SASKATCHEWAN DEAF AND HARD OF HEARING SERVICES INC.

Nomination for Board Member

I, _____, a current member of SDHHS Inc., hereby
(please print name)

nominate _____ for a position on the Board of Directors of
(please print name)

Saskatchewan Deaf and Hard of Hearing Services Inc., for the following reasons:

_____

_____

Signature of Nominator: _____ Date: _____

Contact information: (email. TTY, and/or phone):_____

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I, _____, hereby **accept** this nomination to the SDHHS
(please print name)

Board of Directors and agree to serve as Director if elected. If I am not already a member of SDHHS, I agree to become one for the duration of my term(s) of office.

Signature of Nominee: _____ Date: _____

Contact information: (email. TTY, and/or phone): _____

Forward to:
SDHHS Nominations Committee,
c/o: SDHHS 3-511 1st Ave N, Saskatoon, SK S7K 1X5