AUSTRALIAN PHOTOGRAPHIC SOCIETY INC
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NOMINATION FORM

POSITION YOU ARE NOMINATING FOR:	
YOUR NAME:	
HONOURS: *(if applicable)*	
ADDRESS:	
DATE OF JOINING APS:	
POSITIONS HELD IN APS:	
POSITIONS HELD IN OTHER PHOTOGRAPHIC BODIES:	
NUMBER OF YEARS YOU HAVE HELD THESE POSITIONS:	
MEMBERSHIP OF OTHER PHOTOGRAPHIC BODIES:	
PERSONAL AND/OR WORK EXPERIENCE THAT WILL ASSIST YOU IN YOUR APPLICATION TO HOLD THIS POSITION: *(You may attach in a separate sheet if necessary)*	
YOUR SIGNATURE:	
NAME & SIGNATURE OF PERSON NOMINATING YOU:	
NAME & SIGNATURE OF SECONDER NOMINATING YOU:	

DATE: