



NOMINATION OF POLING AGENT
Elections for faculty Representation in
Syndicate,
Jinnah Sindh Medical University

Form No. _____

I Dr. _____

S/D/W/O _____

Working as _____
 (Professor / Associate Professor / Assistant Professor / Lecturer)

Contesting as Candidate against the seat of _____
 (Professor / Associate Professor / Assistant Professor / Lecturer)

Hereby nominates Dr. _____

CNIC No. _____ as my poling agent for faculty election to
 be held on 13th July 2017. He/She is fully authorized to sign on my behalf in election
 process.

His/her signature are as under and done in my presence.

Poling agent Signature _____

Poling agent Signature _____

Poling agent Signature _____

I hereby attest his signature.

Date _____ Signature of Candidate: _____

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Space for Election Commission: _____

Receiving Officer Signature

Name of Officer

Date: _____

Time: _____