



2020 Graduating Class Valedictorian Nomination Form  
Fall Convocation – November 2020

The completed form must be received by September 25, 2020. This form may be sent via email to [cathy.lantos@msvu.ca](mailto:cathy.lantos@msvu.ca). Please read the Valedictorian Nominations Criteria located on the Convocation website and ensure the nominee is aware the Valedictorian will be asked to give an address to the graduating class during the graduation ceremony.

**Nominee  
Information**

\_\_\_\_\_

Name

  

\_\_\_\_\_

Apartment/Street

\_\_\_\_\_

Town/City

  

\_\_\_\_\_

Province

\_\_\_\_\_

Postal Code

\_\_\_\_\_

( )

\_\_\_\_\_

Phone Number

  

\_\_\_\_\_

Mount e-mail

\_\_\_\_\_

Alternate e-mail

**Nominee's  
Degree**

\_\_\_\_\_

Degree to be received

**Reason for  
Nomination**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Nominee's  
Extracurricular  
Activities**

*(within the  
University  
and their  
community)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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Nominee  
Information

Name \_\_\_\_\_

Nominee's  
Previous Speaking  
Experience

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Nominator(s) \_\_\_\_\_

Signature of Nominator(s) \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address(s) \_\_\_\_\_

*Nominee's signature is required*

Please ask the nominee to sign below indicating her/his willingness to serve as Class Valedictorian (if selected). Only forms that include the nominee's signature will be considered.

\_\_\_\_\_  
Nominee's Signature (REQUIRED)

\_\_\_\_\_  
Date

By signing this nomination form I attest that my application is free of any misrepresentations, falsifications, or omissions that could adversely reflect on the university's reputation.