



CMCA CANDIDATE BIOGRAPHICAL INFORMATION

Candidate Name: _____

Office Nominated for: _____

Municipality: _____

Title: _____

Number of years as Municipal/Deputy Clerk: _____

Do you have your municipality's endorsement for seeking/holding this office? Yes___ No___

What goals do you have for CMCA?

Why would you like to be elected?

How can you assist the CMCA Board in furthering the professionalism of CMCA?

List the committees you have served on and explain how you are involved as a CMCA member?