

**ELECTION OF ONE STUDENT REPRESENTATIVE
ON THE BOARD OF THE FACULTY OF DENTAL SURGERY
NOMINATION FORM**

In terms of Article 80(e) of Education Act, **three members on each Faculty Board are elected by and from among the students of the Faculty concerned, at least one of whom shall be a postgraduate student.** In accordance with Article 83(1) the term of office is of two years.

There is **one** vacancy on the Board of the Faculty of Dental Surgery and the term of office shall extend from 11 November 2016 till 10 November 2018.

NAME OF NOMINATED STUDENT: _____

NAME OF PROPOSER: _____

COURSE:_____ YEAR: _____ ID No:_____

SIGNATURE: _____

NAME OF SECONDER: _____

COURSE:_____ YEAR: _____ ID No:_____

SIGNATURE: _____

DECLARATION BY NOMINATED STUDENT

I, _____, ID No _____ a
student in the Faculty of Dental Surgery, (Course:_____

Year:_____) accept the nomination for election as a student representative on the Board of
the Faculty of Dental Surgery.

Signature

Date