



GALWAY COUNTY Public Participation Network (PPN)

Nomination Form for Strategic Policy Committees

*Please read the accompany Guidelines before completing this Nomination Form.
Please complete a separate Nomination Form for each nomination by your Group.
Nominations will only be accepted via this official Nomination Form.
Please complete all Sections of this Form – incomplete or inaccurately completed forms will
not be considered.*

**Closing date for receipt of completed nomination forms is Thursday
10th of October 2024.**

Completed Nomination Forms must be submitted on or before the closing date:

*** via email to ppn@galwaycoco.ie

OR

*** via registered post to: Galway County PPN, Community Department, Galway County Council, Aras an Chontae, Prospect Hill, Galway.

SECTION 1 – SPC REPRESENTATIVE POST BEING APPLIED FOR:

Please clearly indicate which PPN Representative post this nomination relates to – the list of available posts per SPC is set out in the accompanying Guidelines. Please note that if you need to check the Pillar your Group is registered under, please go to the Members Directory located at: <https://www.galwaycountyppn.ie/members-directory/>

STRATEGIC POLICY COMMITTEE (SPC)	Select one that applies
Housing	
Economic Development, Enterprise & Planning	
Physical Development, Transportation & Emergency Services	
Community, Tourism & Integration	
Environment Protection & Agriculture	
Climate Action, Biodiversity & Heritage	

PPN PILLAR	Select one that applies
Community & Voluntary	
Social Inclusion	
Environment	



SECTION 2 – DETAILS & DECLARATION OF NOMINATING GROUP

Please confirm the name and PPN Membership No. of the Nominating Group. Please note that the Nominating Group must be a full member of Galway County PPN. If you are unsure of your PPN Registration Number, find your Group on the Members Directory located at: <https://www.galwaycountypn.ie/members-directory/> and click on 'More' to find your Registration Number.

Name of PPN Member Group making the nomination:	
Membership Registration Number:	
Name of Nominated Candidate for Representative Post set out in Section 1:	

Declaration on behalf of Nominating Group to be signed by Management Committee Members:

We, the undersigned, confirm that the above Nominated Candidate is an active member of our Group/Organisation. We are satisfied that this nominee meets the criteria to be a PPN Representative and confirm that our Group/Organisation's Management Committee (or equivalent) have agreed to this nomination.

<i>Proposed by (PRINT NAME):</i>		<i>Seconded by (PRINT NAME):</i>	
<i>Signature of Proposer:</i>		<i>Signature of Secunder:</i>	
<i>Position Held:</i>		<i>Position Held:</i>	
<i>Date:</i>		<i>Date:</i>	

Please note that the proposer and seconder of the nomination form must be authorised to act on behalf of the Group, i.e., members of the nominating body's management committee (or equivalent). NB: the nominated candidate may not be one of the signatories (proposer or seconder) on behalf of the group.



SECTION 3 – DETAILS & DECLARATION OF NOMINATED CANDIDATE

The purpose of this Section is for nominees to confirm their willingness to have their name put forward for nomination, and to confirm their Personal Statement can be made publicly available for PPN nomination and election purposes.

Name of Nominated Candidate:	
Address of Nominated Candidate	
Contact Telephone Number:	
Contact E-mail Address:	

Declaration of Nominee:

I, the undersigned, confirm that:

- 1) I am willing to allow my name to go forward for the SPC post outlined in Section 1.
- 2) I understand that there will be an election process if there are multiple nominations for this representative post.
- 3) I consent to my Personal Statement set out overleaf being made publicly available on the Galway County PPN website and circulated to PPN members in the event of an election process.
- 4) In the event that I am elected, I consent to my contact details being communicated to Corporate Services/SPC Administrators in Galway County Council.
- 5) I agree to be bound by the Galway County PPN Representatives Charter and Constitution. I understand that failure to abide by this it is likely to result in my automatic removal from any representative role I hold.
- 6) I have read and understand the PPN Representatives Charter and other documents below which set out the roles and responsibilities of PPN Representatives.
- 7) I have not put myself forward for nomination to be elected, stood for election or been an elected representative at any level of government (local or national) for a period of twelve (12) months:
 - a) after the date on which I was advised that my bid for nomination was unsuccessful
 - b) from the date of the election if my nomination bid was successful
 - c) after completing my term of office if I was elected to office

<i>Signed:</i>		Date:	
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Documents relevant to PPN Representatives

Galway County PPN Reps Charter [Galway-County-PPN-Reps-charter-2019.pdf \(galwaycountypn.ie\)](#)
SPC Plan Adopted by Council [Strategic-Policy-Committee-Scheme-2024-2029.pdf \(galwaycountypn.ie\)](#)
SPC National Guidelines 2024: [National-SPC-Guidelines-June-2024.pdf \(galwaycountypn.ie\)](#)
PPN Handbook Representatives Chapter: [PPN-Handbook Section-5 -Representatives.pdf \(galwaycountypn.ie\)](#)
Galway County PPN Constitution: [Galway-County-PPN-Constitution.pdf \(galwaycountypn.ie\)](#)



Personal Statement of the Nominee

Name of Nominee:	
Name of Nominating Body:	

Paragraph to be shared with PPN Members (max 150 words) containing short profile of candidate, outlining their relevant experience in the SPC Policy area, and their skills and capacities to represent the interests of the relevant PPN Pillar. The candidate may also wish to outline why they would like to be a PPN Representative on the relevant Committee.