**NOMINATION FORM FOR CANDIDATE FOR THE FIAS DISCIPLINARY COMMISSION**

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| **The National SAMBO Federation (NSF) represented by the Candidate**  *The NSF must be full member of FIAS* |  |
| **Family Name** |  |
| **First Name** |  |
| **Date of birth** |  |
| **Gender** | Male  Female |
| **Nationality**  *The candidate must have the same nationality to NSF he/she represents* |  |
| **Country of Residence** |  |
| **Resident since** |  |
| **Postal address** |  |
| **Phone number** |  |
| **E-mail address** |  |
| **Languages**  English  Russian  French  Spanish  Other languages | Mother Tongue: |
| **Official Position held in National SAMBO Federation** *(ex. athlete, coach, delegate, team doctor and administrator)* | |

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| **Candidate’s and proposing Member’s confirmation:**  By signing this Form the Candidate and the proposing Member confirm that the information given in this Form is accurate and complete.  By signing this Form the Candidate confirms having carefully read the contents of the 2016 FIAS Statutes and FIAS ByLaws but not limited to the obligations of FIAS Office Holders, as well as the FIAS Code of Ethics and confirms to meet and respect all criteria and conditions stated therein. | | |
| **Proposing FIAS Member:** |  | |
| Date: |  | |
|  |  | |
| Signature President | Signature General Secretary | |
|  |  | |
| **Candidate:** |  | |
| Date: |  | |
|  |  | |
| Signature | |  |

Forms must be signed and returned **by 8 of September 2017** to [info@sambo-fias.com](mailto:info@sambo-fias.com) and [swissoffice@sambo-fias.com](mailto:swissoffice@sambo-fias.com).