2018-19 GSA ELECTION NOMINATION FORM
(for Senators and Board of Governors Representative)

Candidate's first name (please print): _____ Family name: _____

Position sought _____

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:

    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 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.

All slate members must be identified by the closing day of nominations. No changes to the slate will be permitted during campaigning. The final authority on deciding members of any slate will be the principal contact person identified by the majority of members of that slate.

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

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

Candidate's name: _____

Signature: _____

Date: _____