



2024-2025 AUGSA Election Nomination Form

Forms for Council Member positions will only be accepted during the nomination period. Please send completed form to ed@augsa.com.

Candidate Information

Full Name: _____

Name as it should appear on the ballot: _____

Current Faculty (Program): _____

Mailing Address: _____

Student ID: _____

Email Address: _____

Phone Number: _____

Date of Birth: Day _____ Month _____ Year _____

By signing my name below, I acknowledge that I am eligible to run in the Athabasca University Graduate Students' Association elections, in accordance with Bylaws and Policies of AUGSA. I acknowledge that I have read and will abide by the rules and regulations set out in the aforementioned documents. Furthermore, I am a graduate student in good standing at Athabasca University currently enrolled in Graduate Studies and I am not a full-time employee of Athabasca University.

Please attach a 200-word (max) bio and headshot photo with this nomination form. Email to ed@augsa.com.

(Nominee Signature)

____/____/_____
(Date)





Athabasca University
Graduate Students'
Association

135-2525 36th St NE
PO Box 57202, Calgary, AB T1Y 6R4



Direct: 780.257.5394
Toll free: 1.866.625.5943

www.AUGSA.com