

# WCAA Proxy Form

I, the undersigned Member of the Woodsworth College Alumni Association (WCAA), hereby appoint:

check **ONE** box only

☐ President, WCAA (or designate)

**-OR-**

☐ \_\_\_\_\_  
(full name of Proxy)

as my Proxy to attend and vote on my behalf at the Annual General Meeting of members of the WCAA, to be held on Wednesday, May 28, 2025 at 6:00 pm, or at any adjournment thereof.

**Signed:** \_\_\_\_\_ **Dated: (MM/DD/YYYY)** \_\_\_\_\_

In order to be validated, the proxy form must be completed including all mandatory fields in the section below, as indicated by the \* asterisk. Incomplete proxies will not be considered.

Your First Name\* \_\_\_\_\_

Your Last Name\* \_\_\_\_\_

Your Full Name at Graduation (if different from above) \_\_\_\_\_

Your Address\* \_\_\_\_\_

Street Number and Name \_\_\_\_\_

Apt/Suite Number (if applicable) \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Country \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_

Your Phone Number\* \_\_\_\_\_

Your Email Address\* \_\_\_\_\_

If you are appointing someone other than the WCAA President/Designate as your proxy, you must complete the section below as indicated by the \* asterisk for your proxy to be considered valid.

Full Name of Proxy Holder\* First: \_\_\_\_\_ Last: \_\_\_\_\_

Proxy Holder's Email Address\* \_\_\_\_\_

Is the Proxy Holder a Woodsworth College Alum? \* Yes ☐ No ☐

(check only **ONE** box)

Woodsworth College Alumni Relations will determine the validity of the proxy based on the verification of the proxy grantor's alumni status. The person appointed as your proxy holder need not be a member of the WCAA. The executed proxy must be received by the WCAA Secretary by **Monday, May 26, 2025 at 6:00 p.m. EDT** (at least 48 hours preceding the meeting or any adjournment thereof, excluding Saturdays, Sundays and legal holidays).

For information or assistance, contact [alumni.woodsworth@utoronto.ca](mailto:alumni.woodsworth@utoronto.ca).

**SUBMIT FORM**