

**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