

**Nomination Form**  
**Vice President**  
**ISGH Election 2019**

**Instructions:**

- 1) Please read the instructions on this form and the enclosed guidelines carefully and fill out the Nomination Form accordingly. An incomplete or inaccurate form may cause delays and/or outright rejection of the Nomination Form by the Election Commission.
  - 2) Do **NOT** nominate an eligible member for more than **ONE** position.
  - 3) The Nomination Form **MUST** reach or be delivered to the Election Commission ISGH Main Center on or before **12:00 Noon, Sunday, October 20, 2019**
  - 4) Please consult with the nominee and obtain his/her consent before submitting any nomination. The *Nomination form MUST be accompanied by the **Acceptance Form** from the Nominee. Otherwise it may be rejected.*
  - 5) Persons having committed a State or Federal felony offense are **NOT** eligible for nomination. Nominee's Driver License copy **MUST** be provided so that EC may conduct necessary checks.
- .....

(PLEASE, PLEASE , PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)

**Information about Nominating Member: (about yourself):**

**Name:** \_\_\_\_\_  
                    First  Middle  Last

**Telephone:** (     ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

I, the above named ISGH Member hereby submit the following nomination for the specified position:

**VICE PRESIDENT:**

**Name:** \_\_\_\_\_  
                    First  Middle  Last

**Telephone:** (     ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

By signing my name below, I, the Nominator, state that I am aware of the various conditions and eligibility requirements for this position. I further declare that I have attached the Acceptance Form duly signed by Nominee as well as a copy of the Driver License or ID of Nominee.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Nominator)

**Nomination Form**  
**Treasurer**  
**ISGH Election 2019**

**Instructions:**

- 1) Please read the instructions on this form and the enclosed guidelines carefully and fill out the Nomination Form accordingly. An incomplete or inaccurate form may cause delays and/or outright rejection of the Nomination Form by the Election Commission.
  - 2) Do **NOT** nominate an eligible member for more than **ONE** position.
  - 3) The Nomination Form **MUST** reach or be delivered to the Election Commission ISGH Main Center on or before **12:00 Noon, Sunday, October 20, 2019**
  - 4) Please consult with the nominee and obtain his/her consent before submitting any nomination. The *Nomination form MUST be accompanied by the **Acceptance Form** from the Nominee. Otherwise it may be rejected.*
  - 5) Persons having committed a State or Federal felony offense are **NOT** eligible for nomination. Nominee's Driver License copy **MUST** be provided so that EC may conduct necessary checks.
- .....

(PLEASE, PLEASE , PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)

**Information about Nominating Member: (about yourself):**

**Name:** \_\_\_\_\_  
                    First  Middle  Last

**Telephone:** (     ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

I, the above named ISGH Member hereby submit the following nomination for the specified position:

**TREASURER:**

**Name:** \_\_\_\_\_  
                    First  Middle  Last

**Telephone:** (     ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

By signing my name below, I, the Nominator, state that I am aware of the various conditions and eligibility requirements for this position. I further declare that I have attached the Acceptance Form duly signed by Nominee as well as a copy of the Driver License or ID of Nominee.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Nominator)

**Nomination Form**

# Zonal Director

## ISGH Election 2019

### **Instructions:**

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- 2) Do **NOT** nominate an eligible member for more than **ONE** position.
- 3) The Nomination Form **MUST** reach or be delivered to the Election Commission ISGH Main Center on or before **12:00 Noon, Sunday, October 20, 2019**
- 4) Please consult with the nominee and obtain his/her consent before submitting any nomination. The *Nomination form MUST be accompanied by the **Acceptance Form** from the Nominee. Otherwise it may be rejected.*
- 5) Persons having committed a State or Federal felony offense are **NOT** eligible for nomination. Nominee's Driver License copy **MUST** be provided so that EC may conduct necessary checks,

(PLEASE, PLEASE, PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)

### **Information about Nominating Member: (about yourself):**

**Name:** \_\_\_\_\_  
First Middle Last

**Telephone:** ( ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

I am an eligible voting member from the \_\_\_\_\_ Zone.

I, the above named ISGH Member hereby submit the following nomination for the specified position:  
(circle **ONLY** one below)

**DIR NW ZONE**

**DIR SOUTH ZONE**

**DIR SE ZONE**

**Name:** \_\_\_\_\_  
First Middle Last

**Telephone:** ( ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

*(Both Nominee and Nominating member shall be residents of the same Zone).*

Nominee is an eligible voting member from the \_\_\_\_\_ Zone.

By signing my name below, I, the Nominator, state that I am aware of the various conditions and eligibility requirements for this position. I further declare that I have attached the Acceptance Form duly signed by Nominee as well as a copy of the Driver License or ID of Nominee.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Nominator)

# Nomination Form

## North Zone ICs' Associate Director

### ISGH Election 2019

**Instructions:**

- 1) Please read the instructions on this form and the enclosed guidelines carefully and fill out the Nomination Form accordingly. An incomplete or inaccurate form may cause delays and/or outright rejection of the Nomination Form by the Election Commission.
- 2) Do **NOT** nominate an eligible member for more than **ONE** position.
- 3) The Nomination Form **MUST** reach or be delivered to the Election Commission ISGH Main Center on or before **12:00 Noon, Sunday, October 20, 2019**
- 4) Please consult with the nominee and obtain his/her consent before submitting any nomination. The *Nomination form MUST be accompanied by the **Acceptance Form** from the Nominee.*
- 5) Persons having committed a State or Federal felony offense are **NOT** eligible for nomination. Nominee's Driver License copy **MUST** be provided so that EC may conduct necessary checks.

(PLEASE, PLEASE, PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)

**Information about Nominating Member: (about yourself):**

Name: \_\_\_\_\_  
                           First  Middle  Last

Telephone: (     ) \_\_\_\_\_ E-mail \_\_\_\_\_

I am an eligible voting member from \_\_\_\_\_ IC of the North Zone.

I, the above named ISGH Member hereby submit the following nomination for the specified position:  
 (circle ONLY one below)

**AD Woodlands IC     AD Adel Rd IC     AD Cypress IC     AD Champions IC**

Name: \_\_\_\_\_  
                           First  Middle  Last

Telephone: (     ) \_\_\_\_\_ E-mail \_\_\_\_\_

*(Both the Nominee and Nominating member shall be residents of the same Islamic Center).*

Nominee is an eligible voting member from \_\_\_\_\_ IC of the North Zone.

By signing my name below, I, the Nominator, state that I am aware of the various conditions and eligibility requirements for this position. I further declare that I have attached the Acceptance Form duly signed by Nominee as well as a copy of the Driver License or ID of Nominee.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
 (Nominator)



## Acceptance of Nomination for 2019 ISGH Elections

# VICE PRESIDENT

(For a nomination to be valid, this form **MUST** accompany the Nomination Form)

I, \_\_\_\_\_ of  
[PLEASE PRINT YOUR FULL NAME]

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ACCEPT** nomination for the position of *Vice President* and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### **For BOD (Majlis -e- Shura) and Executive Body Position Nominees:**

All nominees for a position on the Board of Directors are required to sign a statement that he/she (person accepting nomination for a position on the Board of Directors) is qualified per ISGH Bylaws, Article VII, Section 4. ISGH Bylaws, Article VII, Section 4, as outlined below:

#### ***"Qualification of Nominees and Announcement of Nomination:***

##### **A. Qualification of Nominees for a position on the Board of Directors:**

(i) Besides being an eligible voting member for at least TWO years, each nominee must meet all of the following conditions:

- (a) Has served or is serving one full two-year term as an ISGH Board of Director or Associate Director.
- (b) Is not serving and has not served, during the two-year period immediately preceding the date of nomination, as a director, officer, employee, Imam or Ameer of any Islamic organization not affiliated with ISGH, at the time of nomination.
- (c) Has not been an employee of ISGH at any time during the two year period immediately preceding the date of nomination.
- (d) Has not been removed from an elected office of ISGH (as per Bylaws Article VII Section 8) or expelled from ISGH membership for ethical reasons (as per Bylaws Article VII Section 9).
- (e) Has signed a statement that he:
  - Does not himself seek an elected position
  - Does not put his decisions or other people's decisions over and above the decisions of Allah in the Quran and Sunnah
  - Is obedient to Shariah
  - Does not commit major sins
  - Persons having committed a State or Federal felony offense are **NOT** eligible for nomination

I, \_\_\_\_\_ by signing my name  
[PLEASE PRINT YOUR FULL NAME]

below, declare that I fulfill the above stated requirements, or other additional such eligibly requirements in the ISGH C&B, to be eligible nominee for a BOD (Majlis-e-Shura) and Executive Body position.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: PLEASE, YOU MUST INCLUDE A COPY OF DRIVER LICENSE/ID (of the Nominee)**

## Acceptance of Nomination for 2019 ISGH Elections

### TREASURER

(For a nomination to be valid, this form **MUST** accompany the Nomination Form)

I, \_\_\_\_\_ of  
[PLEASE PRINT YOUR FULL NAME]

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ACCEPT** nomination for the position of *Treasurer* and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### **For BOD (Majlis -e- Shura) and Executive Body Position Nominees:**

All nominees for a position on the Board of Directors are required to sign a statement that he/she (person accepting nomination for a position on the Board of Directors) is qualified per ISGH Bylaws, Article VII, Section 4. ISGH Bylaws, Article VII, Section 4, as outlined below:

#### ***"Qualification of Nominees and Announcement of Nomination:***

##### **A. Qualification of Nominees for a position on the Board of Directors:**

(i) Besides being an eligible voting member for at least TWO years, each nominee must meet all of the following conditions:

- (a) Has served or is serving one full two-year term as an ISGH Board of Director or Associate Director.
- (b) Is not serving and has not served, during the two-year period immediately preceding the date of nomination, as a director, officer, employee, Imam or Ameer of any Islamic organization not affiliated with ISGH, at the time of nomination.
- (c) Has not been an employee of ISGH at any time during the two year period immediately preceding the date of nomination.
- (d) Has not been removed from an elected office of ISGH (as per Bylaws Article VII Section 8) or expelled from ISGH membership for ethical reasons (as per Bylaws Article VII Section 9).
- (e) Has signed a statement that he:
  - Does not himself seek an elected position
  - Does not put his decisions or other people's decisions over and above the decisions of Allah in the Quran and Sunnah
  - Is obedient to Shariah
  - Does not commit major sins
  - Persons having committed a State or Federal felony offense are **NOT** eligible for nomination

I, \_\_\_\_\_ by signing my name  
[PLEASE PRINT YOUR FULL NAME]

below, declare that I fulfill the above stated requirements, or other additional such eligibly requirements in the ISGH C&B, to be eligible nominee for a BOD (Majlis-e-Shura) and Executive Body position.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note:** PLEASE, YOU MUST INCLUDE A COPY OF DRIVER LICENSE/ID (of the Nominee)

## Acceptance of Nomination for 2019 ISGH Elections

### ZONAL DIRECTOR

(For a nomination to be valid, this form **MUST** accompany the Nomination Form)

I, \_\_\_\_\_ of  
[PLEASE PRINT YOUR FULL NAME]

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ACCEPT** nomination for the position of *Director* \_\_\_\_\_ *Zone* and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### **For BOD (Majlis -e- Shura) and Executive Body Position Nominees:**

All nominees for a position on the Board of Directors are required to sign a statement that he/she (person accepting nomination for a position on the Board of Directors) is qualified per ISGH Bylaws, Article VII, Section 4. ISGH Bylaws, Article VII, Section 4, as outlined below:

#### ***"Qualification of Nominees and Announcement of Nomination:***

##### **A. Qualification of Nominees for a position on the Board of Directors:**

(i) Besides being an eligible voting member for at least TWO years, each nominee must meet all of the following conditions:

- (a) Has served or is serving one full two-year term as an ISGH Board of Director or Associate Director.
- (b) Is not serving and has not served, during the two-year period immediately preceding the date of nomination, as a director, officer, employee, Imam or Ameer of any Islamic organization not affiliated with ISGH, at the time of nomination.
- (c) Has not been an employee of ISGH at any time during the two year period immediately preceding the date of nomination.
- (d) Has not been removed from an elected office of ISGH (as per Bylaws Article VII Section 8) or expelled from ISGH membership for ethical reasons (as per Bylaws Article VII Section 9).
- (e) Has signed a statement that he:
  - Does not himself seek an elected position
  - Does not put his decisions or other people's decisions over and above the decisions of Allah in the Quran and Sunnah
  - Is obedient to Shariah
  - Does not commit major sins
  - Persons having committed a State or Federal felony offense are **NOT** eligible for nomination

I, \_\_\_\_\_ by signing my name  
[PLEASE PRINT YOUR FULL NAME]

below, declare that I fulfill the above stated requirements, or any other additional such eligibly requirements in the ISGH C&B, to be eligible nominee for a BOD (Majlis-e-Shura) position.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note:** PLEASE, YOU **MUST** INCLUDE A COPY OF DRIVER LICENSE/ID (of the **Nominee**)



## Acceptance of Nomination for 2019 ISGH Elections

### ASSOCIATE DIRECTOR

(For a nomination to be valid, this form **MUST** accompany the Nomination Form)

I, \_\_\_\_\_ of  
[PLEASE PRINT YOUR FULL NAME]

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ACCEPT** nomination for the position of **AD** of \_\_\_\_\_ **IC** and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections.

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### **For Associate Director Position Nominees:**

All nominees for a position of Associate Director are required to sign a statement that he/she (person accepting nomination for an Associate Director position) is qualified per ISGH Bylaws, Article VII, Section 4. ISGH Bylaws, Article VII, Section 4, as outlined below:

#### ***"Qualification of Nominees and Announcement of Nomination:"***

##### A. Qualification of Nominees for a position of Associate Director:

(i) Besides being an eligible voting member for at least one year, each nominee for a position of Associate Director must meet all of the following conditions:

- (a) Has been involved in ISGH as a Board of Director, Associate Director, or Area Representative, or in any of the ISGH standing or special committees, or as faculty member in any of the ISGH or affiliated educational entities.
- (b) Is not serving and has not served, during the two-year period immediately preceding the date of nomination, as a director, officer, employee, Imam or Ameer of any Islamic organization not affiliated with ISGH, at the time of nomination.
- (c) Has not been an employee of ISGH at any time during the two year period immediately preceding the date of nomination.
- (d) Has not been removed from an elected office of ISGH (as per Bylaws Article VII Section 8) or expelled from ISGH membership for ethical reasons (as per Bylaws Article VII Section 9).
- (e) Has signed a statement that he:
  - Does not himself seek an elected position
  - Does not put his decisions or other people's decisions over and above the decisions of Allah in the Quran and Sunnah
  - Is obedient to Shariah
  - Does not commit major sins
  - Persons having committed a State or Federal felony offense are **NOT** eligible for nomination

I, \_\_\_\_\_ by signing my name  
[PLEASE PRINT YOUR FULL NAME]

below, declare that I fulfill the above stated requirement to be eligible nominee for an Associate Director position.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note:** PLEASE, YOU **MUST** INCLUDE A COPY OF DRIVER LICENSE/ID (of the **Nominee**)

# ISGH Election 2019

## **NOMINATION & ACCEPTANCE FORM FOR AREA REPRESENTATIVES**

(For Area Representatives, nominate a member who is residing in **your zip code area or zip code group**. Maximum number of Area Representatives from any one postal zip code area or grouping is controlled by total number of voting members in the zip code or grouping. The list of Zip Code groupings and the number of representatives is published separately on the ISGH website. From any one nominating member, Election Commission will accept ONLY the allotted number of nominations **in the order received and at the discretion of the EC.**

**A separate Nomination & Acceptance Form for each Area Representative nominee must be filled out and received by the Election Commission by **12:00 Noon, on October 20, 2019****

**Persons having committed a State or Federal felony offense are NOT eligible for nomination**

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**(PLEASE, PLEASE , PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)**

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I the undersigned nominator hereby nominate the following ISGH member as AREA REP from Zip Code or Zip Code Grouping designated as \_\_\_\_\_ in the Zip Code Groups list published by ISGH EC 2019.

**Name of Nominee:** \_\_\_\_\_  
  First  Middle  Last

**Telephone:** (     ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

Who resides in Zip Code \_\_\_\_\_ of \_\_\_\_\_ IC.

***My information as Nominator is below.** , I have read and understood the qualifications for nominees. I have contacted the above nominee about this nomination and have obtained the required consent as evidenced by the below Acceptance from nominee*

Name: \_\_\_\_\_ Zip & IC: : \_\_\_\_\_  
  [PLEASE PRINT NOMINATOR FULL NAME]

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: (     ) \_\_\_\_\_ E-mail \_\_\_\_\_

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## **Acceptance of Nomination for 2019 ISGH Elections**

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I, (Print Nominee full name) \_\_\_\_\_ of

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ACCEPT** the nomination for the position of **AREA REPRESENTATIVE** and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: PLEASE, YOU MUST INCLUDE A COPY OF DRIVER LICENSE/ID (of the Nominee)**

# ISGH Election 2019

## NOMINATION & ACCEPTANCE FORM FOR YOUTH AREA REPRESENTATIVE

(For YOUTH Area Representatives, nominate a member who is residing in **your Islamic Center** and is 18 to 24 years old as of the General Election day. This is **ONLY** applicable if the allowed Area Reps in your Islamic Center are more than 10, without including the YOUTH or SISTER Area Reps.)

**Properly completed nomination form for YOUTH Area Representative  
must be received by the Election Commission by 12:00 Noon, on October 20, 2019**

Persons having committed a State or Federal felony offense are **NOT** eligible for nomination

=====

**(PLEASE, PLEASE , PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)**

I the undersigned nominator hereby nominate the following ISGH member as YOUTH AREA REP from my Islamic Center since my Islamic Center has more than 10 Area Representatives.

**Name of Nominee:** \_\_\_\_\_  
First
Middle
Last

**Telephone:** (    ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

Who resides in Zip Code \_\_\_\_\_ of \_\_\_\_\_ IC.

***My information as Nominator is below.** I have read and understood the qualifications for nominees. I have contacted the above nominee about this nomination and have obtained the required consent as evidenced by the below Acceptance from nominee. I further declare that I reside in the same IC as the Nominee and that the Nominee meets the age requirements.*

Nominator Name: \_\_\_\_\_ IC : \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

## Acceptance of Nomination for 2019 ISGH Elections

I, (Print Nominee full name) \_\_\_\_\_ of

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ACCEPT** the nomination for the position of **YOUTH AREA REPRESENTATIVE** and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections. I declare that I qualify for this nomination as per the age restrictions.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note:** PLEASE, YOU **MUST** INCLUDE A COPY OF DRIVER LICENSE/ID (of the **Nominee**)

# ISGH Election 2019

## NOMINATION & ACCEPTANCE FORM FOR SISTER AREA REPRESENTATIVE

(For SISTER Area Representatives, nominate a sister member who is residing in **your Islamic Center** . This is ONLY applicable if the allowed Area Reps in your Islamic Center are more than 10, without including the SISTER or YOUTH Area Reps.)

**Properly completed nomination form for SISTER Area Representative must be received by the Election Commission by 12:00 Noon, on October 20, 2019**

Persons having committed a State or Federal felony offense are **NOT** eligible for nomination

=====
(PLEASE, PLEASE , PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)

I the undersigned nominator hereby nominate the following ISGH member as SISTER AREA REP from my Islamic Center since my Islamic Center has more than 10 Area Representatives.

Name of Nominee: \_\_\_\_\_
First Middle Last

Telephone: ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Who resides in Zip Code \_\_\_\_\_ of \_\_\_\_\_ IC.

My information as Nominator is below. I have read and understood the qualifications for nominees. I have contacted the above nominee about this nomination and have obtained the required consent as evidenced by the below Acceptance from nominee. I further declare that I reside in the same IC as the Nominee.

Nominator Name: \_\_\_\_\_ IC : \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

### Acceptance of Nomination for 2019 ISGH Elections

I, (Print Nominee full name) \_\_\_\_\_ of \_\_\_\_\_

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

ACCEPT the nomination for the position of SISTER AREA REPRESENTATIVE and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: PLEASE, YOU MUST INCLUDE A COPY OF DRIVER LICENSE/ID (of the Nominee)

# ISGH Election 2019

## NOMINATION & ACCEPTANCE FORM FOR AT LARGE AREA REPRESENTATIVE

(For AT LARGE Area Representatives, nominate a member who is residing in **your Islamic Center**. This is ONLY applicable if the allowed Area Reps in your Islamic Center, without counting AT LARGE AREA REP(s) are less than 4.)

**Properly completed nomination form for AT LARGE Area Representative must be received by the Election Commission by 12:00 Noon, on October 20, 2019**

Persons having committed a State or Federal felony offense are **NOT** eligible for nomination

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**(PLEASE, PLEASE , PLEASE, PRINT OR TYPE ALL REQUESTED INFORMATION)**

I the undersigned nominator hereby nominate the following ISGH member as AT LARGE AREA REP from my Islamic Center since my Islamic Center has less than 4 Area Representatives.

**Name of Nominee:** \_\_\_\_\_  
                                    First                                    Middle                                    Last

**Telephone:** (    ) \_\_\_\_\_ **E-mail** \_\_\_\_\_

Who resides in Zip Code \_\_\_\_\_ of \_\_\_\_\_ IC.

***My information as Nominator is below. I have read and understood the qualifications for nominees. I have contacted the above nominee about this nomination and have obtained the required consent as evidenced by the below Acceptance from nominee. I further declare that I reside in the same IC as the Nominee.***

Nominator Name: \_\_\_\_\_ IC : \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

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### Acceptance of Nomination for 2019 ISGH Elections

I, (Print Nominee full name) \_\_\_\_\_ of

Zone: \_\_\_\_\_ Islamic Center: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ACCEPT** the nomination for the position of **AT LARGE AREA REPRESENTATIVE** and hereby agree to abide by all provisions, rules, and regulations of ISGH regarding the elections.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: PLEASE, YOU MUST INCLUDE A COPY OF DRIVER LICENSE/ID (of the Nominee)**