## **Election of the Alumni Manager for the**

## **Incorporated Management Committee of St. Mary's Canossian College (2021/22-2022/23)**

## **Nomination Form**

(Please fill in the form in BLOCK LETTERS)

Full Name (Eng):		
Year of Admission to SMCC:		(Form)
HK I.D Card No:	Date of Birth: dd	mmyyyy
Contact Phone No:	E-mail:	
Declaration (Please tick "✓" as appropr	riate):	
☐ I hereby declare that my candidacy Education Ordinance.	is in compliance with the requir	ements set out in Section 30 o
☐ I hereby authorise St. Mary's Past S whenever required.	Students' Association to verify an	y of the information given her
Signature of Candidate:	_	Date:
<u>Proposer</u>		
Full Name (Eng):	(Chi):	
Year of Admission to SMCC:		(Form)
HK I.D Card No:	Date of Birth: dd	yyyy
Contact Phone No:	E-mail:	
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Alumni Manager of St. Mary's Canossian College and for any other legitimate purposes as requested by government bodies.