

# SWINBURNE STUDENT ASSOCIATION

Swinburne Student Association (SSA)

## INAUGURAL ELECTION

Monday 16 September - Friday 20 September 2024

### NOMINATION FORM

### BOARD OF DIRECTORS

<b>Full Name:</b>	
<b>Student Number:</b>	
<b>Mobile Number:</b>	
<b>Swinburne email Address:</b>	

**What position are you nominating for? Please tick.**

Please check the SSA Election Regulations and Constitution to ensure that you meet the eligibility criteria to nominate.

Board of Directors	
President	
Vice President	
Student Director (four to be elected)	

### BOARD DECLARATION

**I declare that:**

- I am not nominating for any position on the Swinburne Student Council;
- I shall always work for the best interests of the Swinburne Student Association, fulfill the aspirations of SSA, and shall uphold the purpose of SSA;
- I have read the conditions of nomination and solemnly swear that any statements contained within my nomination form are, to the best of my knowledge, true and accurate; and if elected to a position undertake to carry out my duties herein;
- I have read the Constitution and Regulations and agree to comply with them at all times;
- I authorise the University to release details of my enrolment to the Returning Officer for the purpose of checking my eligibility to stand for this position;
- If choosing to campaign, I will do so in good faith with other candidates, showing respect and courtesy at all times;

- I understand that attendance at the Board Training Day scheduled for Thursday 26<sup>th</sup> September 2024 is compulsory and I will attend this effect, absent extreme illness or extenuating circumstances;
- I understand that failure to attend the Board Training Day outlined above may result in me becoming ineligible to hold office on the Board of Directors; and
- I also understand that failure to obtain a Director ID from the Australian Business Registry (**ABR**) means I am unable to hold office on the Board of Directors until such time as my Director ID is approved.

As affirmed by my signature below, I agree to the above conditions and accept any repercussions of my non-compliance including the possibility of forfeiting office.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Seconded by:**

As affirmed by my signature below, I agree to second this nomination to the position/s they have referred to above.

**Name :** \_\_\_\_\_ **Student ID Number:** \_\_\_\_\_

**Signature :** \_\_\_\_\_ **Date :** \_\_\_\_\_

## **INFORMATION RELATING TO NOMINATIONS**

Completed nomination forms must be received by the Returning Officer **via your student email** by 4:00pm on Friday 30 August.

A provisional nominations list will be issued on Friday 30 August with a final nominations list issued after Monday 2 September.

Please send to [elections@elect1.com.au](mailto:elections@elect1.com.au).

**Tully Smith**  
**Returning Officer**  
**23 August 2024**