Carleton University Retirement Plan

Election to the Pension Committee for Non-Unionized, Active Retirement Plan Members

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| **Expression of Interest to Serve on the Pension Committee** |
| Name |
|  |
| Employee Number |
|  |
| Department/Faculty |
|  |
| Role/Title |
|  |
| Email |
|  |
| Phone |
|  |
| Address |
|  |
| Photo |
|  |
| **Expression of Interest** |
| Question 1: I believe that I would be an excellent candidate to be considered as **a Pension Committee Member because:** |
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| Question 2: I have the following skills and experiences which would be beneficial in my role as **a Pension Committee Member:** |
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| Question 3: If elected to the **Pension Committee**, what would you like to gain from the experience and/or what skills would you furtherdevelop? |
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| **Eligbility Criteria & Consent** |

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| **1.** I confirm that I meet the eligibility criteria as outlined in the **Election Notification**. |
| □ I confirm. |
| **2.** I confirm that I **am an active pension plan member.** |
| □ I confirm. |
| 3. I have answered the Expression of Interest questions and consent to the answers being published. |
| □ I confirm. |
| 4. I have included a photo of myself that I authorize to be published. |
| □ I confirm. |
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| Privacy Disclaimer |
| I certify my answers and the information provided are true and complete to the best of my knowledge. If this application leads to a position with Carleton University Pension Committee, I understand that false or misleading information in my application may result in my removal from the Committee. |

□ I Agree.



