

SNDT Women's University

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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 THREE UNIVERSITY TEACHERS TO THE SENATE (U/S 28(2)(s) OF M.P.U. Act, 2016)

Election of **Three Teachers**, to the Senate by the collegium of University teachers from amongst themselves, of whom one shall be a person belonging to the Scheduled Castes or Scheduled Tribes or De-notified Tribes (Vimukta Jatis) or Nomadic Tribes or Other Backward Classes, by rotation, and one shall be a woman, under Section 28(2)(s) of the Maharashtra Public Universities Act, 2016.

1. Authority or office for which the : **SENATE**
candidate is nominated
2. Electoral body to represent for which : **Collegium of University Teachers (as
the candidate is nominated. defined under Section 2(19) of the
Act.)**

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 (please specify the : 1) Open
category under which the : 2) Other Backward Classes (OBC)
candidate desires to contest) : 3) Women
2. Name of the Candidate (in : _____
full) : (Surname) (First Name) (Middle Name)
3. Date of Birth : _____
4. Candidate's Designation : _____
5. Candidate's Residential : _____
Address : _____
: _____
6. Name of the Conducted : _____
College / University : _____
Department / University : _____
Institution and address : _____

7. Phone No. : Res.: _____ Offi .: _____
 Mob.: _____
 E mail.: _____
8. Candidate's Qualifications : _____

9. Degrees with the names of Universities : _____

10. Year and date of obtaining Ph.D. Degree : _____
11. Nature of appointment as teacher (e.g. permanent, temporary, adhoc) : _____
12. Date of appointment as University teacher : _____
13. Date of superannuation : _____
14. Total teaching experience : _____

16. University Examination related work experience

Sr. No.	Capacity	Examination	Date and month of the examination	Number of days examination work carried out	Certificate issued by
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

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 acknowledge and belief.

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

Declaration of 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 of 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 a candidate for election from the Three University Teachers constituency 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 alongwith 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.