

Stakeholder Advisory Council Nomination Form

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| Contact information: | |
| Name of organization: | |
| Website: | |
| Name and title of nominator: | |
| Email address: | |
| Phone number: | |
| Mailing address: | |
| Name and title of nominee: | |
| Email address: | |
| Phone number: | |
| Mailing address: | |
| * Stakeholder Information: | |
| The nominee is not an officer, employee or director of a member of Payments Canada or of an institution eligible for membership in Payments Canada. | |
| The nominee represents the interests of a particular stakeholder that currently participates in or supports a Canadian payments system. | |
| Please select the stakeholder the nominee represents: | |
| Please provide a description of the stakeholder the nominee will represent, including the business of the stakeholder whose interests would be represented and its degree of reliance on the payments system: | |
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| Please provide a description of <i>how</i> the nominee will represent the interests of a particular stakeholder, including how the nominee will share feedback and information from Payments Canada to the stakeholder: | |
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*NOTE: Individuals or organizations who are identified as having a conflict of interest may be considered ineligible for appointment to SAC.

Appointment criteria:

Does the organization have a current established consultative processes for directly articulating the nominee's stakeholder's opinions and perspectives to Payments Canada, the Stakeholder Advisory Committee, or to any Payments Canada working groups or committees? If yes, please describe below:

Does the nominee represent stakeholders whose interests are national in scope? Please describe below:

Please answer if the nominee is a representatives of users:
Does the nominee represent an association, group, organization or other entity that represent the interests of a broad constituency or the interests of a prominent firm within the industry? Please describe below:

Please answer if the nominee is a representatives of service providers:
Does the nominee represent an association, group, organization or other entity that represent the common interests of the majority of participants in a particular industry or represent the interests of a prominent firm within the industry? Please describe below:

| Nominee profile: | |
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| Please describe below the nominee’s current role and relevance to payments matters: | |
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| Please rate nominee’s skill/knowledge level 0 = no experience; 1 = employment/novice level experience; 2 = senior management/intermediate level experience; and 3 = professional designation or executive level experience. | |
| Representing a stakeholder perspective | |
| Participating on an advisory groups or committees | |
| Understanding of payments trends and issues: domestic | |
| Understanding of legal framework for Canada’s payments ecosystem | |
| Understanding of payments trends and issues: international | |
| Understanding of payments technology and innovation | |
| Understanding of payments: wire/wholesale | |
| Understanding of payments: retail | |
| Chairing an advisory committee | |
| Publishing works, specific to the area of payments (Please include a list with CV, if applicable) | |

| Nominee profile: |
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| Please describe why the nominee is interested in participating on the SAC. |
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| Please provide any additional information about the nominee, if required. |
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Please submit nominations via email to: councils@payments.ca