

GSAN Nomination Form

- Please email a completed nomination form to <u>gsan.mcgill@gmail.com</u> by <u>Monday</u>,
 September 21st at 5PM EDT.
- Each application is independent, and no co-candidacies will be allowed.
- A separate completed form is required for each position desired.

Name		
Position		
Email address		
Expected date of graduation		
I acknowledge that I have read and understand the responsibilities, terms, conditions, and		
responsibilities of this position, as outlined in the accompanying document.		
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Nominee's name	Nominee's s	ignature
Nominator's name	Nominator's signature	Date