



carleton university  
students' association

## CUSA COUNCIL NOMINATION APPLICATION FORM

Personal Information			
First Name:		Last Name:	
Preferred Name:		Student Number:	
Contact Information			
Phone (primary):		Phone (cell):	
Carleton E-mail:		Desired E-mail:	
Application Information			
Date of Application:		Desired Seat:	
Faculty:		School (if applicable):	
Degree:			
Major 1:		Major 2:	
Minors and/or Concentration:			
Length of Program:		Year Standing:	

I, the nominee, do hereby commit myself to the position signed above. If elected, I will do my best to represent the students of the constituency I am applying to represent and will fulfill all the responsibilities required of me during my term of office. Failure to do so may result in my removal from the seat of which I am applying for. I also consent to allowing the CUSA VP Internal, Council Coordinator and Registrar's office to access my student information to verify if the above information is correct.

I, \_\_\_\_\_, do hereby agree to these terms on this date \_\_\_\_\_

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

**CUSA OFFICE ONLY:** Date received: \_\_\_\_\_ Signed: \_\_\_\_\_

**REGISTRAR'S OFFICE ONLY:**

I hereby verify that the nominee and nominators are from the correct faculty and the nominee has attained the sufficient number of nominations to be considered for this position.

Signed: \_\_\_\_\_

STAMP

Note: As per Bylaw I s.3(c), all forms must be submitted to the CUSA office no later than 24 hours before the next CUSA Council meeting.