

# Student Representative Co-option Application Form



I,			
Deakin email:		Student Number:	
Phone Number:			

Nominate for co-option to the position of Student Representative at:  
 Vacant Positions are noted at <https://dusa.org.au/contact-us/>  
 (place X next to the role/s you wish to apply for)

Cloud	Burwood	Geelong (Waurm Ponds/Waterfront)	Warrnambool
Campus Co-Ordinator	Campus Co-Ordinator	Campus Co-Ordinator	Campus Co-Ordinator
Student Engagement Representative	Women's Representative	Women's Representative	Student Engagement Representative
Accessibility & Services Representative	Queer Representative	Queer Representative	Accessibility & Services Representative
Diversity & Belonging Representative	Postgraduate Representative	Postgraduate Representative	Diversity & Belonging Representative
Equity Representative	International Representative	International Representative	Equity Representative
	Events & Activities Representative	Events & Activities Representative	
	Clubs & Societies Representative	Clubs & Societies Representative	
	Diversity & Belonging Representative	Diversity & Belonging Representative	
	Accessibility & Services Representative	Accessibility & Services Representative	

for the Deakin University Student Association Inc. (DUSA) and hereby declare that:

I am a current student at Deakin University and hold a current DUSA membership;

I shall always work for the best interests of DUSA, fulfil the aspirations of the members of DUSA, and shall uphold the purpose of DUSA;

I have read the conditions of nomination and solemnly swear that any statements contained within my nomination form are, to the best of my knowledge, true and accurate; and if elected to a position undertake to carry out my duties herein;

I have read the DUSA Constitution and Regulations and agree to comply at all times;

I am officially enrolled at the Campus for which I am applying.

If applying for the Queer, Women's, Postgraduate, International or Equity role, you are required to be a member of this community. By signing below, I acknowledge this requirement. (See DUSA Election Regulations for more information).

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Why have you applied for this position?

What do you hope to achieve in the role/s you have applied for?

Where did you find out about this role?

.....  
**Declaration:**

As affirmed by my signature below, I agree to the above conditions and accept any repercussions of my non-compliance including the possibility of forfeiting my position.

Signature		Date	
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*(You may sign this document electronically by typing your name in this section)*

**Please return to:  
General Secretary  
DUSA  
Email: [dusa-gensec@deakin.edu.au](mailto:dusa-gensec@deakin.edu.au)**

CONFIDENTIAL: The personal contact information contained in this application will be treated as confidential, used to verify the identity and eligibility of applicants, and to directly contact applicants with regards to their application. Application statements will be held in confidence by the relevant DUSA committee and its members.