PLEASE NOTE THAT THIS IS A MODEL EXAMPLE OF THE STATUTORY DECLARATION TO ASSIST YOU WITH CORRECTLY COMPLETING THE DOCUMENT

Instructions for lodging the statutory declaration to nominate for the Board of Directors

Before the close of nominations, you must:

1. Read this statutory declaration carefully and sign it in the presence of an authorised person
2. Return the statutory declaration to the Returning Officer alongside your nomination form

Statutory Declaration

Insert the name, address and occupation (or alternatively, unemployed *or* retired *or* child*) of person making the statutory declaration.*

I, YOUR FULL LEGAL NAME
YOUR ADDRESS LINE 1
YOUR ADDRESS LINE 2
YOUR OCCUPATION

make the following statutory declaration under the **Oaths and Affirmations Act 2018:**

Set out matter declared to in numbered paragraphs. Add numbers as necessary.

1. *The information completed on my Board of Directors nomination form is true and correct to the best of my knowledge.*
2. *I have read the SSA Constitution, Regulations and Candidate Handbook and agree to comply with my obligations from the day I am elected as a Board Director (or President or Vice President) until such time as I cease to be an elected Director (or President or Vice President).*
3. *I acknowledge and understand that attendance at the Annual General Meeting and Board Director training is compulsory and I attest I will attend save for the event of extreme illness or extenuating circumstances outside of my control (which does not include overseas travel, holidays, work commitments or matters that are of a similar nature).*
4. *I will attend the compulsory candidate briefing session as prescribed by the Company Secretary (or CEO) or Board, as outlined in the Notice of Election, unless I have been granted an exemption by the Returning Officer; and I will not engage in phone banking (the coordinated or systematic calling of students from a Swinburne-originating contact list for an election-related purpose), which is prohibited under the Election Regulations.*
5. *I understand that failure to attend the events in this document may render me ineligible to hold office on the Board. If there are extenuating circumstances, I will contact the Company Secretary (or CEO in their absence) to discuss my inability to attend. The Company Secretary (or CEO in their absence) will then make a recommendation to the Returning Officer and, if necessary, the Electoral Tribunal regarding my eligibility to hold office.*

I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.

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Signature of person making the declaration

.....YOUR SIGNATURE HERE.....

Place (City, town or suburb)

Date

Declared at	...STATE THE PHYSICAL LOCATION WHERE THE DECLARATION IS BENG SIGNED HERE.....	***in the state of Victoria**

on STATE THE DATE HERE...e.g. the 14th August 2026.....

Signature of authorised statutory declaration witness

I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration:
.....AUTHORISED WITNESS SIGNATURE HERE.....

Date

on STATE THE DATE HERE...e.g. the 14th August 2026.....

Name, capacity in which authorised person has authority to witness statutory declaration, and address (writing, typing or stamp)

.....STATE AUTHORISED WITNESS CAPACITY HERE.....

A person authorised under section 30(2) of the **Oaths and Affirmations Act 2018** to witness the signing of a statutory declaration.