



**SECTION STANDING COMMITTEES, TERM 2015-2019
NOMINEE'S CONSENT FORM**

I confirm that I accept nomination by:

(Insert name of *IFLA qualified Member or Affiliate* who is nominating you)

for a place on the following IFLA Section Standing Committee
(*Insert name of IFLA section*)

I also confirm that:

- I have a working knowledge of the following IFLA Languages:
 Arabic Chinese English French German Russian Spanish
(Please indicate by)
- I have reasonable expectation of attending meetings of the IFLA Section Standing Committee for which I have been nominated for this term of office, without cost to IFLA.

Signature of nominee

Date

PLEASE USE BLOCK CAPITAL LETTERS FOR YOUR CONTACT DETAILS

Name:	
Position:	
Institution/Organization	
Address:	
Town/City:	
Postal code/Zipcode:	
Country:	
Telephone:	+ ()
Fax:	+ ()
Email:	

Please turn over

Brief summary of relevant expertise and interest in the field of the section:

**Please make sure that this form will reach IFLA HQ
ON OR BEFORE WEDNESDAY, 11 FEBRUARY 2015**

TO

EMAIL:
elections@ifla.org

FAX:
+ 31 70 3834827

Post:
IFLA Section Nominations
IFLA HQ
P.O. Box 95312
2509 CH THE HAGUE
The Netherlands

**To be valid, this form must be accompanied by a completed
“Nomination form for Standing Committee Members for IFLA Sections,
August 2015 – August 2019”.**