

Prescribed Form for the Nomination of Alumni Manager

Candidate's name	:					
Candidate's class	:					
Submission date	:					
Name of Nominee (Note 1)	:	(1)	(name)			
			(class)			
			(signature)			
				By signing in this box, I confirm that I did not nominate any other Alumnus as candidate for Alumni Manager election		
Name of Secondees (Note 2)	:	(2)	(name)			
			(class)			
			(signature)			
		(3)	(name)			
			(class)			
			(signature)			
		(4)	(name)			
			(class)			
			(signature)			
		Candidate's signature	:			
						By signing this box, I agree to comply with the procedures for Alumni Manager election

Note 1 : pursuant to election procedure no. 9, an Alumnus may nominate oneself or another eligible candidate to stand for the election, and each Alumnus can nominate no more than one nominee.

Note 2 : pursuant to election procedure no. 10, each nominee must be seconded by not fewer than 3 members of the PSA Council.

***Reminder** : please submit a personal information (200 words max) to the Returning Officer together with this form on or before the closing of the Alumni Manager nomination procedure.