

## **Tyndale University Undergraduate Student Association Nomination Form**

## PART TWO – Faculty/Pastoral Support Name of Reference E-mail PART THREE – TUUSA Council Member Approval 1. I, \_\_\_\_\_\_\_, nominate the above candidate for the approval of the position indicated.

Signature of TUUSA Council Member

Date

PART FOUR – Undergraduate Student S	Support:
1. l,	, nominate the above candidate for
the position indicated.	
Date	Signature of TUUSA Member
2. l,	, nominate the above candidate for
the position indicated.	
Date	Signature of TUUSA Member
	, nominate the above candidate for
the position indicated.	
Date	Signature of TUUSA Member
4. I,the position indicated.	, nominate the above candidate for
Date	Signature of TUUSA Member
5. I,the position indicated.	, nominate the above candidate for
Date	Signature of TUUSA Member
EXCEPTION – Dean of Student Life App	roval:
1. I,nominated for the position indicated.	
 Date	Signature of the Dean of Student Life