

**NOMINATION FORM
QUEEN'S UNIVERSITY
NON-UNIONIZED EMPLOYEE REPRESENTATIVE**

I/We, the undersigned nominate:

Name: (please print) _____
Title: _____
Department: _____
Campus Address: _____
Phone: _____
University E-mail: _____

For the position of Representative of the non-unionized employees for the purposes of nominating a person to be a Trustee on the Board of Trustees of the proposed University Pension Plan Ontario (UPP).

The signatory(ies) below must be employees of Queen's University who participate in the Revised Pension Plan of Queen's University, who are not represented by a trade union or faculty association. A minimum of one signatory is required for the nomination of a Representative at Queen's University.

<u>Name (please print)</u>	<u>Department</u>	<u>University Email</u>	<u>Signature</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Along with this nomination form, please submit a short biography which will be included with your name on the online voting ballot (150 words max).

Statement of Nominee:

I _____ accept the nomination and certify that I am an employee of Queen's University who participates in the Revised Pension Plan of Queen's University, who is not represented by a trade union or faculty association.

Date Signature of Nominee