**Nomination Form**

**Kinesiology Undergraduate Society Executive Position**

**\*\*\* Nomination forms must be returned to**

**WAR 120 by Friday, March 16th at 4pm\*\*\***

**PLEASE BE ADVISED OF THE FOLLOWING REQUIREMENTS FOR THE KUS ELECTIONS**

Each candidate must submit to the Elections Committee (chaired by Juancho Ramirez) a nomination form **by Friday, March 16th at 4:00pm**. The nomination form must be signed by at least ten (10) nominators, each of whom must be member in good standing in the School of Kinesiology and entitled to vote in that election. It is recommended that the candidate have extra signatures in the case that one or more of the 10 nominators are invalid.

All candidates must meet the Elections Administrator, Juancho Ramirez (contact - email: kus.pres@kus.ubc.ca: office: WAR 120) following the close of nominations to receive instructions on campaign procedures at an **All Candidates Meeting**. The date of this meeting will be held **on Friday, March 16th at 4:00pm** when nomination sheets are due.

*No campaigning is permitted* until the beginning of the official campaign period as determined by the Elections Committee (March 19th – 23rd)

The Elections Administrator *must* *approve* all campaign material before it is used. Materials may be submitted to the Elections Committee office from the opening of nominations onwards. Please include a contact name, email and phone number with all campaign materials.

Each candidate may run for only one executive position in a given election. Persons who are validly nominated for more than one position must notify the Elections Administrator of which nominations they wish to decline before they may campaign.

Other Important Dates to know:

* Incoming + Outgoing Transition Night – *April 3rd @ 7pm*
* Incoming + Outgoing Meeting w/ School of Kinesiology – *TBD*
	+ around April 3th – 6th
* Incoming + Outgoing Retreat - *TBD*
	+ around April 27th – May 4th

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| **Candidate(s) Name:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Candidate(s) Student Number:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Candidate(s) Signature:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**We, the undersigned, hereby nominate the candidate named above for the position of (please check one):**

Δ President

Δ Vice President Finance

Δ Vice President Academic

Δ Vice President Student Life

Δ Vice President Communications

**The information collected on this form will be used only to verify student status and to contact the candidate on election-related business.**

 **Name of Nominator Signature Student Number**

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