

**The Chairperson  
Nominations Committee  
Institute of Directors-Ghana  
Accra**

**Thru': The Secretary, Nominations Committee**

Dear Madam,

## CONSENT FORM FOR COUNCIL NOMINEE

I, \_\_\_\_\_ (*Insert title and full name*) of  
\_\_\_\_\_  
\_\_\_\_\_ (*Insert workplace  
address*) with Membership Number \_\_\_\_\_ (*Insert your IoD-Gh membership  
registration number*) hereby consent to my nomination for: **President / Vice-President / Member** for  
the upcoming election to serve on the Council of the Institute of Directors-Ghana (IoD-Gh) for the  
2025-2027 tenure of office.

Thank You

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

### PLEASE NOTE:

- 1) Nominees must be in good standing
- 2) Attach your Detailed curriculum vitae (CV).
- 3) Attach your vision statement or paper for the **President Position** [Not more than two hundred and fifty (250) words]
- 4) Attach Personal statement of your suitability to serve on Council for the **Vice-President / Member Position** [Not more than two hundred and fifty (250) words]