**District Governor Nominee Designate Form**

**Suggestions to the District 6330 Nominating Committee must be submitted on this form.** A suggested candidate must meet the qualifications in RI Bylaws section 16.010-16.020 and be willing and able to fulfill the duties and responsibilities of a governor in section 26.040. No person who has agreed in writing to be a member, alternate member, or candidate for membership on a Nominating Committee – whether elected or not-nor any candidate who is elected and subsequently resigns from the committee, nor any spouse, child, or parent of any such person, shall be eligible to be nominated for the respective office in the year in which the committee serves. A candidate must have served as a club president for a full term or as a charter president for at least six months. As provided in RI Bylaws section 13.010, brochures, literature, or letters are not to be distributed or circulated by a candidate for governor, or y others on the candidate’s behalf, except as may be expressly authorized by the RI Board. The bylaws further provide that under certain circumstances the RI board may disqualify any candidate from election who violates the provisions prohibiting campaigning, canvassing, or electioneering for any elected position in RI.

**District 6330 DGND candidate:**

Please complete and sign this form, have your club secretary sign it, and submit it to the district nominating committee

Governor year of service

Family name First Name Middle initial

Name as it should appear on your badge

Member, Rotary Club of Classification

Please ensure that your contact information (e-mail, postal address and phone number) is up-to-date in My Rotary!

**Spouse/Partner Information (if applicable)**

Family name First Name Middle initial

Name as it should appear on badge

E-mail

If your spouse/partner is a Rotarian, what is their club?

**Current Rotary Positions(s) Assignments(s) in a Club**

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|  |

**Current Rotary Positions(s) Assignments(s) in a District**

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|  |

**Have you attended a District Conference?**

**Have you done any RLI courses?**

**What service have you provided to your club since serving as Club President?**

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| --- |
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**List special Rotary services or particular activities you have done to advance Rotary?**

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**Please attach a copy of your Curriculum Vitale**

**Please describe your vision and goals for this District if you are selected as Governor**

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**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, considering 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 Participant book. Rotary’s privacy policy can be found: <https://my.rotary.org/en/privacy-policy>

**CANDIDATE’S STATEMENT**

I hereby state that I clearly understand 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

**CLUB’S STATEMENT OF CANDIDATE’S QUALIFICATIONS**

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 RI Bylaws 12.030.3. and meets the qualifications as specified in RI Bylaws 16.010. and that the club membership information on this form is accurate.

Date Club Secretary’s Name Club Secretary’s Signature

**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 District Governor’s Name District Governor’s Signature

**District Governor:** Please e-mail this form to your CKS representative by 30 June.