EASTERN UNIVERSITY, SRI LANKA ELECTION TO STUDENTS' UNION NOMINATION FORM

| We |
|------------------------------------------------------------------------------------------------|
| (Full Name, Registration Number and Contact Number of Proposer) |
| |
| (Full Name, Registration Number and Contact Number of Seconder) Wish to nominate |
| |
| (Full Name, Registration Number and Contact Number of Candidate) For election to the office of |
| in the Students' Union of Eastern University, Sri Lanka. |
| Signature of Proposer |
| Signature of Seconder |
| I hereby consent to stand for election to the office of |
| Signature of Candidate |
| Dote |