

Application for CCCI Board Vacancy 2024 AGM

Applicants Name	
Applicants Business Name	
Email	
Contact Telephone Number	

Why are you applying for this role? (150 words Max)
What can you bring to this role? (150 words Max)

Nominations to support your application	
NB: 5 Nominations are required to validate your application. Nominators are required to sign this form. Nominators must be current CCCI Members. Only have one nomination per member business.	
Name and Business of Nominator	Signature of Nominator
1.	
2.	
3.	
4.	
5.	

This form needs to be completed in full, with the names and signatures of your 5 Nominators. Please scan your completed form and email it to: oriana@chichestercci.org.uk no later than noon on 23rd September 2024. Incomplete forms or forms received after the closing date 23/09/24 will not be considered.

In the event of an “Vote” being required at the AGM, the CCCI reserves the right to include/share the information in this application form with the Members. If necessary this will be included on the official voting forms that will be sent out to the Members.