



## NOMINATION FORM 2012 AGM

**Must receive before: February 3, 2012**

Both Nominees and Nominators must be *practicing* members of the College of Opticians of Alberta. Please include a license number.

**Three** positions are open for the province each with a three-year term

We the undersigned do hereby nominate \_\_\_\_\_ for  
*(print name of nominee)*  
the position of COUNCILOR representing the College of Opticians of Alberta.

### Signature and License Number of Nominators

- |          |             |
|----------|-------------|
| 1. _____ | Lic # _____ |
| 2. _____ | Lic # _____ |
| 3. _____ | Lic # _____ |
| 4. _____ | Lic # _____ |
| 5. _____ | Lic # _____ |

\_\_\_\_\_  
Nominee Signature

\_\_\_\_\_  
Lic #

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E-mail: [coa@opticians.ab.ca](mailto:coa@opticians.ab.ca)

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