

UNISON ABERDEEN CITY BRANCH

NOMINATION FORM – STEWARDS/HEALTH & SAFETY REP

Please note: The proposer and seconder must both be UNISON members

We nominate: NAOMI GRAY

for the post of STEWARD/~~HEALTH & SAFETY REP~~ (delete as appropriate)

(Please state employer, department or section, as relevant)

Signed (Proposer): _____

Print Name: _____

Signed (Secunder) _____

Print Name: _____

I agree to the above nomination:

Signed: Naomi Gray

Print Name: NAOMI GRAY

Contact Telephone No.: 07927192609

Email address: naomi-e.gray@hotmail.com

Fax No. _____

This form to be completed and returned to the address below:

Freepost RTKH-RBXC-BEXB,

UNISON, Grampian Resource Centre, 7 Alford Place, ABERDEEN, AB10 1YD