

Form H: Governor-nominee Data Form

nominating committee.	and sign this form, have your club secretary sign	it, and submit it to the district
Governor year District	Zone	
Title (e.g., Mr/Ms/Mrs/Dr/Rev)	Suffix (e.g., Jr/Sr/III)	
Family name	First name	Middle initial
Call name as it should appear on your badge		
☐ Male ☐ Female	☐ Single ☐ Married ☐ Widowe	d Divorced
City, country, and year of birth		
Member, Rotary Club of		
(official name of clu	b, including country)	
RI membership ID number	Year you first joined Ro	tary
Current (or former, if retired) classification		
Current (or former, if retired) firm and position _	If retired, year o	of retirement
Per RI Bylaws 15.070.3, a qualified Rotarian	-	ent, or as charter president from
the date of charter to 30 June (six-month min	nimum), at the time of nomination.	
Rotary club(s)	Length of membership Rotary ye	ar served as president
	Years	_ -
	Years	<u> </u>
Phone (include country/city or area codes)	Fax (include country/city or	area codes)
Residence	Residence	area codes)
	Residence	area codes)
	Residence	area codes)
Residence Business Mobile	Residence Business	
Residence Business Mobile	Residence Business	
Residence Business Mobile E-mail address (for RI correspondence and pub	Residence Business Clication in Official Directory and International A	
Residence Business Mobile E-mail address (for RI correspondence and pub Preferred mailing address* *If this address is a post office box, please provi	Residence Business Clication in Official Directory and International A	
Residence Business Mobile E-mail address (for RI correspondence and pub Preferred mailing address* *If this address is a post office box, please provi	Residence Business dication in Official Directory and International Andrews de an alternate address for courier delivery.	
Residence Business Mobile E-mail address (for RI correspondence and pub Preferred mailing address* *If this address is a post office box, please provi Line 1 Line 2	Residence Business dication in Official Directory and International 2 de an alternate address for courier delivery.	

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Country	



-	Form H					
Alternate mail	ing address					
Line 1						
Line 2						
Line 3						
Line 4						
Country						
Language P	references but wish to use for com	municating with	RI (listed in orde	er of fluency):		
		S			_	
·	following, please choo	ose <i>one:</i>			-	
International English	Assembly sessions	Japanese	☐ Korean	Portuguese	☐ Spanish	
Rotary public English	cations produced in 6 I	anguages ☐ Japanese	☐ Korean	☐ Portuguese	☐ Spanish	
Rotary public English	cations produced in 9 I	anguages German	☐ Italian	Japanese	☐ Korean	
Portugu	iese 🗌 Spanish	Swedish				
Rotary public Chinese	&	languages Finnish Spanish	☐ French	☐ German	☐ Italian	☐ Japanese
Personal His	story (please do not	use abbreviations	s)			
Business and F	Professional Organiza	ations (listed in	order of importan	nce; use an addition	al sheet of pape	r, if necessary):
Org	ganization	0	ffice	Dates Office	Held	Dates of Membership
1.						
2.						
Social and Civ	ic Organizations (list	ed in order of in	nportance; use an	additional sheet of	paper, if necess	eary):
Org	ganization	0	ffice	Dates Office	Held	Dates of Membership
1.		_				
2.						

Business/Professional Career (please provide a brief outline, including each firm and dates):



Form H

☐ Hard-copy photos attached (**do not staple** photo to this form)

Spouse Info	ormation (if app	plicable)			
☐ Male	Female				
Title (e.g., Mr.	/Ms/Mrs/Dr/Rev)				Suffix (e.g., Jr/Sr/III)
Family name		First na	ne		Middle initial
Name as it sho	ould appear on your	badge			
Phone	none E-mail			Fax	
Language flue Chinese Japanese	ncy for Internationa English Korean	al Assembly discuss French Portuguese	sions (choose one) German Spanish	: ☐ Hindi ☐ Swedish	☐ Italian
☐ English	French	ngs (choose one): ☐ Japanese	☐ Korean	☐ Portuguese	☐ Spanish
For Rotarian	•				
Spouse ID number Member, Rotary Club of (official name of club, including country)			Highest	office held	
	(official)	name of club, includ	ling country)		
Photos					
a couple) for the	ne <i>International Ass</i> ong with your full i	sembly Participants	book. Digital ph	otos in high-reso	You and of your spouse (individually, not as lution .jpg format are preferred . E-mail u will serve, to dgn.photo@rotary.org .
If you choose to submit a hard-copy photograph, it must measure at least 4 x 5 in./10 x 12.5 cm. The photo with your full name, district number, and the Rotary year in which you will serve clearly printed on the back must be submitted with this form.					
Please indicate	e how your photos a	are being submitted	:		
☐ Digital pho	otos e-mailed to dgr	n.photo@rotary.org			



Form H

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

	CANDIDATE'S STATEM	MENT
RI Bylaws and that I am fully qualificand responsibilities of that office and of ethics, as detailed in the Rotary Coelect training seminar in my zone and	ed for said office and willing and able, pl to perform them faithfully. Further, I handed of Policies. I understand that if select	politic of the office of district governor as set forth in the hysically and otherwise, to assume and fulfill the duties we read and agreed to abide by the district governor code ed, I must attend, for their full duration, the governorshe Rotary year before taking office. I have read this form and correct.
Date	Signature	
Date	Signature	
CLU	JB'S STATEMENT OF CANDIDATE	'S QUALIFICATIONS
this member has been duly suggested	member in good standing of the Rotary C I for the office of district governor under ws 15.070 and that the club membership	
Date	Club Secretary's Name	Club Secretary's Signature
CE	RTIFICATE OF DISTRICT NOMINA	ATING COMMITTEE
this form, to the best of the committee	trict Nominating Committee hee's knowledge, has not violated any of the committee has more than five mem	hereby certify that the candidate whose name appears on he rules on campaigning, electioneering, or canvassing libers, please attach a separate list.)
Names		Signatures
	CERTIFICATE OF NOMI	NATION
The Rotarian named on this form is a in accordance with the provisions of		club listed and was duly nominated for district governor
Date	District Governor's Name	District Governor's Signature

Page 5 of 5 **District governor:** Please mail, fax, or e-mail *all* pages of this form, including any additional sheets or photos, to your CDS representative by 30 June.