

SMHA Board of Directors Nomination Form

Note: This form must be received via email to smha@sudburyminorhockey.ca no later than 6:00 pm on June 11, 2024 or it will be considered invalid as it will be past the due date.

Applicant Name: _____

Name of Nominator #1 (a member of SMHA): _____

Name of Nominator #2 (a member of SMHA): _____

Applicant occupation: _____

Have you served on a minor hockey association's board previously: YES ☐ NO ☐

If yes, which association, when and in what capacity:

Have you volunteered within Sudbury Minor Hockey Association previously: YES ☐ NO ☐

If yes, when and in what capacity:

What special skills/abilities would you bring to the board, if you were a successful candidate?

If you are not a successful candidate, would you be interested in serving on sub-committees of the SMHA Board of Directors: YES ☐ NO ☐

If yes, is there a particular area or areas that interest(s) you? Please elaborate.

Thank you for your application!! Please submit to smha@sudburyminorhockey.ca

This application will be reviewed by the Selection Committee and you will be notified if your name moves forward for election purposes at the AGM.

SMHA Board of Directors