

Public Service Association of South Australia Inc.
PSA / CPSU WORKSITE REPRESENTATIVE
NOMINATION FORM



WORKSITE DETAILS	
WORKSITE	
WORKSITE NUMBER	
DEPARTMENT / AGENCY	
WORKSITE ADDRESS	
	[Postcode]
EMAIL ADDRESS	

NOMINEE	
<i>I accept nomination as a CPSU / PSA Worksite Representative.</i>	
NAME	
CLASSIFICATION	
MEMBER NUMBER	
CONTACT NUMBERS	[Work] [Mobile]
EMAIL ADDRESS	
PREVIOUSLY A PSA WORKSITE REPRESENTATIVE?	Yes <input type="checkbox"/> No <input type="checkbox"/>

SIGNED:	DATE: / /
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NOMINATOR	
<i>I hereby nominate the nominee for the position of CPSU / PSA Worksite Representative.</i>	
NAME	
MEMBER NUMBER	
SIGNED:	DATE: / /

SECONDER	
<i>I hereby second the nominee for the position of CPSU / PSA Worksite Representative.</i>	
NAME	
MEMBER NUMBER	
SIGNED:	DATE: / /

Nominations must be supported by two financial members located in the Worksite and received by close of nomination date.
 Nominations must be marked and posted to:

ATTENTION: Branch Secretary
PSA/CPSU (SPSF Group) SA Branch
GPO Box 2170
ADELAIDE SA 5001

Authorised by Nev Kitchin, General Secretary, Public Service Association of SA, Community & Public Sector Union, SPSF Group,
 122 Pirie Street, Adelaide SA 5000 Phone (08) 8205 3200 Fax (08) 8223 6509 PP565001/0000

OFFICE USE ONLY	
Department Code:	Worksite Number:
Processed By:	Date:
Resignation Date:	Processed By: