**NOMINATION FORM**

**PLEASE ENSURE YOU WRITE NEATLY AND USE BLOCK LETTERS ONLY**

*By signing this form you give consent to the Returning Officer to verify your personal details with the University and LTSU to ensure you are eligible to stand as a candidate and you agree to adhere to the rules of the election as set down by the Election Regulations, LTSU Constitution and the directions of the Election staff.*

*Nominations close 5pm, Friday 19 September. Nominations must be signed by the candidate, and the students nominating. Nominations must be submitted directly to the Returning Officer via email.*

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| **CANDIDATE DETAILS** | | | | | | | | | | |
| **First Name:** |  | | | | | **Last Name:** |  | | | |
| **Student ID:** |  | | | | | **Email:** |  | | | |
| **Address:** |  | | | | | **Gender:** |  | | | |
|  | | | | | **Mobile:** |  | | | |
| **Do you identify as the following? (Y/N)** | | | | | | | | | | |
| **Having a disability** | |  | | **A person of colour** |  | **A queer student** |  | | **Aboriginal or Torres Strait Islander** |  |
| **Position:** *(please use separate forms for each position)* | | | | | |  | | | | |
| **Are you a resident on campus?** *(for residential officer)* | | | | | |  | | | | |
| **Signature:** | | | | | |  | | | | |
| **CONSENT OF TICKET REGISTRANT TO STAND ON A TICKET** *(if applicable)* | | | | | | | | | | |
| **Ticket Name:** | | |  | | | **Ticket Registrant Signature:** | |  | | |

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| **NOMINATOR DETAILS** | | |
| **Name** | **Student number** | **Signature** |
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