



NOMINATION FORM

PART-I

1. Name of the Post Contesting : _____
2. Full Name of the Contestant:
- (a) ID No. Department :
- (b) Age with Date of Birth :
- (c) Particulars of Fees paid :(Enclose No Due Certificate from Treasurer MANUUTA)
- (d) Address with Cell No.
3. Proposed By: Department :
- (a) ID No. : Signature:
- (b) Particulars of Fee paid: (Enclose No Due Certificate from Treasurer, MANUUTA)
4. Seconded By: Department :
- (a) ID No. : Signature:
- (b) Particulars of Fee paid: (Enclose No Due Certificate from Treasurer, MANUUTA)

PART-II

- I, agree to my nomination to contest for the post of _____ and hereby declare.
- a) That I am an employee of MANUU and member of MANUUTA.
 - b) That the code of conduct prescribed by the Election Committee has been read by me/read over to me and I will abide by it.
 - c) That I have no fees due to MANUUTA.
 - d) That to the best of my knowledge and belief, I am qualified to fill the position.

(.....)
Signature of the Candidate

- Please enclose the vision and manifesto along with the nomination paper.