



NOMINATION FORM

(Please Print)

I, _____ **(Nominator name) hereby nominate**

_____ **(Nominee name), a member in good**

standing, to run for the position of _____

in the CUPE Local 59 By-Election on October 21, 2025.

Signature of Nominator

Department

Date

Signature of Nominee

Department

Date

Candidate Email : _____

Cell Number : _____

RETURN ORIGINAL SIGNED FORM BY:
EMAIL admin@cupe59.ca (you will receive email confirmation)

****DEADLINE is 1:00pm on Friday, September 19, 2025****

**CUPE LOCAL 59 OFFICE
106 33rd Street East
306-652-6963**