

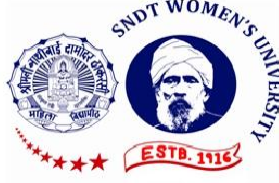
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श्रीमती ना. दा. ठाकरसी महिला विद्यापीठ

१, नाथीबाई ठाकरसी मार्ग

मुंबई ४०० ०२०

Telegram: UNIWOMEN

Website: sndt.ac.in

**NOMINATION FORM FOR ELECTION OF TWO REPRESENTATIVES OF
MANAGEMENT TO BE ELECTED BY THE SENATE TO THE
MANAGEMENT COUNCIL
(U/S 30(4)(h) OF M.P.U. Act, 2016)**

To,
The Registrar,
S.N.D.T. Women's University,
Mumbai - 400 020

Sir,

**Paste
Recent
Photo
& sign
across**

I hereby submit my Nomination Form for the above mentioned election, my details are as below:

1. Category under which the candidate contested the election to the Senate : _____
2. Category under which the candidate contesting the election to the Management Council (Put ✓ mark in the box)
 - 1) Open
 - 2) Other Backward Classes (OBC)
3. Name of the Candidate (in full) : _____
(Surname) (First Name) (Middle Name)
4. Date of Birth : _____
5. Candidate's Designation : _____
6. Name of the Management of affiliated college and address : _____

7. Candidate's Residential Address : _____

8. Name of the affiliated college or institution and address : _____

9. Phone No. : Res.: _____ Offi .: _____
 Mob.: _____
 E mail.: _____
10. Candidate's Qualifications : _____

11. Degrees with the names of Universities : _____

12. Certificate of Accreditation of College issued by NAAC / NBA and its number and period of validity : _____

Consent and declaration of the Candidate

I hereby consent to my nomination as proposed and seconded by the proposer and the seconder. I further state that, the information furnished by me as above is true and correct to the best of my knowledge and belief.

Place: _____
 Date: _____ Name and signature of the candidate

Declaration by the Proposer

- Name of the Proposer (in full) (Proposer should be an elector) : _____
- Proposer's designation : _____

- Proposer's residential address : _____

- Proposer's Voter Number as per Final Electoral Roll : _____
- Phone No. : Res.: _____ Off .: _____
 Mob.: _____
 E mail.: _____

I hereby propose the nomination of the above candidate.

Place: _____
 Date: _____ Proposer's Signature

Declaration by the Seconder

Name of the Seconder (in full)
(Seconder should be an elector) : _____

Seconder's designation : _____

Seconder's residential address : _____

Seconder's voter number as per
Final Electoral Roll : _____

Phone No. : Res.: _____ Off .: _____
Mob.: _____
E mail.: _____

I hereby second the nomination of the above candidate.

Place: _____
Date: _____ Seconder's Signature

NOTE:-

- **Photo copies of the relevant documents should be attached with the forms.**
- Office Remarks:**
N.B. : INCOMPLETE FORM WILL BE REJECTED
-

Receipt for Nomination Form and Notice of Scrutiny

(To be handed over to the person presenting the Nomination Form)

Serial No. of Nomination Form

The Nomination form of to be elected by the Senate to the Management Council was delivered to me at my office at (hour) on (Date) by the *candidate in person / through Mr. / Mrs. _____ as authorized by him.

The following documents were received along with the nomination form.

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____

Place:
Date:

Name & Signature of the
Person Receiving the Form

*Score out the words not applicable.