

2018/20 Nomination Form  
For Holy Trinity College Past Students' Association  
Executive Committee Positions



**Position** (Please tick one)

- |   |   |
|---|---|
| <input type="checkbox"/> President          | <input type="checkbox"/> Membership Officer       |
| <input type="checkbox"/> Vice President     | <input type="checkbox"/> Public Relations Officer |
| <input type="checkbox"/> Honorary Secretary | <input type="checkbox"/> Community Work Officer   |
| <input type="checkbox"/> Honorary Treasurer | <input type="checkbox"/> Fund-Raising Officer     |

**Nominee**

Name: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Signature of Nominee: \_\_\_\_\_

Membership: Ordinary/Life Member\*



Nominated by: \_\_\_\_\_ Signature: \_\_\_\_\_  
HTCPSA Member/Honorary President/Patron\*

Seconded by: (1) \_\_\_\_\_ Signature: \_\_\_\_\_  
Membership: Ordinary/Life Member\*

Seconded by: (2) \_\_\_\_\_ Signature: \_\_\_\_\_  
Membership: Ordinary/Life Member\*

The nominee indicates her consent to accept the office or position if elected by signing above, where indicated.

This form is to be used if any of the above persons cannot present in person at the election. This form must reach the President the latest by Jun 26, 2018.

\*Please delete if inappropriate