**GOVERNOR-NOMINEE DATA**

# Rotary Year To Serve:

**District:**

**Zone:**

This form should be legibly completed by all candidates for governor and submitted to the district nominating committee. The district governor will certify the form of the nominee duly selected by the district nominating committee, and will submit it to Rotary International.

## Title (Mr., Ms., Mrs., Miss, Dr., Rev., etc.):

Full Name:

(as it would appear on lists and mailing labels; please **underline** family name)

## Name by which commonly known in Rotary:

(“Rotary name,” as it would appear on badges)

## Gender:  Male  Female Marital Status:  Single  Married  Widowed  Divorced City, country and year of birth: Member of the Rotary Club of

(Please give full official name of club, including country)

Classification: Current (or recent, former) firm and position: If retired, year of retirement, firm and position: Rotary Club(s) Years as Member Rotary Year served as President\*

## Years -

Years -

Years -

\* To qualify for nomination, a person must have served a full term as president of a club at time of nomination.

**Telephone\* Fax\* e-mail\*\***

**Residence:**

**Business:**

**\***(include country/city or area codes)

## **\*\*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 (www.Rotary.org) 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.

**Preferred Mailing Address: (check one)**  Residence  Business  Other - indicate below\*

(\* If this address is a post office box, please provide an alternate address for courier delivery.)

## (Line 1)

(Line 2)

(Line 3)

(Line 4)

**Residence Address:**

(Line 1)

(Line 2)

(Line 3)

(Line 4)

**Business Address:**

(Line 1)

(Line 2)

(Line 3)

(Line 4)

The International Assembly sessions are conducted in these six languages. Please indicate your preference: (check one)  English  French  Japanese  Korean  Portuguese  Spanish

Language(s) preferred in correspondence (list in order of preference):

**Personal History (avoid abbreviations)**

Membership and offices held in business and professional organizations - please list most important first. Use an additional sheet of paper if necessary.

Name of Organization Office Dates Office Held Dates of Membership

Membership and offices held in social and civic organizations - please list most important first: Name of Organization Office Dates Office Held Dates of Membership

Brief outline of business or professional career, including firm(s) and dates:

My two principal hobbies are:

**SPOUSE INFORMATION** (if applicable)

## Spouse’s Full Name:

(as it would appear on lists and mailing labels, please **underline** family name)

## Gender:  Male  Female Title: (Mr., Ms., Mrs., Miss, Dr., Rev., etc.):

Name by which commonly known in Rotary:

(“Rotary name,” as it would appear on badges)

## If spouse is a Rotarian, the club in which he/she is a member: Rotary Club of

Please indicate your spouse’s language preference for discussions at the International Assembly:

 English  French  Japanese  Korean  Portuguese  Spanish Please indicate your spouse’s language preference for receiving mailings from RI:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  Chinese |  English |  French  German |  Hindi |  Italian |
|  Japanese |  Korean |  Portuguese  Spanish |  Swedish |  |

***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**

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 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 immediately prior to taking office. I have read this form in its entirety and certify the data entered on this form to be true and correct.

Date Signature of Candidate

# STATEMENT OF CANDIDATE’S QUALIFICATIONS BY THE CLUB

The candidate herein mentioned is a member in good standing of The Rotary club of

. The club further attests that this member has been duly suggested for the office of district governor under Section 13.020.3 of the RI Bylaws, and meets the qualifications as specified in Article 15.070 of the RI Bylaws and that the information contained on this form regarding membership in the club is accurate.

Date Signature of Secretary of Candidate's Club

# CERTIFICATE OF DISTRICT NOMINATING COMMITTEE

The undersigned members of the District Nominating Committee, hereby certify that the candidate whose name appears on this form, to the best of the committee’s knowledge, has not violated any of the rules on campaigning, electioneering and canvassing stipulated in the RI Bylaws, Article 10.050.

*Names Signatures*

# CERTIFICATE OF NOMINATION

The Rotarian named on this form is a member in good standing of the Rotary club listed and was duly nominated for district governor in accordance with the provisions of the Bylaws of RI.

Date Signature of District Governor