Thank you for nominating a candidate to be considered for an MSF Trustee position. As the nominator, please ensure that the candidate (nominee) meets the minimum criteria and submit the application to MSF on their behalf.

Please complete this form and collect the following documents from the candidate:

- **Signatures on this document** by the nominator (page 1) and nominee (page 2);
- **Curriculum Vitae/Resume** from nominee;
- **Letter of Intent** from nominee;
- **Names and contact information for two Subud members** who can be contacted as references.

The above documents should be submitted to MSF at amanda.rivera@msubuhfoundation.org by January 15, 2024, with email subject as follows: “[CANDIDATE NAME] - Nomination, MSF Trustee 2023-2024.”

Name of Nominator

<table>
<thead>
<tr>
<th>Position</th>
<th>(a) National Chairperson of their country, (b) current MSF Trustee, or (c) World Subud Council member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address</td>
<td></td>
</tr>
<tr>
<td>City, Country</td>
<td></td>
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<tr>
<td>Phone Number</td>
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</tbody>
</table>

Please tick the following boxes to indicate your understanding as the Nominator:

- I verify that I am currently serving as either (a) National Chairperson, (b) MSF Trustee, or (c) World Subud Council member.
- I understand the minimum criteria to serve as an MSF Trustee and recommend the candidate without reservation.
- I verify that the Curriculum Vitae and Letter of Intent that I will submit to MSF were received from the candidate.

Signature: ___________________________ Date (mm/dd/yyyy): ______________
Name of Nominee (Candidate)

Email Address

City, Country

Phone Number

Name of Subud Reference #1

Email Address

Phone Number

Name of Subud Reference #2

Email Address

Phone Number

Please tick the following boxes to indicate your understanding of the commitment:

- I read, understood and meet the criteria to perform the role of an MSF Trustee.
- I tested with local and/or national helpers before submitting my application.
- I will send my Curriculum Vitae/Resume and Letter of Intent to my nominator.
- I will forward 2 referral forms from my references to my nominator.
- I agree to sign a Conflict of Interest statement as well as a Non-Disclosure Agreement if appointed as an MSF Trustee.

Signature: ___________________________ Date (mm/dd/yyyy): ______________