



DEEP CREEK PRESCHOOL ASSOCIATION INC.
 (Association's Incorporation No. A7573)
 510 Blackburn Road
 Doncaster East, Vic 3109
 Ph: 9842 9002
www.deepcreekpreschool.org.au
deep.creek.kin@kindergarten.vic.gov.au

NOMINATION FORM FOR ELECTION TO THE COMMITTEE OF MANAGEMENT

You are invited to nominate for a position on the Deep Creek Preschool's Committee of Management.

Please refer to the Committee of Management positions list and descriptions for more information about each role and current vacancies. We look forward to welcoming you!

Steps:

1. Scan and return this form to secretary.deep.creek.kin@kindergarten.vic.gov.au as soon as possible. If the nomination is for next year's Committee of Management return the form before the Annual General Meeting (AGM).
2. If necessary, a ballot may be conducted if there is more than one person interested in a role.
3. The 2021 Committee of Management will be finalised and announced at the AGM.

Any questions or queries can be directed to the President at president.deep.creek.kin@kindergarten.vic.gov.au

I, *(print name in full)*, accept nomination to the position of:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> President | <input type="checkbox"/> Treasurer | <input type="checkbox"/> Fees Officer | <input type="checkbox"/> Marketing Officer |
| <input type="checkbox"/> Vice-president | <input type="checkbox"/> IT Officer | <input type="checkbox"/> Grants/Projects Officer | |
| <input type="checkbox"/> Secretary | <input type="checkbox"/> Enrolment Officer | <input type="checkbox"/> Social Secretary | |
|
<input type="checkbox"/> General Committee Member | | | |

I have a child attending the following group in 2021: 3 year old 4 year old

If you **do not** have a child attending this preschool in 2021 please fill in the Associate Membership Form.

Signed: Date:
 (Nominee)

Proposer: *(print name)*.....

Signed: Date:

Secunder: *(print name)*

Signed: Date:



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I am aware that, in order to fulfil the responsibilities for this role, I may be required to provide a current criminal history check and/or *Working with Children* assessment. I must attend the AGM or may be required to meet with the Executive committee prior to the AGM.

Signed: Date:

Contact Phone Number & Email Address: