



# Governor-nominee Form

## District governor 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 \_\_\_\_\_ District \_\_\_\_\_ Zone \_\_\_\_\_ RI membership ID number \_\_\_\_\_

Family name \_\_\_\_\_ First name \_\_\_\_\_ Middle initial \_\_\_\_\_

Name as it should appear on your badge \_\_\_\_\_

Member, Rotary Club of \_\_\_\_\_ Classification \_\_\_\_\_

Language(s) you wish to use for communicating with RI (listed in order of fluency):

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

For each of the following categories, please circle only one language per category.

International Assembly:	English French Japanese Korean Portuguese Spanish
Publications in 6 languages:	English French Japanese Korean Portuguese Spanish
Publications in 9 languages:	English French German Italian Japanese Korean Portuguese Spanish Swedish
Publications in 14 languages:	Arabic Chinese English Finnish French German Hindi Italian Japanese Korean Portuguese Spanish Swedish Thai

## Spouse/Partner Information (if applicable)

Family name \_\_\_\_\_ First name \_\_\_\_\_ Middle initial \_\_\_\_\_

Name as it should appear on your badge \_\_\_\_\_

E-mail \_\_\_\_\_ Gender  Male  Female

For each of the following categories, please circle only one language per category.

International Assembly:	Chinese English French German Hindi Italian Japanese Korean Portuguese Spanish Swedish
Publications in 6 languages:	English French Japanese Korean Portuguese Spanish

*For Rotarian Spouses/Partners only:*

Member, Rotary Club of \_\_\_\_\_ RI membership ID number \_\_\_\_\_



# Governor-nominee Data Form

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*All signatures on this page must be handwritten (electronic signatures are not acceptable).*

## 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

## 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 13.020.4 and meets the qualifications as specified in RI Bylaws 15.070 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 CDS representative by 30 June.