



## LCPD LEADERSHIP NOMINATION FORM

Officers will be elected by voting members for a two-year term, with the option of consecutive terms.

Below are the Leadership Positions.

- (i) Chair (Current Chair has served two terms)
- (ii) First Vice Chair (Current Vice Chair has served two terms)
- (iii) Second Vice Chair (Current Second Vice Chair has served two terms)
- (iv) Secretary (Current Secretary has served three terms)
- (v) Past Chair (Past Chair is not current)

You can fill out the form for yourself or another individual you are nominating.

Please indicate which position you are interested in: \_\_\_\_\_

If you are interested in being involved in a Standing Committee, please mark the boxes below.

- Health
- Services for People with Disabilities
- Education
- Mental Health Services

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Is this a mobile/cell phone number?

Yes

No

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

The preferred method for contact is:

Phone

Text

Email

Employment/Position \_\_\_\_\_

Submitted or nominated by: \_\_\_\_\_

Please tell us why you or the nominee would be a valuable member of the Leadership Board. Include ways that you can help strengthen the LCPD and what assets you will bring to the LCPD.

Please include a copy of your resume and return it to: [Janetewade@hotmail.com](mailto:Janetewade@hotmail.com)