

**GENERAL SERVICE CONFERENCE**

**WORLD SERVICE DELEGATE AND ALTERNATE – NOMINATION FORM**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE: (M) \_\_\_\_\_ (W) \_\_\_\_\_ (H) \_\_\_\_\_**

**EMAIL ADDRESS:** \_\_\_\_\_

**General Service Conference Record: Dates: \_\_\_\_\_ AREA \_\_\_\_\_**

**Nomination**

**Name of person and Area submitting nomination** \_\_\_\_\_

**Name of person and area seconding nomination** \_\_\_\_\_

The requirements for the position of WSD (and Alternate) are 10 years of continuous sobriety, to have served one full term of three years as an Area Delegate on the General Service Conference of NZ with other relevant service experience.

Furthermore has a working knowledge of the Steps, Traditions and Concepts and be familiar with AA Literature and the Service Manual.

Also demonstrates leadership qualities, has a genuine service interest, organisational ability and a knowledge and love of Alcoholics Anonymous.

The position is for four years (WSD) or two years (Alternate) commencing from the 1<sup>st</sup> January.

The nominees must have a current NZ passport and it is the responsibility of the WSD to organize their travel and necessary visas and medical insurance. (The cost of travel, visas and medical insurance will be reimbursed by GSO in line with the current International Travel policy upon production of receipts)

The nominees must be familiar with the requirements of obtaining an American visa and be certain of obtaining a visa into that country

WSD's are expected to present a report to all NZ Conferences and to their Area Assemblies during their term. One of the WSD's may be invited to attend an Area Assembly that does not have a WSD, cost/expenses to be reimbursed by that Area.

WSD's nominees are expected to have read and understand the WSD guidelines

**PERSONAL HISTORY**

**DATE OF BIRTH: \_\_\_\_\_ DATE OF SOBRIETY: \_\_\_\_\_**

**STATE OF HEALTH:** \_\_\_\_\_

**Please complete Page 2**

**AA SERVICE BACKGROUND (CV)**

I have read the information entered above. To the best of my knowledge, it is correct AND I WILLINGLY ACCEPT THE POSITION IF SO ELECTED.

**Signature of Candidate**

**Date**

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**Signed acceptance forms should be received by 28 days prior to the meeting of Conference at which the election will take place.**

**Send to:     The Executive Officer  
              NZGSO  
              Unit 2, 30 Downer Street  
              Hutt Central  
              Lower Hutt 5010**