



Institute of  
Public Administration  
New Zealand

**Nomination for the  
Institute of Public Administration New Zealand  
Board**

I, \_\_\_\_\_

as a member of the Institute of Public Administration New Zealand, wish to nominate

\_\_\_\_\_

**as**

- President**
- Vice President**
- Treasurer**
- Member of the Board.**

I, \_\_\_\_\_, accept this nomination.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Please supply a 200 word maximum biography of the new nominee to the IPANZ Office no later than **2pm on Friday 19 July 2019.**

This nomination form must be received by the Office Manager no later than 2pm on **Friday 19 July 2019.**

Office Manager  
IPANZ  
PO Box 5032  
Wellington 6140

admin@ipanz.org.nz  
Subject Line: IPANZ Board Nomination