

APPENDIX B
AUSTRALIAN DENTAL ASSOCIATION (WA BRANCH) INCORPORATED
Nomination for ORDINARY MEMBERS OF COUNCIL

Office for Which Nominated:

Name of Candidate:

Particulars and Personal Biography (see Clause 39(7)) (up to 200 words)

Signature of Candidate:

Date:

Signature of Proposer:

Signature of Seconder:

Date:

NOTE: For Information regarding the Council, see Clauses 39 to 41 of the Rules of Australian Dental Association (WA Branch) Incorporated.

OFFICE USE ONLY:

Date nomination received:

Date candidate notified:

APPENDIX B
AUSTRALIAN DENTAL ASSOCIATION (WA BRANCH) INCORPORATED
Nomination for EXECUTIVE OFFICERS OF COUNCIL

Office for Which Nominated:

Name of Candidate:

Particulars and Personal Biography (see Clause 39(7)) (up to 200 words)

Signature of Candidate:

Date:

Signature of Nominator:

Signature of Secunder:

Date:

NOTE: For Information regarding the Council, see Clauses 39 to 41 of the Rules of Australian Dental Association (WA Branch) Incorporated.

OFFICE USE ONLY:

Date nomination received:

Date candidate notified: