

**NOMINATION FORM:
ELECTION OF OFFICER**

ONE COPY OF THIS FORM IN RESPECT OF EACH CANDIDATE, SIGNED BY THE CANDIDATE AND AT LEAST ONE (EX-AKOKITIE) NOMINATORS, MUST BE RETURNED TO THE ELECTIONS OFFICER {MR DAVID ASEKOMHE}

It is recommended that you complete this form as a word document (including the names of your nominators, where known), and send the draft document as an email attachment toIf you prefer to complete this form by hand, please print legibly, preferably in block capitals, as illegible forms cannot be processed.

Please note: the official nomination requires the original signatures of both the candidate and the nominator. This means you must submit a completed, signed, paper copy of this form prior to the deadline as noted above.

Before completing this form, all candidates are asked to note the general eligibility requirements which apply to all executive offices, as set out in University of Lagos Regulations 6 of 2016. Current members seeking re-election are also asked to check with the committee chairman as to their eligibility with respect to any specific restrictions on consecutive service.

A. CANDIDATE INFORMATION

Candidates' details will be published on-line, and on ballot papers (in alphabetical order, by surname).

1. NAME OF CANDIDATE & PREFERRED FORMAT

*Please print **exactly** how you wish your name to be published
[e.g. David A, David Asek, Asek David.O]*

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2. CONTACT DETAILS

This information will not be published. The Elections Office may need to contact you at short notice, for example, in the event of a contested election. Please let us know how you wish to be contacted.

PHONE NUMBER:

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E-MAIL ADDRESS:

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3. DEGREES AWARDED

Please list academic qualifications awarded by university of Lagos, and/or other, universities. Precedence and Standing.

UNIVERSITY OF LAGOS DEGREE :

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INTERESTED POSITION :

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4. UNIVERSITY AFFILIATIONS: COLLEGE, FACULTY, DEPARTMENT

Faculty and Departmental affiliation will be used to check eligibility, if membership is specifically required under the relevant regulations.

DEPARTMENT NAME:

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MATRICULATION NUMBER OR YEAR OF GRADUATION:

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B. NOMINATORS' DETAILS AND SIGNATURES

This information will be used to check eligibility, where required by the relevant regulations, and will be published on-line on the alumni website if necessary, as follows: initials, surname, college, faculty (or department)

*NOTE: This form includes space for one nominator. It is acceptable to include more than one copy of this page as part of the official nomination form. For example, candidates may wish to send this page (either in hard copy or as an e-mail attachment) to the nominator for **signature** and then collate the signed copy for inclusion in their official nomination form.*

The original signatures of the candidate and the nominator are required for validation purposes. Photocopies, faxes, or electronic signatures will also be accepted if the chairman of the electoral committee is notified on time.. Further guidance is available from the Alumni website.

1. FIRST NOMINATOR

**TITLE & FULL NAME OF
NOMINATOR:**
(e.g. Dr David.O.Asekomhe).

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EMAIL ADDRESS:

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**UNIVERSITY OF LAGOS
DEGREE OR
MATRICULATION NUMBER :**

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SIGNATURE

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C. DECLARATION BY CANDIDATE

Note: all candidates are asked to note the general eligibility requirements which apply to all executive officers, as set out in University of Lagos Regulations 6 of 2016. Current members seeking re-election are also asked to check with the electoral committee chairman as to their eligibility with respect to any specific restrictions on consecutive service.

I declare that I am eligible and willing to serve in the office shown above if duly elected; that the information given in sections A, B and C is accurate; and that I am willing for all or any of the information, at the Vice-Chancellor's discretion, to be published on the University website and Alumni in connection with this election.

SIGNATURE OF CANDIDATE

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DATE

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