

## **GOVERNOR-NOMINEE-DESIGNATE FORM**

<b>District governor candidate</b> Please complete and sign this form,	have your club secretary sign	it, and submit it to the distr	rict nominating committee.	
Governor year of service	District	Zone	RI membership ID number	
Family name			Middle initial	
Name as it should appear on your	badge			
Member, Rotary Club of	-		Classification	
Please ensure that your contact in	formation (email, postal addres	ss, and phone number) is t	up-to-date in My Rotary.	
Language(s) in order of fluency:				
Read		Speak		
For each of the following categorie	s, please pick only one langua	ge per category.		
International Assembly:	English French Japanes	e Korean Portuguese	Spanish	
Publications available in languages:	Arabic Chinese English	Finnish French Ger	rman Hindi Italian Japanese Korean	
	Portuguese Spanish Sw	edish Thai		
Partner information (if applicable	)	First name	Middle initial	
Name as it should appear on your badge				
Email				
Gender □ <sub>Male</sub> □ <sub>Female</sub> I	Self-describe		Prefer not to identify	
For each of the following categorie			·	
International Assembly:	Chinese English French Spanish Swedish	n German Hindi <b>I</b> tal	ian Japanese Korean Portuguese	
Publications available in these languages:	English French Japanes	se Korean Portuguese	e Spanish	
For partners only:				
Member, Club of			RI membership ID number	



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District governor: Please email this form to Club and District Support by 30 June.

## **PRIVACY**

Your privacy is important to Rotary and the personal data you share with Rotary will only be used for essential activities or for Rotary's legitimate interests, taking into account your privacy rights. These uses include financial processing, supporting The Rotary Foundation, facilitating event planning, communicating key organizational messages, and responding to your inquiries. In addition, your contact information will be shared with other Rotarians and included in the International Assembly Leadership Directory. Rotary's privacy policy can be found here.

## **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 have read and agreed to abide by the district governor code of ethics, as detailed in the Rotary Code of Policies. I agree in advance to accept the decision of the RI Board concerning my election to office without recourse to any non-Rotary agency or other dispute resolution system and further accept that any court costs and attorney's fees incurred by RI in enforcing this agreement shall be reimbursed by me in their entirety. 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 the Rotary year before taking office. I have read this form in its entirety and certify that all the information provided on this form is true and correct.

Date	Signature	
CERTIFICATE OF NOMINATION  The Rotarian named on this form is a mem with the provisions of the RI Bylaws.	nber in good standing of the Rotary club listed and was	duly nominated for district governor in accordance
Date	District governor's name	District governor's signature

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