required.*

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**Nominee Name:** \_\_\_\_\_

	<b>Home</b>	<b>Business</b>
<b>Address:</b>	_____	_____
	_____	_____
	_____	_____

**Telephone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Correspondence mailed to:** Home \_\_\_\_\_ Business \_\_\_\_\_ E-Mail \_\_\_\_\_

**Occupation:** \_\_\_\_\_

The Nomination Sub-Committee has identified current skills needed for the board at this stage in the association’s development. Please check those in which you can make a contribution and indicate why you believe this to be so.

**\_\_\_ Fund Development/Corporate Sector Engagement**

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**\_\_\_ Financial Management**

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**\_\_\_ Indigenous Engagement/Background**

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**\_\_\_ Youth Engagement**

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**\_\_\_ Legal background**

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**\_\_\_ Mental Health and Addictions Background (professional education and experience or lived experience)**

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**\_\_\_ Marketing**

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**\_\_\_ Communication**

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**\_\_\_ Affiliation with other community agencies**

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**\_\_\_ Other Skills that you feel you possess that can contribute to CMHA-NL**

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**Please describe your experience (including present and past positions held) with CMHA-NL or other organizations. Please indicate approximate dates.**

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**Nominator Signatures:**

**Affiliation with CMHA:**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

**Nominee Name:** \_\_\_\_\_  
(Please print)

**Nominee Signature:** \_\_\_\_\_

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

Please return to CMHA-NL, Attention: [bhaley@cmhanl.ca](mailto:bhaley@cmhanl.ca), Fax: 709-753-8537

**About CMHA-NL**

The Canadian Mental Health Association, Newfoundland and Labrador Division (CMHA-NL), is a voluntary, non-profit, charitable organization established in 1964 to promote a better understanding of mental health and mental illness in the province. As a division of the National Canadian Mental Health Association, our mission is to promote the mental health of all and to support the resilience and recovery of people experiencing mental illness. This mission is accomplished through advocacy, public education, research, and service. CMHA-NL division's head office is in St. John's and we also have two regional offices located in Grand Falls-Windsor (Central) and Stephenville (Western).