



DERBYSHIRE NEIGHBOURHOOD WATCH

Board Member Nomination

DERBYSHIRE NEIGHBOURHOOD WATCH ASSOCIATION TRUST

Please complete in block capitals or type directly into the fields.

A proposer and seconder are required. Submit the signed form ahead of the AGM.

Election year: _____ AGM date: _____ Return by: _____

01 NOMINEE DETAILS

Full name

Home / correspondence address

Postcode

Contact telephone

Email address

Member of a Neighbourhood Watch scheme?

☐ Yes

☐ No

If yes: scheme name / area

02 ROLE AND INTEREST

Position sought (tick one):

☐ Chair

☐ Vice Chair

☐ Secretary

☐ Treasurer

☐ Member

Other role / additional detail (if needed)

Why would you like to contribute? (brief statement)

03 PROPOSER AND SECONDER

A proposer and seconder are required; use scheme members where applicable.

Proposer - name

Signature

Date

Secunder - name

Signature

Date

NOMINEE CONSENT

I agree to be nominated and meet the governance expectations of the role.

Nominee signature: _____

Date: _____