UNIVERSITY OF REGINA FACULTY ASSOCIATION

2019 Nomination Form

To be returned to the University of Regina Faculty Association, Room 122, Campion College, by no later than **4:30 p.m. Friday, February 1, 2019**

We, the undersigned, nominate ________________________________

for election to the **Council of Representatives** from the ___________________ Constituency

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<tr>
<th>NAME</th>
<th>SIGNATURE</th>
<th>DEPARTMENT</th>
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I accept the nomination and agree to let my name stand for election.

__________________________
Signature of Candidate

Return To: R. MacLennan
Returning Officer
URFA Office
Room 122, Campion College, Regina, SK  S4S 0A2
Fax: 306-585-5208
Email: urfa@uregina.ca