

# PROXY FORM



## ASSOCIATION OF SERVICE PROVIDERS FOR EMPLOYABILITY AND CAREER TRAINING

Please note that this proxy form is for Voting Members only; Associate Members are not eligible to vote.

The undersigned hereby appoints \_\_\_\_\_

of \_\_\_\_\_, as proxy for the undersigned to attend and vote

on behalf of the undersigned at the Annual General Meeting of the Society to be held on the 8<sup>th</sup> day of April,

2024.

\_\_\_\_\_  
Signature of Voting Member

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Member Organization