



Nominations form for Stichting Pensioenfonds DSM Nederland

Nominations form as a representative of:

- **Members on the PDN Accountability Council**

I, the undersigned:

Name : _____
Address : _____
Postcode : _____
Town/city : _____
Telephone : _____
number : _____
Date of birth : _____
Email address : _____

hereby nominate myself for a seat to represent:

- Members on the PDN Accountability Council*

and declare that I have complied with the Articles of Association, Regulations, and the Code of Conduct of Stichting Pensioenfonds DSM Nederland

Please attach a résumé to this nomination form that includes the following information:

- information about your work experience, management experience, knowledge of pensions, and experience with pensions
- any pension training courses
- your specific skills, and at least two references.

It is recommended that you also mention in your résumé or cover letter why you are standing, how willing you would be to attend pension courses and training, and your vision and willingness to dedicate the necessary time and attention needed to fulfil the role.

Date:

Signature:

PDN must receive the nomination form, résumé, and any cover letter by no later than September 29, 2023 to: Kiescommissie PDN, Antwoordnummer 110, 6400 VB Heerlen or by email info.PDN@dsm.com.