



### 2018-19 GSA ELECTION NOMINATION FORM (for Directors & Executives)

We, the undersigned members in good standing of the Graduate Students' Association (GSA), nominate:

Candidate's first name (please print): \_\_\_\_\_ Family name: \_\_\_\_\_

For the position of \_\_\_\_\_

Only current GSA members may nominate candidates. With my signature, I hereby accept that the GSA will verify my current student status. **(PLEASE PRINT CLEARLY OR YOUR SIGNATURE MAY NOT COUNT!)**

	First name(s)	Family name(s)	Student ID #	Faculty	Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

**Nominations for each Director candidate must be signed by a minimum of ten (10) GSA members in good standing.**

**Nominations for each Executive candidate must be signed by a minimum of fifteen (15) GSA members in good standing, from which there must be at least one (1) GSA member from each faculty.**

I, the candidate, hereby accept this nomination. I agree to abide by the Bylaws and Election Regulations of this Association. I intend to remain a GSA member in good standing for the entirety of the 2018-19 term. I agree to my academic record being examined by the Dean of Students and/or the Chief Returning Officer (CRO) to ensure my eligibility for the above-mentioned position, according to the Bylaws and Election Regulations.

Candidate's signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Candidate Information – Must be completed in full**

Position sought (i.e. Vice-President Mobilization or Director Faculty of Fine Arts):

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Will you be running as part of a slate? \_\_\_\_\_

If so, what is the name of the slate? \_\_\_\_\_

Which candidate will act as the main contact for this slate? \_\_\_\_\_

Personal information:

Name (in full): \_\_\_\_\_

Student ID #: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

**Additional Information**

Please note that by submitting this nomination form you permit the GSA to take all steps necessary to verify your current registration status and that of those who have nominated you, as well as your registration status for the entirety of the 2018-19 term. You agree to provide proof of registration should the Chief Returning Officer (CRO) or one of their representatives ask. Any failure to provide such proof will result in the rejection of your candidacy.

It is your responsibility to monitor the email account you have provided. It will be used as the primary means of communication.

It is required that you read the Bylaws and the Election Regulations. Failure to adhere to these rules as well as relevant instructions from the CRO may result in disqualification or other sanctions. Ignorance is not a defense. If you have any questions, you can address them to [gsacro2018@gmail.com](mailto:gsacro2018@gmail.com).

I hereby certify that I have read and understood the above provisions, and provided accurate information.

Candidate's name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_