

### Nomination for CITSA Council

Annual General Meeting (AGM)

Casual Vacancy

### Nominee

Student's Name: \_\_\_\_\_ CIT No.

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Work: \_\_\_\_\_ Email: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Campus:  Bruce  Reid  Fyshwick

Gungahlin  Tuggeranong

### Nominator

I, (nominator's name) \_\_\_\_\_ wish to nominate (nominee's name)

for a position on CITSA Council. I am also a registered member of CITSA.

CIT No.

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

### Secunder

I, (secunder's name) \_\_\_\_\_ wish to second this nomination. I am also a registered member of CITSA.

CIT No.

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

### Acceptance

I, (nominee's name) \_\_\_\_\_ accept this nomination. I am also a registered member of CITSA.

CIT No.

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

By providing this form to CITSA and accepting the nomination, you consent to act as a member of the Council of CITSA if you are successfully elected or appointed in accordance with the CITSA Constitution. You agree to comply with the Constitution of CITSA and the CITSA Terms of Reference, as amended from time to time, which you acknowledge you have read, understood and which will be binding on you. You also agree to comply with any future policies and procedures implemented by CITSA from time to time.