

SAINT LUCIA TEACHERS' TEACHERS UNION

NOMINATION PAPERS

We the undersigned members of the _____ Branch do hereby nominate _____ to serve as

_____ for the year 2014-2016. We certify that to the best of our knowledge and belief that he/she is qualified to serve the office to which he/she is nominated.

Sur Name	Other Name(s)	Address	Designation	Signature

PROPOSERS

NAME	SCHOOL	SIGNATURE
1		
2		
3		
4		
5		

Date: _____

I.....do seek nomination to the above mentioned office of the SLTU.

Signature of candidate _____

Date: _____