

Date Submitted: _____

MOUNTAIN AREA SERVICE COMMITTEE NOMINATION FORM

Nominee: _____ (must be present)

Position: _____

Submitted by: _____ (must be present)

Seconded by: _____, of _____

The requirements as stated in the MASC guidelines for this position will be read aloud, and the following questions will be asked to the nominee and answered during the nominations portion of the MASC meeting.

Does the nominee understand the responsibilities of this position? _____

Is the nominee willing to serve the Mountain Area of NA for the full duration of the term of this position? _____

Does the nominee meet the minimum requirements for the position? _____

Has the nominee completed and submitted the MASC service resume'? _____

Are there any questions for the nominee from voting members? _____

Notes from discussion: _____

Date of Vote: _____ Quorum: _____ Yes: _____ No: _____ Abst: _____

Results Carried: _____ Failed: _____ Runoff Needed: _____