



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 Tuesday 21 July 2020.**

This nomination form must be received by the Office Manager no later than 2pm on **Tuesday 21 July 2020.**

Office Manager
IPANZ
PO Box 5032
Wellington 6140

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