

2016 UNIVERSITY OF TORONTO MISSISSAUGA CAMPUS COUNCIL ELECTIONS TEACHING STAFF NOMINATION FORM

Please ensure that this form is completed in full and that you type or print clearly. Failure to do so may invalidate your nomination.

The nomination form and accompanying documentation must be submitted to Room 3216, W. G. Davis Building, UTM, by **Friday, January 15, 2016, at 5:00 p.m.**

Section I: Personal Information

Section 1: Personal information		
Title: \Box Dr. \Box Ms \Box Mr. \Box Professo	r	
Last Name:	First Name:	
Name (as it will appear on the ballot):		
Academic Rank:		
Department:		
University Mailing Address:		
University Telephone number:	Mobile telephone number:	
Preferred email address:		
Section II: Candidate's Responsibility		

It is the Nominee's responsibility to file a bona fide nomination. Errors or irregularities in these papers constitute grounds for rejection of the nomination. Errors or irregularities may be corrected prior to the close of nominations. Please refer to the *Election Guidelines 2016* for additional instructions. The Deputy Returning Officer (DRO) or Chief Returning Officer (CRO) will attempt to notify candidates of the existence of any errors or irregularities during this period, but are not obligated to do so. Candidates are advised to complete and submit their nomination papers early in the nomination period.

Elections 2016 – Nomination Form UTM CC Teaching Staff 1 of 3 Inquiries may be directed to the Deputy Returning Officer (by email at <u>council.utm@utoronto.ca</u> or by phone at 905-828-5233) or the Chief Returning Officer (by email at anwar.kazimi@utoronto.ca or by phone at 416-978-8427).

2016 UTM Campus Council Elections: Teaching Staff Nomination Form

Name: _____

Section III: Definitions

For election to the UTM Campus Council, the candidate and nominators must have a primary appointment at the University of Toronto Mississauga.

The definition of "**Teaching Staff**" below is an extract from the *Election Guidelines 2016*. It is your responsibility to ensure that you are eligible by consulting the *Election Guidelines 2016*, which provides more details for this definition and the eligibility criteria.

"Teaching Staff" means employees of the University who hold the academic rank of Professor; Associate Professor; Assistant Professor; Professor, Teaching Stream; Associate Professor, Teaching Stream; Assistant Professor, Teaching Stream; Lecturer and Senior Lecturer; Tutor and Senior Tutor; Assistant Professor (Conditional); Assistant Professor, Teaching Stream (Conditional); Sessional Lecturer I, Sessional Lecturer II, Sessional Lecturer III, Athletics Instructor and Senior Athletics Instructor but does not include any part-time lecturer who is registered as a student. For this purpose, "Lecturer" also includes Associates in the Faculty of Dentistry.

Section IV: Candidate Statement

The nominee may submit a typed biographical statement or other comments, up to a limit of 100 words. The candidate's name will not be counted in the 100-word total if placed at the beginning of the statement. Abbreviations and acronyms will be counted as one word. The nominee's URL will not be counted in the 100 word limit and should be placed at the end of the statement. This statement will be published in the campus media and linked to the ballot on the web. If a statement exceeds 100 words in length, only the first 100 words will be printed.

- □ I have attached a printed copy of the candidate statement; AND
- □ I have sent a copy of the same statement by email to the Deputy Returning Officer <u>council.utm@utoronto.ca</u>

Section V: Nominations

There is **one seat** for Teaching Staff members on the UTM Campus Council. No more than one person shall be elected from each department or equivalent unit. As such, teaching staff members from the following departments are **ineligible** to submit a nomination in the 2016 Elections.

- Department of Biology
- Department of Chemical and Physical Sciences
- Department of Geography
- Department of English and Drama

Elections 2016 – Nomination Form UTM CC Teaching Staff 2 of 3 Inquiries may be directed to the Deputy Returning Officer (by email at <u>council.utm@utoronto.ca</u> or by phone at 905-828-5233) or the Chief Returning Officer (by email at anwar.kazimi@utoronto.ca or by phone at 416-978-8427).

2016 UTM Campus Council Elections: Teaching Staff Nomination Form

Name: _____

I, the undersigned candidate, certify that I am eligible to serve on the University of Toronto Mississauga (UTM) Campus Council, and I have consented to stand for election to that Office. If elected to serve on the UTM Campus Council, I understand that I must resign from the Council if, during my term, I cease to be a member of the constituency from which I was elected. I approve my 100-word statement that is attached, and I agree to the terms of and to abide by the *Election Guidelines 2016*.

Signature:	Date:		
		to the University is collected pursuant to section 2(14)	
of <i>The University of Toronto Act, 1971</i> . This personal information is necessary and is collected for the purpose of administering the Governing Council elections. At all times it will be protected in accordance with the <i>Freedom of Information and Protection of Privacy Act</i> . If you have			
	o.ca/privacy or contact the Chief Returning	Officer, Office of the Governing Council, at 416-978-	
8427. Nominees for the LITM Compus	Council must ansura that at least	three members of their academic	
Nominees for the UTM Campus Council must ensure that at least three members of their academic unit sign the nomination form. Each nominator must include his/her printed full name and academic unit			
on the nomination form. Because some signatures may be declared invalid, you are encouraged to have			
additional nominators sign your form.			
additional noninators sign your i			
The Undersigned hereby nomin	nate	as a candidate for	
election in the Teaching Staff estate to serve for a 3 year term on the UTM Campus Council.			
election in the reaching Start estate to serve for a 5 year term on the Orivi Campus Council.			
PLEASE TYPE OR PRINT CLEARLY.			
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PRINTED FULL NAME	DEPARTMENT	SIGNATURE	
PRINTED FULL NAME		SIGNATURE	
		SIGNATURE	
PRINTED FULL NAME 1.		SIGNATURE	
PRINTED FULL NAME		SIGNATURE	
PRINTED FULL NAME 1. 2.		SIGNATURE	
PRINTED FULL NAME 1.		SIGNATURE	
PRINTED FULL NAME 1. 2. 3.		SIGNATURE	
PRINTED FULL NAME 1. 2.		SIGNATURE	
PRINTED FULL NAME 1. 2. 3. 4.		SIGNATURE	
PRINTED FULL NAME 1. 2. 3.		SIGNATURE	
PRINTED FULL NAME 1. 2. 3. 4. 5.		SIGNATURE	
PRINTED FULL NAME 1. 2. 3. 4.		SIGNATURE	

Thank you for your interest in participating in governance at the University of Toronto Mississauga.