

info@bccsw.ca bccollegeofsocialworkers.ca or bccsw.ca

Nomination Consent Form

I,Print Full Name of Nominee, a registrant of the BC College of Social Workers, accept the nomination ofPrint Full Name of Nominator for a position on the Board of the BC College of Social
Workers. I declare that I meet the requirements as established by Section 4 of the Bylaws for election
eligibility.
By signing and submitting this form I hereby:
 consent to the nomination for election, agree to observe the provisions of the Social Workers Act and the procedures related to the conduct of the election, provide information, as requested by the Registrar, for the purpose of the election, and agree that if elected and before taking office, I will take and sign the Oath of Office prescribed by the Social Workers Regulation which says: 1. I will abide by the Social Workers Act, its regulations and the bylaws of the College and I will faithfully discharge the duties of the position, according to the best of my ability. 2. I will act in accordance with the law and the public trust placed in me. 3. I will act to serve and protect the public and the public interest. 4. I will carry out the duties and objects of the College and ensure that I am guided by the public interest in the performance of my duties. 5. I will act honestly and with integrity and I will declare any private interests, memberships and affiliations relating to my duties as a board member and take steps to resolve any conflicts
 arising in a way that protects the public interest. 6. I will safeguard confidential information, not divulging it unless I am either authorized or required to do so by law. Agree to participate in, if elected, orientation processes as a member elect.
Signature of Nominee
Dated this day of, 2023 at

This nomination consent form must be received by the College office by mail or scan/email no later than

Mail: 1420 – 1200 West 73rd Ave, Vancouver, BC V6P 6G5

Email: info@bccsw.ca

September 15, 2023.