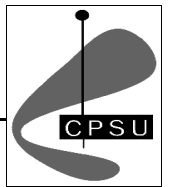




**CPSU/PSA WORKSITE REPRESENTATIVE ELECTIONS**  
It's time to nominate, re-nominate or hold elections



**CPSU/PSA Worksite Representative Nomination Form**

**Worksite Details**

Worksite \_\_\_\_\_ Worksite No. \_\_\_\_\_

Department/Agency \_\_\_\_\_

Worksite address \_\_\_\_\_

Postcode \_\_\_\_\_

E-mail address \_\_\_\_\_

**Nominee**

I accept nomination as a CPSU/PSA Worksite Representative

Name \_\_\_\_\_ Classification \_\_\_\_\_

Member no. \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

Work ph: \_\_\_\_\_ Mobile \_\_\_\_\_ Fax no. \_\_\_\_\_

**Nominator**

I hereby nominate the nominee for the position of CPSU/PSA Worksite Representative

Name \_\_\_\_\_

Member no. \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

**Secunder**

I hereby second the nominee for the position of CPSU/PSA Worksite Representative

Name \_\_\_\_\_

Member no. \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

Nominations must be supported by two financial members located in the worksite. All nominations must be forwarded to the Branch Secretary, CPSU/PSA Group SA Branch to be received by close of nomination date. Nominations should be posted to GPO Box 2170, Adelaide, SA 5001 and marked attention Branch Secretary, CPSU/PSA Group SA Branch.

Authorised by Jan McMahon, Branch Secretary, CPSU/PSA (SPSF) Group, SA Branch, 122 Pirie Street, Adelaide SA 5000  
Phone 8205 3200 Fax 8223 6509

**Office Use Only**

Dept. code \_\_\_\_\_ Worksite no. \_\_\_\_\_

Processed by \_\_\_\_\_ Date \_\_\_\_\_

Resignation date \_\_\_\_\_ Processed by \_\_\_\_\_