

UNIVERSITY COUNCIL NOMINATION FORM

١,	full name		
wi	sh to nominate for the following position on the University Council:		
	Academic Staff Member Professional Staff Member		
	ote: Even if you are eligible to stand as a candidate for more than one elected position in an election, u can only stand for one position .		
۱d	eclare that I:		
a.	am over the age of 18;		
b.	am eligible to nominate, and wish to be nominated, for election within the category I have selected and am not aware of any matter that may affect my eligibility in the future;		
c.	understand the role, responsibilities and duties of members of the Council as set out in the <i>University</i> of Canberra Act 1989 and am willing to serve as a member of the Council;		
d.	am not disqualified from becoming a member of Council under the provisions of section 12 of the University of Canberra Act 1989;		
e.	am not subject to a psychiatric treatment order or a community treatment order under the <i>Mental Health (Care and Treatment Act) 1994 (ACT);</i>		
f.	am not a person with impaired decision-making ability under the Guardianship and Management of Property Act 1991 (ACT);		
g.	have not been suspended or excluded from the University under any statute or rule or been found to have engaged in serious misconduct.		
Stud	lents only		
h.	have not been suspended or excluded from the University under any statute or rule or been found to have engaged in serious misconduct.		
	I understand that the University will communicate with me by official UC email and confirm that the email address provided is correct and valid.		
	I understand that my Candidate Statement forms a part of my nomination and may become public information in the event a ballot is required.		
	I confirm that I have a reasonable expectation that I will, if elected, remain eligible to fulfil the responsibilities of the position and will not create a casual vacancy during theterm.		

First name	Surname
Staff number	Official UC email
Signature (e-signature is permitted)	Date
Endorsement of Nomination	
Note: An endorser must be eligible to vote in the same an academic staff member must endorse an academic	
I endorse the nomination of:	
for election to the University Council in the category in vote in the same election as the nominee.	ndicated on this form and confirm that I am eligible to
Endorser 1	
First name	Surname
Staff number	Official UC email
Signature (e-signature is permitted)	Date
Endorser 2	
First name	Surname
Staff number	Official UC email
Signature (e-signature is permitted)	Date

Email endorsement will be accepted where it is not possible to arrange a signature and must be sent from the endorser's **official UC email** address directly to <u>elections@canberra.edu.au</u>. The email MUST be received before **5:00pm Friday 29 August 2025** and contain the following information:

- name and staff number of the person being nominated;
- name and staff number of the endorser; and
- contact phone number of the endorser.

Candidate Statement and Photo

You may provide a statement in <u>Word format</u> for publication on the <u>election website</u> in support of your candidacy, up to a maximum of 500 words. Where a statement exceeds 500 words, only the first 500 words will be published.

The Returning Officer may request a candidate to amend their statement if it contains inappropriate content (e.g. defamatory or discriminatory statements) and may withhold that content from publication if the candidate refuses to amend the statement.

It is <u>required</u> that you provide a photo to be published with your candidate statement. The Returning Officer must approve any photo prior to publication.

Lodgement of Nomination Form, Candidate Statement and Photo

Nominations must be received by the Returning Officer by no later than 5:00pm Friday 29 August 2025.

Please email the completed nomination form, candidate statement and photo to <u>elections@canberra.edu.au</u>. Receipt of nominations will be acknowledged by email.

Stephanie Payne

Returning Officer
University Secretary