

# ISGH Election 2023

## NOMINATION 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 zip code grouping is controlled by total number of voting members in the zip code or the zip code 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, as per the listing published by EC, **in the order received and at the discretion of the EC.**

**If a nominee resides in a zip code or zip code group that allows for more than one Area Rep, a separate Nomination Form coupled with the Acceptance Form for each Area Representative nominee must be filled out and received by the Election Commission by 12:00 Noon, on the last day to receive nominations.**

Paper nominations maybe mailed or dropped at Main center. Nominations can also be sent as attachment via email to: [EC2023ISGH@gmail.com](mailto:EC2023ISGH@gmail.com)

***REMEMBER: Each Nomination Form for any Area Rep position MUST be accompanied by the ACCEPTANCE FORM with signatures of the Nominee and copy of his/her photo ID***

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

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 2023.

**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 attached Acceptance form duly signed by the nominee

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

Zone/IC/Zip: \_\_\_\_\_

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

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



# ISGH Election 2023

## NOMINATION FOR SISTER AREA REPRESENTATIVE

For SISTER 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 are more than 10, without including the YOUTH or SISTER Area Reps.

**Properly completed nomination form for SISTER Area Representative must be received by the Election Commission by 12:00 Noon, on the last day to receive nominations**

Paper nominations maybe mailed or dropped at Main center. Nominations can also be sent as attachment via email to: [EC2023ISGH@gmail.com](mailto:EC2023ISGH@gmail.com)

***REMEMBER: Each Nomination Form for any Area Rep position MUST be accompanied by the ACCEPTANCE FORM with signatures of the Nominee and copy of her photo ID***

(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 otherwise 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 attached Acceptance form duly signed by the nominee

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

Zone/IC/Zip: \_\_\_\_\_

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

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

# ISGH Election 2023

## NOMINATION 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 as each IC **MUST** have at least 4 Area Reps.

**A Nominator may nominate multiple At Large Nominees so as the eventual total of Area Reps from the respective IC can be 4 Area Reps. A separate Nomination Form coupled with the Acceptance Form for each At Large Area Representative nominee must be filled out and received by the Election Commission by 12:00 Noon, on the last day to receive nominations.**

Paper nominations maybe mailed or dropped at Main center. Nominations can also be sent as attachment via email to: [EC2023ISGH@gmail.com](mailto:EC2023ISGH@gmail.com)

**REMEMBER: Each Nomination Form for any Area Rep position MUST be accompanied by the ACCEPTANCE FORM with signatures of the Nominee and copy of his/her photo ID**

(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 otherwise 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 attached Acceptance form duly signed by the nominee***

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

Zone/IC/Zip: \_\_\_\_\_

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

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