NOMINATION FORM - Africans Rising Coordinating Collective 2023/2026

This form will allow you to make your nomination for the Africans Rising Coordinating Collective. Please read the text below and click "Next" to proceed to the following section.

If you have difficulty filling out this form, you can download the form and email it to ccelection@africans-rising.org.

As required by section 5.3 of Africans Rising’s constitution, AR shall hold elections to elect new members to its Coordinating Collective (board) every two years, and the term of the current Coordinating Collective ends in December 2023.

In order to participate in the nomination and election process for the Coordinating Collective, you must be a member of Africans Rising. Click here to join now: https://management.africansrising.org/.

The Coordinating Collective serves as an elected board with the overall responsibilities for the oversight and governance of the coordination and implementation of the movement’s strategies, plans, and activities.

After nomination, applicants will be invited to undergo a vetting process with the Nominations Committee, which will select the final nominees for election to the Coordinating Collective. Once the final nominees are announced, a public voting period will be held to elect the new members of the Coordinating Collective.

To nominate or be nominated please visit: www.africansrising.org/nominate to read more about the criteria and process of nomination.

You can also make a nomination to the Coordinating Collective by downloading and filling out the nomination former and sending it to us at: ccelection@africansrising.org

Nominations will be opened on Wednesday 5th April 2023 and closed on Thursday 20th April 2023.

Please email ccelection@africans-rising.org or send a WhatsApp message to +23350083672 with any questions about the nomination process

*Required

DETAILS OF THE NOMINEE

To make a nomination for Coordinating Collective, please fill out the following section with the information regarding your nominee.

1. First Name *
2. Surname *

3. Is the Nominee a member of Africans Rising *

   *Mark only one oval.*

   ☐ Yes
   ☐ No

4. Nominating as *

   Indicate if you are nominating an individual or a group

   *Mark only one oval.*

   ☐ Individual
   ☐ Group

5. ID/Passport Number *

6. Country *

7. Region *

8. Location (Town/village/City) *

9. Gender/Sex Preference *
10. Any form of Disability?

11. Age

12. Organisation

13. Position in the Organisation

14. Telephone/WhatsApp Number

15. Email

16. Profile of Nominee (Minimum of 500 words)
17. Motivation Statement from Nominee (What you can bring or do for and with AR):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Details of the Nominator

18. First and Last Name *

________________________________________________________________________

19. Nominating as *

   Mark only one oval.
   ○ Individual
   ○ Group

20. Are you a member of Africans Rising *

   Mark only one oval.
   ○ Yes
   ○ No

21. ID/Passport Number *

________________________________________________________________________

22. Telephone/WhatsApp Number *

________________________________________________________________________

23. Email *

________________________________________________________________________
24. Reason why you Nominated the Person (500 words only) *

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Details of the First Endorsement Person Supporting Nomination

25. First and Last Name *

________________________________________________________________________

26. Endorsing as *

Mark only one oval.

☐ Individual

☐ Group

27. ID/Passport Number *

________________________________________________________________________

28. Telephone/WhatsApp Number *

________________________________________________________________________

29. Email *

________________________________________________________________________

Details of the Second Endorsement Person Supporting Nomination

30. First and Last Name *

________________________________________________________________________
Registration Declaration
I, the undersigned, hereby declare under oath as follows:
- I am a current member of Africans Rising
- I consent to my nomination as a candidate for appointment as a member of the Africans Rising Coordinating Committee
- I confirm that I have met all the criteria of nomination to serve in AR Coordinating Collectives
- My information is as follows:
36. Telephone/WhatsApp Number *


37. Social Media Handles *


38. Email *


39. Gender *

Mark only one oval.

☐ Female
☐ Male
☐ Prefer not to say
☐ Other: __________________________

40. Race *

Mark only one oval.

☐ Black
☐ White
☐ Mixed
☐ Asian
☐ Other: __________________________
41. Any form of Disability *

*Mark only one oval.*

☐ Yes
☐ No

42. I confirm all the above *

*Tick all that apply.*

☐ Yes

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