



NOMINATION FORM

Candidate for: RAIC Director Representing Interns and Intern Architects

*individual signatures may be submitted on separate forms

Name: _____

Address: _____

Telephone: _____ Alt. Telephone: _____

Email: _____

Signature: _____

Nominators

(1) Name: _____

Address: _____

Signature: _____

(4) Name: _____

Address: _____

Signature: _____

(2) Name: _____

Address: _____

Signature: _____

(5) Name: _____

Address: _____

Signature: _____

(3) Name: _____

Address: _____

Signature: _____

Please return to:
RAIC | IRAC
6118 James Bell Drive,
Manotick, ON K4M 1B3
dcatley@raic.org

