



NOTRE DAME  
OF MARYLAND  
UNIVERSITY

RENAISSANCE INSTITUTE

## NOMINATION FORM 2024

I nominate \_\_\_\_\_ for the position of  
Council Member

The nominee's qualifications are:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

NOTE: IF YOU ARE NOMINATING SOMEONE OTHER THAN YOURSELF, PLEASE GET  
THEIR PERMISSION

RETURN COMPLETED FORM TO THE RENAISSANCE OFFICE