

**Concordia GSA Election 2023  
NOMINATION FORM**

Date \_\_\_\_ / \_\_\_\_ / 2023

Full Name of the nominee (you may nominate yourself if you wish to do so)	
Contact Phone Number	
Email	
For the position of:	Program Representative of _____
Nominated by: (Nominator/s must be an active member of the GSA)	
Name	Signature