

VICE GOVERNOR CANDIDATE

INFORMATION

Name:	Nickname (if any):		
Address:			
City/State/Zip:			
Office: ()			
Mobile: ()	E-Mail:		
Kiwanis Club of:			
Yrs in Club: Yrs in Kiwanis:	Region:	Division:	
Lt. Governor Term(s):			
Current Position in Kiwanis:			
Club Offices Held:	esident	□ Treasurer	
District Position(s):			
Division Position(s):			
International Position(s):			
Kiwanis Awards Received:			
Community Affiliations:			
Community Awards or Recognitions:			
Unique Skill(s) you possess to be a Governor-Elect:			
Why you want to be a Governor-Elect (100 words or les	ss):		
Signature of Candidate:	Date:		



VICE GOVERNOR NOMINATION FORM

(must be postmarked by <u>JUNE 15, 2025</u> to be eligible)

Law				
Candidate's Name:				
Candidate's Home Club:				
Candidate's Region & Division:	Region:	Division:		
Candidate's Mailing Address:				
Candidate's Preferred Telephone No.:				
Candidate's E-Mail Address:				
CANDIDAT	E'S KIWANIS	EXPERIENCE		
Lieutenant Governor:	Division:	Year(s):		
Trustee:	Division:	Year(s):		
I agree to fulfill all of the duties and resp period of my term.	onsibilities of the Off	ce of District Governor-Elect	during the	
Candidate's Signature:				
НОМЕ	CLUB ENDOR	RSEMENT		
The above candidate has been endorsed to membership of his/her home club taken or			vote of the	
Print/Type Home Club President's Name:				
Home Club President's Signature:				
Print/Type Home Club Secretary's Name:				
Home Club Secretary's Signature:				
FOR DISTRICT OFFICE USE				

Date Received by District Office: