

Moss Side Probation Office

87 Moss Lane West

Moss Side

Manchester

M15 5PE

**NOMINATION FORM FOR BRANCH REPRESENTATIVES - 2020/21**

**1. Name/ Membership Number.....................................................................**

**2. Nominated for ;**

\*Steward

\*Branch Officer (please circle post(s))

1. **Chairperson**
2. **Secretary**
3. **Treasurer**
4. **Education Co-ordinator**
5. **Life-Long Learning Co-ordinator**
6. **Equality Co-ordinator**
7. **Health and Safety Officer**
8. **Communications Officer**
9. **International Officer**
10. **Membership Officer**
11. **Young Members’ Officer**
12. **Retired Members’ secretary**
13. **Welfare Officer**
14. **Branch Labour Link Officer**
15. **Assistant Secretary (x 2) – CAFCASS (National Convenor) /Probation**
16. **Vice - Chairperson**
17. **Women’s Officer**
18. **Disabled Members’ Officer**
19. **Environmental Officer**

\*Health & Safety Rep

\*Union Learning Rep

\*CAFCASS Committee Rep

**4. Signed and Dated:.....................................................................**

**NOMINATIONS MUST BE MADE BY TWO CURRENT BRANCH UNISON MEMBERS**

**We hereby nominate the above for the posts as identified**

**Member1 Name /Membership Number...................................................................................**

**Signature................................................**

**Member 2.Name/Membership Number....................................................................................**

**Signature.................................................**

**Please return to branch address as ASAP or email to** **unison20085@hotmail.co.uk**