



**Election of the Committee Member for the
Raimondi Alumni Association Limited (2018-2020)**

Nomination Form

(Please fill in the form in BLOCK LETTERS)

Candidate

Full Name (Eng): _____ (Chi): _____

Year of Graduation from Raimondi College: _____ (Primary/Form/Secondary: _____)

Contact Phone No: _____ E-mail: _____

Biographical details (Optional):

*If there is not enough space left, a separate sheet of paper may be used and enclosed with the nomination form.

Declaration (Please tick "✓" as appropriate):

- I hereby declare that my candidacy is in compliance with the requirements set out in section 16A of the Articles of Association of RAA
- I hereby authorize the Secretary of Raimondi Alumni Association to verify any of the information given herein whenever required.

Signature of Candidate: _____ Date: _____

Proposer

Full Name (Eng): _____ (Chi): _____

Year of Graduation from Raimondi College: _____ (Primary/Form/Secondary: _____)

Contact Phone No: _____ E-mail: _____

Declaration (Please tick "✓" as appropriate):

- I hereby declare that I am the Director/Committee Member of Raimondi Alumni Association Limited in 2016-18
- I hereby authorize the Secretary of Raimondi Alumni Association to verify any of the information given herein whenever required.

Signature of Proposer: _____ Date: _____

Seconder

Full Name (Eng): _____ (Chi): _____

Year of Graduation from Raimondi College: _____ (Primary/Form/Secondary: _____)

Contact Phone No: _____ E-mail: _____

Declaration (Please tick "✓" as appropriate):

- I hereby declare that I am the Director/Committee Member of Raimondi Alumni Association Limited in 2016-18
- I hereby authorize the Secretary of Raimondi Alumni Association to verify any of the information given herein whenever required.

Signature of Seconder: _____ Date: _____