**THE EIGHTEENTH SESSION OF THE INTERGOVERNMENTAL COORDINATION GROUP FOR THE TSUNAMI EARLY WARNING AND MITIGATION SYSTEM IN THE NORTH EASTERN ATLANTIC, THE MEDITERRANEAN AND CONNECTED SEAS
(ICG/NEAMTWS-XVIII)**

**Biennial Elections for Chairperson**

**Form A – Chairperson**

Name of Member State: ……………………………………………………………………...

Name of Nominee: ……………………………………………………………………………

I declare that I am prepared to stand for election to the post of Chairperson of the ICG/NEAMTWS, if elected, to take an active part in the work of it.

Signature of the Nominee: ………………………………………………….

|  |  |  |
| --- | --- | --- |
|  | *Seconder 1* | *Seconder 2* |
| Member State of the ICG/NEAMTWS Name in capitalsPositionSignature | ……………….……………….……………….………………. | ………………………………………………………………………… |

Date sent to the IOC Secretariat Date and time received by the IOC Secretariat

…………………………………… ……………………………………………………..

**THE EIGHTEENTH SESSION OF THE INTERGOVERNMENTAL COORDINATION GROUP FOR THE TSUNAMI EARLY WARNING AND MITIGATION SYSTEM IN THE NORTH-EASTERN ATLANTIC, THE MEDITERRANEAN AND CONNECTED SEAS
(ICG/NEAMTWS-XVIII)**

**Biennial Elections for Chairperson**

**Form B – Vice-chairperson**

Name of Member State: ……………………………………………………………………...

Name of Nominee: ……………………………………………………………………………

I declare that I am prepared to stand for election to the post of Vice-chairperson of the ICG/NEAMTWS and, if elected, to take an active part in the work of it.

Signature of the Nominee: ………………………………………………….

|  |  |  |
| --- | --- | --- |
|  | *Seconder 1* | *Seconder 2* |
| Member State of the ICG/NEAMTWS Name in capitalsPositionSignature | ……………….……………….……………….………………. | ………………………………………………………………………… |

Date sent to the IOC Secretariat Date and time received by the IOC Secretariat

…………………………………… …………………………………………………

**THE EIGHTEENTH SESSION OF THE INTERGOVERNMENTAL COORDINATION GROUP FOR THE TSUNAMI EARLY WARNING AND MITIGATION SYSTEM IN THE NORTH EASTERN ATLANTIC, THE MEDITERRANEAN AND CONNECTED SEAS
(ICG/NEAMTWS-XVIII)**

**Biennial Elections for Officers**

**Form C – CV of nominee**

[NAME]

Date of birth:

Languages: Address:

Phone number:
Fax number:
Email:

*CURRENT POSITION*

[Please insert text]

*EDUCATION*

[Please insert text]

*PREVIOUS PROFESSIONAL EXPERIENCE*

[Please insert text]