

## **NOMINATION**

## President ParlAmericas Open Parliament Network

The following two sections must be completed and submitted to the **International Secretariat of ParlAmericas** by email: <a href="mailto:info@parlamericas.org">info@parlamericas.org</a>. Please note that nominations will be accepted up until 18:00 the day before the Elections (consult the current OPN election advisory for date).

PART A: To be completed by the nominee	
I,	, indicate my willingness to serve in the position of
	ment Network, and, should I be elected, pledge to commit the
time and effort required to carry out the d	luties and responsibilities of this position.
Nominee's signature	
Name of Parliament	
Date	
PART B: To be completed by the Preside *If the nominating parliamentarian is	ding Officer of Parliament the Presiding Officer, Part B may be left blank.*
	(name of nominee) for the
indicated role.	
Name of Presiding Officer	
Signature of Presiding Officer	
Date	