



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. of College in the Electoral Roll: _____	Sr. No. of College in the Electoral Roll: _____	Sr. No. of College in the Electoral Roll: _____

Dated: _____/2016

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 24-03-2016 up to 4.00 pm.