UACS Executive Election Nomination Form

Ι, _		as a candidate for the position o
	Nominator's Email:	Nominator's Signature:
	Su	ipporters:
Name	e: Email:	Signature:
Name	e:Email:	Signature:
	Cano	didate Information:
	Name:	Email:
	Student ID:	:
	Program and Year	r:
	Signature:	
	Received by U.A.C.S. Member:	Date: