**2024-2026**

**Steward Self -Nomination Form**

***Candidates standing for Area Steward Positions will be assigned to their Faculty/Service unit if vacant or appointed to another area where there is a vacancy.***

|  |  |
| --- | --- |
| **I,** | Name |
| **submit my name for the position of UWOSA Steward** | |
| **X signature** | |

Nominee’s Faculty or Service Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Because** (print or type a short paragraph why you want to be a Steward and what skills, education, and knowledge of this Area you will bring to your position as a Steward)

Please submit completed form to [info@uwosa.ca](mailto:info@uwosa.ca)

**Thank you for your interest in becoming a Steward!**