



UNIVERSITY of GUYANA
Turkeyen Campus

Office of the Registrar

Students' Welfare Division

P.O. Box 10-1110 Georgetown, Guyana, South America

Tel: 222-3595/2225423 ext. 2235/36 Email: studentswelfare@uog.edu.gy Web: www.uog.edu.gy

UNIVERSITY of GUYANA STUDENTS' SOCIETY ELECTION, 2018/2019
NOMINATION FOR FACULTY/SCHOOL REPRESENTATIVE

<u>CANDIDATE</u>	<i>(Please write full name in BLOCK letters in this space)</i>				
	Registration No.	USI	Faculty/School	Signature	Date
<u>PROPOSER*</u>	<i>(Please write full name in BLOCK letters in this space)</i>				
	Registration No.	USI	Faculty/School	Signature	Date
<u>SECONDER*</u>	<i>(Please write full name in BLOCK letters in this space)</i>				
	Registration No.	USI	Faculty/School	Signature	Date
<u>SUPPORTERS*</u>					
<u>Name in Full</u>	Registration No.	USI	Faculty/School	Signature	Date
1.					
2.					
3.					

*These students must be from the same Faculty/School as the CANDIDATE.

DECLARATION OF ACCEPTANCE

I hereby accept nomination for office as stated hereon:

Signature

Date

USI

Registration No.