



UNIVERSITY of GUYANA
Turkeyen Campus

Office of the Registrar

Students' Welfare Division

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

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UNIVERSITY of GUYANA STUDENTS' SOCIETY ELECTION, 2017/2018
NOMINATION FOR FACULTY/SCHOOL REPRESENTATIVE

<u>CANDIDATE</u>	<i>Please write name in full</i>				
	Registration No.	USI	Faculty/School	Signature	Date
<u>PROPOSER</u>	<i>Please write name in full</i>				
	Registration No.	USI	Faculty/School	Signature	Date
<u>SECONDER</u>	<i>Please write name in full</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.					

DECLARATION OF ACCEPTANCE

I hereby accept nomination for office as stated hereon:

Signature

Date

USI

Registration No.