



**NSDA BOARD OF DIRECTORS  
NOMINATION AGREEMENT FORM**

I, \_\_\_\_\_, agree to allow my name to stand for the  
NSDA board of director position of \_\_\_\_\_ for the 2018-2020  
term.

I understand that the Board governs the organization and manages its affairs in order to meet the organization's mandate to regulate dietetic practice in the interest of Nova Scotians. The Board's strategic plan is consistent with the capabilities of the executive manager and committees to achieve the plan, and the Board carries out its job with discipline, emphasizing strategic rather than short-term issues, policy rather than single events, and group rather than individual decisions.

The following three NSDA members, in good standing, support my nomination.

1. \_\_\_\_\_  
Signature

\_\_\_\_\_  
NSDA Registration Number

2. \_\_\_\_\_  
Signature

\_\_\_\_\_  
NSDA Registration Number

3. \_\_\_\_\_  
Signature

\_\_\_\_\_  
NSDA Registration Number

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
NSDA Registration Number

**SCAN & EMAIL TO NSDA**

**info@nsdassoc.ca**