

## Board of Directors Election Process Policy

The Ontario Senior Games Association (OSGA) is composed of nine (9) Board of Directors who are elected into terms at the Annual General Meeting (AGM). The following Election Process outlines the procedure by which individuals become nominees for election to the Ontario Senior Games Association's Board of Directors.

### *Appointment of Nominating Committee*

1. At least ninety (90) days prior to an Annual Meeting, at which Directors will be elected, the Board will appoint a Nominating Committee consisting of three (3) individuals.
2. The Nominating Committee may not consist of any individuals who will stand for election at the next Annual Meeting. The Nominating Committee may consist of current Directors whose terms do not expire at the next Annual Meeting, current Directors who are retiring or who are not standing for election, and/or other individuals from inside or outside the organization.
3. The Nominating Committee is responsible for ensuring that there are an equal or greater number of nominees for each of the Director positions that will be vacant at the Annual Meeting. The Nominating Committee should also ensure that the nominees are qualified, skilled, and capable of providing effective governance leadership to the OSGA.

### *Nominees*

- Individuals may submit their interest in standing as a nominee to the Nominating Committee. The Nominating Committee may also approach individuals who the Committee believes would be interested in standing as a nominee. A second individual (or 'seconded') is not required to support a nomination.
- All individuals who would stand as a nominee for a Director position must:
  - a. Be eligible to serve as a Director (per section 4.2 of the OSGA Bylaws);
  - b. Submit a completed and signed Nomination Form (Appendix A); and
  - c. Per the Nomination Form, submit a letter outlining the individual's experience and qualifications.

### *Review by Nominating Committee*

- The Nominating Committee will review the submissions from each nominee. At least seven (7) days prior to the Annual Meeting, the Nominating Committee will inform each nominee whether they are eligible for election as a Director and whether or not they received the Endorsement of the Nominating Committee.

### *Nominations from the Floor*

- Nominations for a Director position may be accepted from the floor of the Annual Meeting. Nominees who are nominated from the floor must be present at the Annual Meeting, must complete a Nomination Form and must agree that they are eligible to serve as a Director per section 4.2 of the OSGA Bylaws.

## Appendix A: Board Nomination Form

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City Province Postal Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position: \_\_\_\_\_ Preferred Gender: \_\_\_\_\_  
*Which you are applying for*

Are you an Ontario resident?      YES    NO      Are you involved in a District?    YES    NO  
             

What Region are you from: \_\_\_\_\_ What is your District: \_\_\_\_\_

Language(s): \_\_\_\_\_

Have you read the *Nomination Policy*?      YES    NO      Have you attached your written account of    YES    NO  
experiences and achievements?                   

### Eligibility

By checking the following boxes, I confirm that I am eligible to serve as a Director.

I am a member/registrant in good standing with an OSGA member district	YES	NO		I am 18 years old or older?	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
I am a resident of Canada, as defined in the Income Tax Act	YES	NO		I have the power under law to contract	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
I have not been declared incapable by a court in Canada or in another country	YES	NO		I do not have the status of a bankrupt	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

### References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_