

**NOMINATION FORM FOR STUDENT MEMBERS**

**DEPARTMENTAL OR SCHOOL ASSEMBLY  
Faculty of Social Sciences**

**Academic Unit**

We, the undersigned, nominate:

for the position of student member

at the undergraduate level

at the graduate level

to the Departmental or School Assembly.

1. Name and signature  Student #

2. Name and signature  Student #

3. Name and signature  Student #

4. Name and signature  Student #

5. Name and signature  Student #

I accept this nomination and, if elected, will serve in this position.

\_\_\_\_\_ Student #  Date   
Candidate's signature

Mailing Address

Telephone

E-mail

**Please return the form to your Academic Unit.**