

UNIVERSITY OF REGINA FACULTY ASSOCIATION

Nomination Form

To be returned to the University of Regina Faculty Association, Room 122, Campion College, by <u>4:30 P.M., TUESDAY, MARCH 31, 2020</u>

We	, the undersigned, nomin	ate		
froi	n the (name of area)		, for election to the	
<u>Grie</u>	evance Committee of the	Faculty Association.		
	NAME (Please Print)	SIGNATURE	DEPARTMENT	
	1.			
	2.			
I ag	ree to let my name stand	for election.		
		Signature of Candidate		
Ret	urn to: URFA Room 122, Ca	ampion College		

Return by: **4:30 P.M. TUESDAY, MARCH 31, 2020**