



# ROTARY INTERNATIONAL

## GOVERNOR-NOMINEE DATA FORM

Governor candidates submit this form to the district nominating committee. The district governor certifies the nominating committee's selection and submits this form to RI. This form also registers the governor-nominee for the International Assembly. After this form has been submitted, please notify RI of any changes in your contact information.

**Governor Year:** \_\_\_\_\_ **District:** \_\_\_\_\_ **Zone:** \_\_\_\_\_ **Date Form Completed:** \_\_\_\_\_

Title (Mr., Ms., Mrs., Dr., Rev., etc.): \_\_\_\_\_ Suffix (i.e., Jr., Sr., III) \_\_\_\_\_

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Name by which commonly known in Rotary: \_\_\_\_\_

("Rotary name," as it would appear on your badge)

Gender:  Male  Female      Marital Status:  Single  Married  Widowed  Divorced

City, country, and year of birth: \_\_\_\_\_

Member, Rotary Club of \_\_\_\_\_  
(Please give full official name of club, including country)

Rotary International membership ID number: \_\_\_\_\_

Year you first joined Rotary: \_\_\_\_\_ Current classification: \_\_\_\_\_

Current (or former) firm and position: \_\_\_\_\_

If retired, year of retirement, firm and position: \_\_\_\_\_

Per RI Bylaws 15.070.4, a qualified Rotarian must have served a full term as club president, or as charter president from the date of charter to 30 June (6-month minimum), at the time of nomination.

<u>Rotary club(s)</u>	<u>Years as member</u>	<u>Rotary year served as president</u>
_____	_____ Years	_____ - _____
_____	_____ Years	_____ - _____

**Telephone** (Include country/city or area codes) \_\_\_\_\_ **Fax** (Include country/city or area codes) \_\_\_\_\_

**Residence:** \_\_\_\_\_

**Business:** \_\_\_\_\_

**Preferred E-mail Address:**  Residence  Business \_\_\_\_\_

Providing your e-mail address automatically subscribes you to RI e-mail. All RI registration and housing confirmations are sent by e-mail. If you wish to discontinue receiving group RI e-mail, you can unsubscribe at [www.Rotary.org](http://www.Rotary.org). If you unsubscribe, RI's required communications to you, as a district leader, will be sent via the slower methods of facsimile or mail.

**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:** (If same as preferred, you may leave blank.)

(Line 1) \_\_\_\_\_

(Line 2) \_\_\_\_\_

(Line 3) \_\_\_\_\_

(Line 4) \_\_\_\_\_

**Business Address:** (If same as preferred, you may leave blank.)

(Line 1) \_\_\_\_\_

(Line 2) \_\_\_\_\_

(Line 3) \_\_\_\_\_

(Line 4) \_\_\_\_\_

**Language Preferences**

Please list, in order of preference, the language(s) you wish to use in correspondence with RI:

Read: \_\_\_\_\_ Speak: \_\_\_\_\_

The International Assembly sessions are conducted in these six (6) languages. Please indicate your preference: (check one)  English  French  Japanese  Korean  Portuguese  Spanish

All Rotary literature is produced in these six (6) languages. Please indicate your preference: (check one)  English  French  Japanese  Korean  Portuguese  Spanish

Please indicate your preference for Rotary publications produced in 9 languages: (check one)

English  French  German  Italian  Japanese  Korean  
 Portuguese  Spanish  Swedish

Please indicate your preference for Rotary publications produced in 13 languages: (check one)

Chinese  Dutch  English  Finnish  French  German  Italian  
 Japanese  Korean  Portuguese  Spanish  Swedish  Thai

**Personal History** (Please do not use abbreviations below.)

**Business and professional organizations:** Please list most important membership and offices held first. You may use an additional sheet of paper, as necessary.

Name of Organization                      Office                      Dates Office Held                      Dates of Membership

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Social and civic organizations:** Please list in order most important membership and offices held.

Name of Organization                      Office                      Dates Office Held                      Dates of Membership

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Business or professional career:** Please provide a brief outline, including firm(s) and dates:

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My two principal hobbies are: \_\_\_\_\_

**SPOUSE INFORMATION** (if applicable)

Governors-elect wishing to bring a non-spouse guest to the International Assembly must send a written request to the RI President-elect via RI Registration at e-mail: rireg@rotaryintl.org detailing reasons for bringing a guest. The President-elect evaluates each request on a case-by-case basis and responds individually. International Assembly spouse program information will be sent by e-mail and mail to the preferred postal address.

Spouse's Title (Mr., Ms., Mrs., Dr., Rev., etc.): \_\_\_\_\_ Gender:  Male  Female

Spouse's Last Name: \_\_\_\_\_

Spouse's First Name: \_\_\_\_\_ Spouse's Middle Name: \_\_\_\_\_

Name by which commonly known in Rotary: \_\_\_\_\_  
("Rotary name," as it would appear on badges)

Spouse's fax: \_\_\_\_\_ Spouse's e-mail \_\_\_\_\_

For Rotarian Spouses, indicate his/her membership ID number and club in which he/she is a member:

Spouse Membership ID Number: \_\_\_\_\_

Spouse Member, Rotary Club of \_\_\_\_\_

Please indicate your spouse's language preference for discussion 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

**INTERNATIONAL ASSEMBLY** – Please provide the following additional registration information

**Special Needs** (*please list*): \_\_\_\_\_

**Emergency Contact Information:** *Name* \_\_\_\_\_

*Phone* \_\_\_\_\_ *Fax* \_\_\_\_\_

**Photos:** If selected, a head & shoulders photograph of nominee and spouse (individually, not as a couple) will be required. **Digital Photos in high-resolution .jpg format are preferred.** Hard copy photographs must be at least 4"x 5" (10 x 12½ cm.) and have your full name and district number indicated on the back. Do **not** staple photos to the form.

**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 Rotary 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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

**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 RI Bylaws.

\_\_\_\_\_   
 Date

\_\_\_\_\_   
 Signature of District Governor