**2025 ASSOCIATE COUNCILLOR NOMINATION FORM**

**Only CCNZ Principal Business Partner, Core or Major Associates are eligible to make nominations**

Company making nomination

Name of person making nomination (printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of person making nomination \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*Person being Nominated:**

Name of person being nominated (printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Person being Nominated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Notes:**

**\*Nominees for the positions must be representatives of CCNZ’s Principal Business Partner, Core or Major Associates.**

**Please complete form and return to National Office**

**by email to** [alan@civilcontractors.co.nz](mailto:alan@civilcontractors.co.nz) **no later than 14 July 2025**