

# GUJARAT UNIVERSITY

**Nomination form for the election of Students' representative on the  
Board for Student Welfare, under Statute 6(XII) of Schedule II of the  
Gujarat University (Amendment) Act, 1972  
(Gujarat Act No. 6 of 1973)**

Please affix pass-  
port-size photograph  
duly signed by Princi-  
pal of the college or  
Director of Uni. School  
or head or recognised  
Institution.

- ( 1 ) 1. ( a ) Name (in full) of the Candidate .....  
beginning with Surname (in .....  
block letters) and serial no. in .....  
electoral list.
- ( b ) Permanent Home address and .....  
Telephone number .....
- ( c ) Candidate's sex .....
- ( d ) Age and birth date of the candi- ..... *Age (in Years)* ..... *Birth Date*  
date ( in figures and words ) In figures :  
Enclose copy of School leaving In words :  
certificate/Transfer Certificate  
(To be verified by the Principal  
with original)
2. Name of College/Institution/University .....  
Department of the candidate .....
3. Date and year of passing the S.S.C. ....  
or its equivalent examination passed by .....  
the candidate .....
- ( 2 ) 1. Name ( in full ) of the Proposer of the .....  
candidate beginning with Surname (**in** .....  
**block letters**) and serial no. in elect- .....  
oral list.
2. Name of the College / Institution / .....  
University Department in which the .....  
**Proposer** is enrolled during the current .....  
academic year.
3. Signature of the **Proposer** .....
- ( 3 ) 1. Name (in full) of the Secunder of the .....  
candidate beginning with Surname .....  
( **in block letters** ) and serial no. in .....  
electoral list.
2. Name of the College/Institution/Uni- .....  
versity Department in which the .....  
secunder is enrolled during the current .....  
academic year.
3. Signature of the **Secunder** .....

**N.B.-( 1 )** Both the **Proposer** and **Secunder** of the candidate should have been enrolled as voters in the Electoral Roll concerned.

( 2 ) The age of the candidate must be below 25 years for under graduates and 28 years for Post-Graduate

[P.T.O.]

**Declaration by the Candidate**

1. I have read O. 51-A framed by the University. I have passed my H.S.C. or its equivalent examination in the ..... (month) of 20 (year) and I have joined the above College/ University department/Institution and I am studying in ..... class.
2. I am a member of the Students Union of my College / Institution and have been enrolled as voter in the electoral roll concerned. My age is within the prescribed limit as stated in circular No..... Dated ..... by the University. I also agree that violation of this limit shall automatically cancelled my nomination and election.
3. I consent to my nomination.

Place :

.....

*Signature of the Candidate*

Date : - -20 .

**Certificate from the Principal / Head of the Institution / Director of the  
University Department**

I, hereby, certify that the above named candidate has joined my College / Institution / University Department on or before.....and that the candidate has passed the examination as mentioned in this nomination form.

I have personally verified the information mentioned in the nomination form and other details and they are correct.

Date : - 20 .

.....  
*Seal of the College / Institution /  
University Department*

.....  
*Signature of the Principal /  
Head of the Institution /  
Director of University Department*