Regional Councillor Nomination Form



(Nominated by Members)

Name of Member:	
Nominee's signature:	
I,	l,
(Full name of first nominator)	(Full name of second nominator)
(Company Name)	(Company Name)
in accordance with the Constitution hereby	in accordance with the Constitution hereby
nominate	second the nomination of
(Full name of Candidate)	
as a candidate for election as a Regional Counc	illor of Business NSW, Central Coast
(Signature of first nominator)	(Signature of second nominator)
(D-(-)	(D-(-)
(Date)	(Date)

N.B. The First and Second nominators must be voting members of Business NSW, Central Coast region. The completed nomination form together with a summary of relevant experience and qualifications & CV, in the attached form, to be returned to:

Scott Goold Regional Director Business NSW, Central Coast Zenith Building Unit 13, Level 2 6 Reliance Drive, Tuggerah NSW 2259 Email: scott.goold@businessnsw.com

Closing date for receipt of nominations: 7:30am Monday 4 August 2025