

## **GOVERNOR-NOMINEE DATA**

Rotary Year To Serve:	District:	Zone:
This form should be legibly completed by all candidate certify the form of the nominee duly selected by the dis		-
Title (Mr., Ms., Mrs., Miss, Dr., Rev.,	etc.):	
Full Name:		
(as it would appear on lists an	d mailing labels; please <u>underline</u> famil	y name)
Name by which commonly known in R	otary:("Rotary name," as it would app	
Gender: q Male q Female Male q Female	arital Status: q Single q Marrie	ed q Widowed q Divorced
City, country and year of birth:		
Member of the Rotary Club of		
(Please g	give full official name of club, including	country)
Classification:		
Current (or recent, former) firm and positi	ion:	
If retired, year of retirement, firm and p	position:	
Rotary Club(s)	Years as Member	Rotary Year served as President*
	Years	
	Years	
	Years	
* To qualify for nomination, a person <u>n</u>	-	
Telephone*	Fax*	e-mail**
Residence:		
Business:		

\*(include country/city or area codes)

RTANT: By providing your e-mail

\*\*IMPORTANT: By providing your e-mail address, you will automatically "subscribe" to receive individual and group e-mail from Rotary International regarding general and specific Rotary information. Should you at any time wish to discontinue receiving group e-mail, you may elect to "unsubscribe" via Rotary's website (<a href="www.Rotary.org">www.Rotary.org</a>) without jeopardizing your office. However, should you choose to "unsubscribe", please understand that RI's required communications to you, as district governor-elect and as district governor, may be delayed while they are transmitted via facsimile or through normal postal channels.

<b>Preferred Mailing Address:</b> (chec (* If this address is a post office box, pl			
(Line 1)			
(Line 2)			
(Line 3)			
(Line 4)			
Residence Address:			
(Line 1)			
(Line 2)			
(Line 3)			
(Line 4)			
<b>Business Address:</b>			
(Line 1)			
(Line 2)			
(Line 3)			
(Line 4)			
The International Assembly ses preference: (check one) q English Language(s) preferred in corre	n q French q	Japanese q Korean q	Portuguese q Spanish
Personal History (avoid abbrev	riations)		
Membership and offices held in important first. <u>Use an addition</u>		C	ns - please list most
Name of Organization	Office	Dates Office Held	Dates of Membership

Membership and offices hel	d in social and c	ivic organizations - p	lease list most important first:
Name of Organization	<u>Office</u>	Dates Office Held	Dates of Membership
Brief outline of business or	professional car	eer including firm(s)	and dates:
brief outline of business of	professional car	eer, including fiffi(s)	and dates.
My two principal hobbies an	re:		
SPOUSE INFORMATION	(if applicable)		
Spouse's Full Name:			
Spouse 81 un rume.			please <u>underline</u> family name)
Gender: q Male q Female	Title:	(Mr., Ms., Mrs., Miss,	Dr., Rev., etc.):
Name by which commonly known	own in Rotary:		
Traine of Willow Commissing in			it would appear on badges)
If spouse is a Rotarian, the clu	ib in which he/she	is a member: Rotary C	lub of
		6 11 1 1	Y 1 A 11
			International Accembly:
• •			•
Please indicate your spouse's and English q French	language preferen		ortuguese q Spanish
q English q French	Q Japanese	q Korean q Po	ortuguese q Spanish
Please indicate your spouse's  Q English Q French  Please indicate your spouse's  Q Chinese Q English	Q Japanese	q Korean q Po	ortuguese q Spanish

PHOTOS - If selected, a head & shoulders photograph measuring at least 4"x 5" (10 x 12½ cm.) of nominee and spouse (individually, not as a couple) will be required.

Photographs are not to be stapled to form and are to be marked on the back with name and district number.

## **CANDIDATE'S STATEMENT**

governor as set forth in the RI Bylaws and the and otherwise, to assume and fulfill the duti Further, I understand that if selected, I must	ualifications, duties and responsibilities of the office of district nat I am fully qualified for said office and willing and able, physically es and responsibilities of that office and to perform them faithfully. attend, for their full duration, the Governors-elect Training Seminar to be held immediately prior to taking office. I have read this form in is form to be true and correct.
Date	Signature of Candidate
STATEMENT OF CAND	IDATE'S QUALIFICATIONS BY THE CLUB
	. The club further attests that this member crict governor under Section 13.020.3 of the RI Bylaws, and the le 15.070 of the RI Bylaws and that the information contained
Date  CERTIFICATE OF I	Signature of Secretary of Candidate's Club  DISTRICT NOMINATING COMMITTEE
The undersigned members of the District whose name appears on this form, to the best campaigning, electioneering and canvassing Names	Nominating Committee, hereby certify that the candidate at of the committee's knowledge, has not violated any of the rules on stipulated in the RI Bylaws, Article 10.050.  Signatures  ———————————————————————————————————
The Rotarian named on this form is a member for district governor in accordance with the	per in good standing of the Rotary club listed and was duly nominated provisions of the Bylaws of RI.
 Date	Signature of District Governor