



The Alumni Association

BOARD OF REGENTS ALUMNI REPRESENTATIVE NOMINATION FORM

NOMINATIONS TO STAND FOR THE ELECTION OF THE 2008-2011 BOARD OF REGENTS ALUMNI REPRESENTATIVE SEATS ARE OPEN UNTIL June 27, 2008. Nominees, nominators and seconders must be graduates of Memorial University of Newfoundland. Alumni who hold a salaried position with Memorial University and those who hold student status at the undergraduate or graduate level are **not eligible** to stand as candidates.

THE NOMINEE

Name: _____

Years during which nominee attended Memorial University: _____

Degree(s) and Year(s) of Graduation from Memorial University:

Residential Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____ Email: _____

Current Position / Occupation: _____

Business Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____ Email: _____

Please attach a brief, 50 word biography and recent photograph. Nominees are encouraged to attach a brief statement about why they wish to serve as an alumni representative on the Board of Regents.

I authorize Memorial University and/or their delegates to use this information and photograph(s). They may use this material in the form taken or in any other format, with intentional or unintentional alterations, and use for the purpose of illustration, publicity, advertising, promotion, recruitment and/or publication of any product or service for the university for any period of time.

Signature of Nominee: _____ Date: _____

NOMINATOR AND SECONDRS

Nominator

Name (please print): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____ Email: _____

Relationship to Nominee: _____

Signature of Nominator: _____ Date: _____

Secunder (1)

Name (please print): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____ Email: _____

Relationship to Nominee: _____

Signature of Secunder: _____ Date: _____

Secunder (2)

Name (please print): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____ Email: _____

Relationship to Nominee: _____

Signature of Secunder: _____ Date: _____

Secunder (3)

Name (please print): _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Fax: _____ Email: _____

Relationship to Nominee: _____

Signature of Secunder: _____ Date: _____

Nomination forms must be received by June 27, 2008 and clearly marked:

Nomination - Alumni Representative for the Board of Regents
Office of Alumni Affairs and Development
20 Lambe's Lane
Memorial University of Newfoundland
St. John's, NL
A1C 5S7

For more information please 737.4354, or 1.877.700.4081 or visit www.munalum.ca.

Memorial University of Newfoundland protects your privacy and maintains the confidentiality of your personal information. The information requested in this form is collected under the general authority of the Memorial University Act (RSNL1990 CHAPTER M-7). Information collected will be stored in the Alumni Affairs and Development database and may be used for event planning, income tax purposes, statistical reporting, fundraising and affinity partnerships. If you have any questions about the collection and use of your information, please contact the Office of Alumni Affairs and Development at 1.877.700.4081 or munalum@mun.ca.
