

	Nominato	ors
We, the five undersigne Governor as a Staff me	ed, nominate mber, term 1 September 2	to serve on the Board of 2026 to August 31, 2029.
Name	Department	Signature
Ι	Nomine accept the above nominati	
Name:	En	nail:
Department:	Sig	gnature:
	the above nomination, the nition in <u>University of Wate</u>	e candidate must be a regular full-time erloo Act and Policy 54).
Nominees are asked to ballot.	provide a brief statement ((100 words maximum) to appear with the
Nominee Statement		
Completed nomination	on forms must be submit	tted to the Secretariat at
		m. (EST) on Friday, February 20,
Secretariat Only		
Date Received:		Verified: