

## Call for Nominations for SASW Council

**Position for Nomination:** \_\_\_\_\_

Name: \_\_\_\_\_

SASW Registration Number: \_\_\_\_\_

Address: \_\_\_\_\_

Credentials: \_\_\_\_\_

City/Town: \_\_\_\_\_

Number of years in practice: \_\_\_\_\_

Area(s) of practice and contribution to the profession:

---

---

---

---

---

Previous/present involvement with SASW Branch/Committee:

---

---

---

---

---

Nature of contribution(s) to be made on SASW Council:

---

---

---

---

---

Signature of Nominee: \_\_\_\_\_

Nominators - Registered Social Workers	Signature of Nominators
1.	
2.	
3.	

Deadline for submitting nominations: March 15, 2017  
Send completed form to SASW Office – 2110 Lorne Street, Regina, SK, S4P 2M5  
Email: [sasw@accesscomm.ca](mailto:sasw@accesscomm.ca) Fax: 306.545-1895