PDN
PENSIOENFONDS

Candidacy

Candidate nomination form for the Accountability Council

as Pensioenfonds PDN member representative

I, the undersigned:

(Please fill out in block capitals)

Name:	
Street name and house number:	
Postal code:	
Town/city:	
Telephone number:	
Date of birth:	
Email address:	

☐ am putting myself forward as a candidate for a member seat on the Accountability Council of Pensioenfonds PDN and declare that I have complied with the Articles of Association, Regulations, and the Code of Conduct of Stichting Pensioenfonds PDN.

When sending this form, please add your curriculum vitae (CV), which should include the following:

- information about your work experience, governance experience, knowledge of and experience with pensions
- any pension training courses or other training/education you have followed
- your specific skills, and at least two references
- why you want to become a member of the Accountability Council.

Date: _____

Signature: _____

(If you wish to put yourself forward as a candidate, please email this completed form and the other documents by 7 September 2026 to: bestuursondersteuning.PDN@dpspensioen.nl).