	Nomination Form for SPA	AV Students Council Elections 2	<u>025</u>
1.	Name of the Position for which Nomination is being file	ed :	
2.	Name of the Student	:	
3.	Registration No.	:	
4.	Department	: Planning / Architectu	re (<i>Tick</i> the relevant one)_
5.	UG / PG & Course Name and Sem.	:	
6.	Contact Number & E-Mail id	:	
by me a of Elect taken by Propos Signat Propos Name Depar UG / F	o certify that I am interested to contest for the above more true to the best of my knowledge. I hereby undertake ions. Further, I hereby declare that I shall abide by ally the Director on any matter pertaining to Elections shall seed by (Name) :	e to ensure that peace and harmony is I rules and regulations designed or a all be final and binding on me. NO DU Seconded by (Name)	maintained during the entire process re operational and that all decisions
Date:		,	Signature of the Contestant)
S.No.		ES CERTIFICATE Name of the Incharge / concern	Signature of the Incharge
1.	Department (Planning/Architecture) (<i>Tick the relevant one</i>) – for ineligible to appear for the regular exams in any subject/s due to shortage of attendance and/or shortage of Internal Marks in the preceding two semesters at the time of nomination for Student Council Elections	Name of the incharge / concern	/ concerned
2.	Accounts & Budget section (all Fees)		
3.	Examination section (backlogs, Unfair means, etc.)		
4.	Library		
5.	Hostel & Mess a. Amounts due wrt Hostel Rules' violation) b. Disciplinary action wrt Hostel Rules' violation	a. b.	a. b.
6.	Disciplinary Committee / concerned		
(For Office Use only) Submitted to: Received on at			

The Returning Officer, SPAV Students Council Elections 2025

A.R.O s & R.O