

\*\*\*\*\* the deadline for nominations is 5 July 2019 \*\*\*\*\*



## Essex Pension Fund Advisory Board

### Nomination for Scheme Member Representative

I wish to put myself forward to represent Scheme members on the Essex Pension Fund Advisory Board and have the support of 4 fellow scheme members

Name of nominee				
Date of birth		National Insurance no.		
Address				
E-mail		Phone number		
Current or former Essex Pension Fund employer				
Category of Membership (active, deferred, pensioner)				

<b>My nomination is supported by the following scheme members</b>				
Name	Date of birth	Membership category (Active/Deferred/Pensioner)	Signed	Date

**Supporting information** (please tell us why you think you are suitable for this role and give details of any previous relevant experience, knowledge and skills)

  
  
  
  
  
  
  
  
  
  

(continued overleaf)

(continued from front page)

<b>Signed</b>		<b>Date</b>	
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**Please return completed form to;**

<b>E-mail</b>	<a href="mailto:Compliance.Team@essex.gov.uk">Compliance.Team@essex.gov.uk</a>	<b>Post</b>	Essex Pension Fund P O Box 11, County Hall Chelmsford, CM1 1LX
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