



Presidential Candidate Nomination Form

Nominee Information:

Name: _____

Current Position: _____

Email Address: _____

Phone Number: _____

Mailing Address: _____

City, State, Zip: _____

Your Information:

Name: _____

Current Position: _____

Email Address: _____

Phone Number: _____

Mailing Address: _____

City, State, Zip: _____

Reasons for nominating this person:

By submitting this form, you acknowledge that the information you have provided is accurate and based on your belief in the nominee's abilities.

Submit completed form to: board@okstate.edu