



MANIPAL UNIVERSITY JAIPUR

DIRECTORATE OF STUDENTS' WELFARE

NOMINATION FORM (Student Council Election-2023-24) Class Representative (CR)

1. Name of the Student :
 2. Gender : Male/ Female
 3. Registration No. :
 4. Academic Program :
 5. Semester :
 6. Branch : Section :
 7. CGPA(till last passing exam) :
 8. Hostel Block No. : Room No. :
(Specify the local address if not staying in the hostel)
- Address:

Passport size Photo

9. E-mail ID :
10. Mobile No. :

Declaration

I hereby state that the information furnished above is true to the best of my knowledge. Further I declare that I will conduct myself to best of my ability to uphold the dignity of the post and the University.

Signature of the Candidate

After the submission of the form, for office use only—

Signature of the Class Coordinator with date and time

(after scrutinizing the eligibility of the candidature)

Signature of the Election Coordinator of School

(after the verification from Class Coordinator)