



UNIVERSITY OF THE PUNJAB  
NOMINATION FORM

FOR THE ELECTION OF MEMBERS OF SENATE AMONGST FACULTY MEMBERS OF AFFILIATED COLLEGES

Particulars of Nominee	Particulars of Proposer	Particulars of Seconder
Name: _____	Name: _____	Name: _____
CNIC: _____	CNIC: _____	CNIC: _____
Designation: _____	Designation: _____	Designation: _____
College Name: _____	College Name: _____	College Name: _____
Qualification: _____	Qualification: _____	Qualification: _____
Titles, if any: _____	Titles, if any: _____	Titles, if any: _____
Phone No. _____	Phone No. _____	Phone No. _____
Email: _____	Email: _____	Email: _____
Candidate's Signature: _____	Proposer's Signature: _____	Seconder's Signature: _____
Sr. No. in the Electoral Roll: _____	Sr. No. in the Electoral Roll: _____	Sr. No. in the Electoral Roll: _____

Dated: \_\_\_\_\_ / 2020

Remarks of the Returning Officer

**Note:**

- 1. A separate form should be used for each candidate proposed for nomination.*
- 2. Nomination form should be received in the office of Returning officer till 23.10.2020 by post under registered cover.*
- 3. By hand submission of form will not be accepted.*