



NOMINATING COMMITTEE GUIDELINES SCHEDULE 1

Proposal Form

Nominee Details

Nominee's Full Name : _____

Country/Region : _____

No. of years a FICPI member : _____

Previous roles within FICPI
(brief description) : _____

Position sought : _____

Signature of Nominee : _____

Date : _____

First Proposer's Details*

Proposer's Full Name : _____

Country/Region : _____

Position : _____

Signature : _____

Date : _____

Second Proposer's Details*

Proposer's Full Name : _____

Country/Region : _____

Position : _____

Signature : _____

Date : _____

* At least one of the proposers must be a National or Regional Delegate of the Executive Committee or a person holding an elected position of FICPI. Both proposers must be members of FICPI.