

This form must be delivered to the uploaded by March 19, 2026, at 4:00 p.m. to the portal at <https://elections.studentassociation.ca/>

**Section 1: Candidate's Information**

<b>Legal last name(s) of candidate:</b>		<b>Legal first name(s) of candidate:</b>	
<i>This name will not appear on the ballot paper but will be used to verify your status as a student with the college.</i>			
<b>Email address of candidate (GBC):</b>		<b>Email address of candidate (personal):</b>	
<b>Telephone number</b>		<b>Student number</b>	

<b>Immigration Status within Canada:</b>	
<i>Please select one:</i>	
<input type="checkbox"/>	<b>Canadian Citizen or Permanent Resident</b>
<input type="checkbox"/>	<b>Study Permit</b>
<input type="checkbox"/>	<b>Work Permit</b>

<b>Office sought:</b>	
<i>Please select one:</i>	
<input type="checkbox"/>	<b>Academic Faculty Representative from the Faculty of Applied Science, Engineering, and Technology</b> <i>(two to be elected)</i>
<input type="checkbox"/>	<b>Academic Faculty Representative from the Faculty of Health Sciences</b> <i>(one to be elected)</i>

**Section 2: Candidates Declaration**

I, undersigned, do affirm that:

- I understand the duties of the office which I am seeking;
- I am currently a member of the Student Association of George Brown College;
- I am at least 18 years of age or older as May 1, 2026;
- I have not been found incapable of managing property by any court in Canada or elsewhere, nor do I have the status of bankrupt;
- I agree to the disclosure of personal information regarding my academic standing held by the Office of the Registrar of George Brown College of Applied Arts and Technology to the Chief Returning Officer for the purpose of determining my eligibility to run for a position. I make this consent in accordance with section 42(1)(b) of the *Freedom of Information and Protection of Privacy Act (RSO 1990, C. F-31)*;
- My name as recorded below is exactly as I wish my name to appear on the ballot paper:

**Candidate Name(s) as it will appear on the Ballot**

*The name appearing in the boxes below must be exactly as the candidate wishes their name to appear on the ballot paper. One or more of the given names of the candidate may be replaced by the nickname by a normal aberration of one or more of the candidates given name (i.e. Meg, Andy, Bill). Mononyms are not accepted on the ballot, unless that the mononym is the legal name of the nominee.*

PRINT CLEARLY OR TYPE ONLY

- I understand that if I am a staff member of the Student Association of George Brown College, I will be placed on leave of absence for the campaign period, and if I am successful, I will be deemed to have resigned my office as of the day I take office.
- I understand that if I am currently serving on the Board of Directors, I will be placed on an unpaid leave of absence for the campaign period.

- I understand that the term of office for this position starts on May 1, 2026 and ends on April 30, 2027 and that I must qualify for this position throughout my term of office, meaning:
  - **FOR EXECUTIVE POSITIONS**, I cannot take more than the normal full-time course load for my program, and if I do, my position will be declared vacant; and I understand that this position is a 28 hour a 28-hour-a-week paid position.
  - **FOR ACADEMIC FACULTY REPRESENTATIVES**, I must be registered full-time in my a program with my faculty throughout my term of office.

I make this declaration continuously believing it to be true.

\_\_\_\_\_  
Signature of candidate

\_\_\_\_\_  
Date

**Section 3: Candidates Declaration**

Name of candidate	Position sought

**Declaration of Electors:**  
 I, one of the undersigned, am eligible to vote for the position stated above, and do hereby nominate the person named above, as a candidate for the position stated above.

	Student name	Student number	Program	Signature
1				
2				
3				
4				
5				



# FORM 1A: GENERAL NOMINATIONS PAPER

	Student name	Student number	Program	Signature
6				
7				
8				
9				
10				
<b><i>Academic Faculty Representatives nominations need not submit more than 10 signatures, however it is recommended that they do as a precaution to ensure accuracy.</i></b>				
11				
12				
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14				
15				



# FORM 1A: GENERAL NOMINATIONS PAPER

	Student name	Student number	Program	Signature
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23				
24				
25				



# FORM 1A: GENERAL NOMINATIONS PAPER

	Student name	Student number	Program	Signature
26				
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36				



**STUDENTASSOCIATION**  
GEORGE BROWN COLLEGE

# FORM 1A: GENERAL NOMINATIONS PAPER

	Student name	Student number	Program	Signature
37				
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41				
42				
43				
44				
45				