

Governor-nominee Form

Governor year of service	District		Zone)	RI me	embership	ID numb	er	
amily name			First name			Middle initial			
Name as it should appear on yo							_		
Member, Rotary Club of					Class	ification			
Please ensure that your contact	information (e-mail,	postal addı	ess and pl	one numbe	er) is up-to	-date in N	My Rotary!	!	
Language(s) in which you are	fluent (listed in order	of fluency)	:						
Language(s) you wish to use for	or communicating wit	th RI (listed	in order o	of fluency):					
Read		S	peak						
For each of the following cates			guage per	category.					
International Assembly:	English French	Japanese	Korean	Portugu	ese Spai	nish			
Publications available in 6 languages:	English French	Japanese	Korean	Portugue	ese Spai	nish			
Publications available in 9 languages:	English French	German	Italian	Japanese	Korean	Portugu	iese Spa	nish Swedi	sh
Publications available in 14	Arabic Chinese	English	Finnish	French	German	Hindi	Italian	Japanese K	orea
languages:	Portuguese Span	Portuguese Spanish Swedish Thai							
pouse/Partner Information (if applicable)		Einst no				MC	J.J. :::::1	
Family name			First na	me			M10	ddle initial	—
Name as it should appear on yo	our badge							7	
E-mail					Gend	er <u> </u>	Iale _	Female	
For each of the following categ	gories, please circle or	nly one lang	guage per	category.					
International Assembly:	Chinese English Spanish Swedish		German	Hindi	Italian .	Japanese	Korean	Portuguese	
Publications available in 6 languages:	English French	Japanese	Korean	Portugu	ese Spai	nish			-

Member, Rotary Club of ______ RI membership ID number ____



Governor-nominee Data Form

All signatures on this page must be handwritten (electronic signatures are not acceptable).

CANDIDATE'S STATEMENT

I hereby state that I understand clearly the qualifications, duties, and responsibilities of the office of district governor as set forth in the RI Bylaws and that I am fully qualified for said office and willing and able, physically and otherwise, to assume and fulfill the duties and responsibilities of that office and to perform them faithfully. Further, I have read and agreed to abide by the district governor code of ethics, as detailed in the Rotary Code of Policies. I agree in advance to accept the decision of the RI Board concerning my election to office without recourse to any non-Rotary agency or other dispute resolution system and further accept that any court costs and attorney's fees incurred by RI in enforcing this agreement shall be reimbursed by me in their entirety. I understand that if selected, I must attend, for their full duration, the governors-elect training seminar in my zone and the International Assembly to be held the Rotary year before taking office. I have read this form in its entirety and certify that all the information provided on this form is true and correct.

and correct.							
Date	Signature						
CLUB'S STATEMENT OF C	ANDIDATE'S QUALIFICATIONS						
The club further attests that this	is a member in good standing of the Rotary of member has been duly suggested for the office pecified in RI Bylaws 16.070 and that the clu	ce of district governor under RI Bylaws 14.020.4					
Date	Club Secretary's Name	Club Secretary's Signature					
CERTIFICATE OF NOMINATE The Rotarian named on this form in accordance with the provision	n is a member in good standing of the Rotary	club listed and was duly nominated for district governo					
Date	District Governor's Name	District Governor's Signature					

District governor: Please e-mail this form to your <u>CDS representative</u> by 30 June.