



Nominations for 2023

Nominating Committee

Name of Nominee (Print):		
Address:		
City:	Province:	Postal Code:
Phone:	Email:	
Signature:		Date:

The undersigned support the above nomination (5 signatures or names of current active members of CAEP are required).

Name (Print): _____ **Date:** _____

Signature: _____

Name (Print): _____ **Date:** _____

Signature: _____

Name (Print): _____ **Date:** _____

Signature: _____

Name (Print): _____ **Date:** _____

Signature: _____

Name (Print): _____ **Date:** _____

Signature: _____