



THE SAC ALUMNI ASSOCIATION

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ST. AUGUSTINE'S COLLEGE ALUMNI ASSOCIATION (SACA) GENERAL ELECTION EXECUTIVE COMMITTEE APPLICATION 2020

Surname: _____ First: _____

Date of Birth: _____

Address: _____

City: _____ Country: _____

Telephone Contact : (H) _____ (M) _____

Email: _____

Year of Graduation: _____

I am applying for the position of :

- | | |
|---|---|
| <input type="checkbox"/> President | <input type="checkbox"/> Vice President |
| <input type="checkbox"/> Treasurer | <input type="checkbox"/> Assistant Treasurer |
| <input type="checkbox"/> Secretary | <input type="checkbox"/> Assistant Secretary |

Please obtain three (3) signatures from your graduating class as a reference for verification of active involvement in class activities / events.

Reference Name: _____ Signature: _____

Reference Name: _____ Signature: _____

Reference Name: _____ Signature: _____

Candidates are required to be current with election year and following year dues (two years dues).

I hereby declare that during the course of this election campaign,

- I do**
- I do not**

intend to make use of SACA social media platforms as an aid to my campaign. I understand that usage of any SACA social media platform will incur a fee. If I choose not to make use of SACA social media platform(s) I do so of my own free will and I cannot hold SACA liable for any perceived advantage of my opponent(s).

Print Name: _____ Signature: _____