

Board Nomination Form



Annual Board Election 2026	
Full Name of Candidate	
Address	
Contact Phone Number	
Email Address	

All Candidates must be proposed by a current financial member of Palliative Care South Australia (PCSA). Please contact PCSA (ea@palliativecaresa.org.au) if you would like assistance to identify a Proposer.

While we welcome candidates from diverse backgrounds and skill sets, we are particularly interested in applicants with experience or expertise in one or more of the following areas:

- ☐ Marketing
- ☐ Business Development
- ☐ Philanthropy
- ☐ CALD (Culturally and Linguistically Diverse Communities)
- ☐ Advocacy

PROPOSER

I nominate the above member as a candidate for election to the Board of Palliative Care South Australia and confirm that, to the best of my knowledge, they possess the skills and experience indicated above.

Name of Proposer	Email Address	Signature	Date

AGREEMENT OF CANDIDATE

I am a current PCSA Individual Member or Corporate Representative. A Corporate Representative means a person appointed to represent a Corporate Member under clause 6.1 of the Constitution.

I agree to be nominated as a Candidate to stand for election to the Board and if elected will undertake the duties of the position.

Signature		Date	
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Please include a photo and biography with your nomination.

Refer to the current PCSA Board member biographies
<https://palliativecaresa.org.au/our-board/>

This form must be completed and received by the PCSA Secretary by

4.00pm, 29th October 2026

Email to PCSA members@palliativecaresa.org.au

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OFFICE USE ONLY	
Nominee confirmed as current financial member	☐ Yes ☐ No
Proposer confirmed as current financial member	☐ Yes ☐ No
Staff member name confirming the above information	
Date reviewed	