**APPENDIX C**

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| **REGIONAL DISABLED MEMBERS COMMITTEE 2020/21** |

**REGIONAL DISABLED MEMBERS OFFICER POSITIONS**

Please indicate whether you wish to stand for either of the positions below.

Please tick the relevant box/es

|  |  |
| --- | --- |
| **CHAIR** |  |
|  |  |
| **VICE-CHAIR** (2 positions) |  |
|  |  |

Please note, in the event that a man is elected to one of the three Officer positions, the other positions must be filled by two women.

|  |  |
| --- | --- |
| **NAME** |  |
|  |  |
| **SIGNATURE** |  |
|  |  |
| **Email / Telephone** please print |  |

Completed forms should be returned to

Helen Chater [h.chater@unison.co.uk](mailto:h.chater@unison.co.uk)

**by no later than 12 noon on Tuesday 22 December 2020**