

Co-option Application Form



I,			
Deakin email:		Student Number:	
Phone Number:			

Nominate for co-option to the position of Student Representative at:
(place X next to the campus at which you are primarily enrolled)

Cloud	
Burwood	
Geelong	
Warrnambool	

for the Deakin University Student Association Inc. (DUSA) and hereby declare that:

- I am a current student member of DUSA;
- I shall always work for the best interests of DUSA, fulfil the aspirations of the members of DUSA, and shall uphold the purpose of DUSA;
- I have read the conditions of nomination and solemnly swear that any statements contained within my nomination form are, to the best of my knowledge, true and accurate; and if elected to a position undertake to carry out my duties herein;
- I have read the DUSA Constitution and Regulations and agree to comply at all times;

Why have you applied for this position? - 150 words maximum



Where did you find out about this role?

Declaration:

As affirmed by my signature below, I agree to the above conditions and accept any repercussions of my non-compliance including the possibility of forfeiting my position.

Signature		Date	
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(You may sign this document electronically by typing your name in this section)

**Please return to:
General Secretary
DUSA
Email: dusa-gensec2016@deakin.edu.au**

CONFIDENTIAL: The personal contact information contained in this application will be treated as confidential, used to verify the identity and eligibility of applicants, and to directly contact applicants with regards to their application. Application statements will be held in confidence by the relevant DUSA committee and its members.