# FOR THE ELECTION TO THE SYNDICATE FROM THE CONSTITUENCY OF **PROFESSOR**

AT DOW UNIVERSITY OF HEALTH SCIENCES - 2023

TO BE FILLED BY THE PROPOSER		
I, registered as an Elector at Serial No	in the Electoral List of	
Professor of the Dow University of Health Sciences, Karachi at		
PROPOSE the name of Professor,	of the Department of(Name of Department)	
at the, as nominee for the memb	pership of the Syndicate of the University,	
from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, eit	her as a Proposer, or Seconder.	
Dated:	Signature of Proposer Stamp of Proposer	
TO BE FILLED BY THE SECONDE	R	
I, registered as an Elector at Serial No	_	
Professor of the Dow University of Health Sciences, Karachi at		
(Name of Institution)		
SECOND the name of Professor, of of of	the Department of(Name of Department)	
at the, as nominee for the memb		
from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, eit	her as a Proposer, or Seconder.	
Dated:		
	Signature of Seconder Stamp of Seconder	
DECLARATION BY NOMINEE		
I, registered as an Elector at Serial No(Name of Nominee)	write Serial Number) in the Electoral List of	
Professor of the Dow University of Health Sciences, Karachi at	do hereby	
CONSENT to the above mentioned nomination as a <b>Candidate</b> for Election of Health Sciences.	on to the Syndicate of the Dow University	
I hereby certify that I have not subject to any disqualification.		
Dated:		

Signature of Nominee Stamp of Nominee

# FOR THE ELECTION TO THE SYNDICATE FROM THE CONSTITUENCY OF ASSOCIATE PROFESSOR

AT DOW UNIVERSITY OF HEALTH SCIENCES - 2023

TO BE FILLED BY THE PROPOSER		
I, registered as an Elector at Serial No in the Electoral List of <b>Associate</b> (Name of Proposer) (Write Serial Number)		
Professor of the Dow University of Health Sciences, Karachi at do hereby  (Name of Institution)		
PROPOSE the name of <b>Associate Professor</b> , of the Department of (Name of Department)		
at the, as nominee for the membership of the Syndicate of the University, (Name of Institution)		
from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, either as a Proposer, or Seconder.		
Dated: Signature of Proposer Stamp of Proposer		
TO BE FILLED BY THE SECONDER		
I, registered as an Elector at Serial No in the Electoral List of <b>Associate</b> (Name of Seconder) (Write Serial Number)		
Professor of the Dow University of Health Sciences, Karachi at do hereby (Name of Institution)		
SECOND the name of <b>Associate Professor</b> , of the Department of (Name of Department)		
at the, as nominee for the membership of the Syndicate of the University, (Name of Institution)		
from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, either as a Proposer, or Seconder.		
Dated: Signature of Seconder Stamp of Seconder		
<u>DECLARATION BY NOMINEE</u>		
I, registered as an Elector at Serial No in the Electoral List of(Name of Nominee)		
Associate Professor of the Dow University of Health Sciences, Karachi at		
do hereby CONSENT to the above mentioned nomination as a <b>Candidate</b> for Election to the Syndicate of the Dow University of Health Sciences.		
I hereby certify that I have not subject to any disqualification.		
Dated:		

Signature of Nominee Stamp of Nominee

# FOR THE ELECTION TO THE SYNDICATE FROM THE CONSTITUENCY OF **ASSISTANT PROFESSOR**

AT DOW UNIVERSITY OF HEALTH SCIENCES - 2023

TO BE FILLED BY THE PROPOSER		
I, registered as an Elector at Serial No in the Electoral List of <b>Assistant</b> (Name of Proposer) (Write Serial Number)		
Professor of the Dow University of Health Sciences, Karachi at do hereby (Name of Institution)		
PROPOSE the name of <b>Assistant Professor</b> , of the Department of (Name of Department)		
at the, as nominee for the membership of the Syndicate of the University, (Name of Institution)		
from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, either as a Proposer, or Seconder.		
Dated: Signature of Proposer Stamp of Proposer		
TO BE FILLED BY THE SECONDER		
I, registered as an Elector at Serial No in the Electoral List of <b>Assistant</b> (Name of Seconder) (Write Serial Number)		
Professor of the Dow University of Health Sciences, Karachi at do hereby (Name of Institution)		
SECOND the name of <b>Assistant Professor</b> , of the Department of (Name of Department)		
at the, as nominee for the membership of the Syndicate of the University, (Name of Institution)		
from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, either as a Proposer, or Seconder.		
Dated: Signature of Seconder Stamp of Seconder		
<u>DECLARATION BY NOMINEE</u>		
I, registered as an Elector at Serial No in the Electoral List of (Name of Nominee)		
Assistant Professor of the Dow University of Health Sciences, Karachi at		
do hereby CONSENT to the above mentioned nomination as a <b>Candidate</b> for Election to the Syndicate of the Dow University of Health Sciences.		
I hereby certify that I have not subject to any disqualification.		
Dated:		

Signature of Nominee Stamp of Nominee

# FOR THE ELECTION TO THE SYNDICATE FROM THE CONSTITUENCY OF ${\bf LECTURER}$

AT DOW UNIVERSITY OF HEALTH SCIENCES - 2023

TO BE FILLED BY THE PROPOSER		
I, registered as an Elector at Serial No(Write Serial No	in the Electoral List of	
Lecturer of the Dow University of Health Sciences, Karachi at	stitution)	
PROPOSE the name of Lecturer, of the Department (Full Name of Nominee)	tment of(Name of Department)	
at the, as nominee for the membership of the Syndicate of the University,  (Name of Institution)		
(Name of Institution) from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, either as a Pro	oposer, or Seconder,	
Thereby certify that i have not subscribed to any other hornination paper, either as a Proposer, or Seconder.		
Dated:		
	Signature of Proposer Stamp of Proposer	
TO BE FILLED BY THE SECONDER		
	in the Electoral List of	
I, registered as an Elector at Serial No(Name of Seconder) (Write Serial No	·	
Lecturer of the Dow University of Health Sciences, Karachi at	do hereby	
SECOND the name of Lecturer, of the Departs (Full Name of Nominee)	ment of	
(Name of Institution)	,	
from this Category of Faculty Members.		
I hereby certify that I have not subscribed to any other nomination paper, either as a Proposer, or Seconder.		
Dated:		
Dated.	Signature of Seconder Stamp of Seconder	
	·	
<u>DECLARATION BY NOMINEE</u>		
I, registered as an Elector at Serial No(Name of Nominee) (Write Serial N	in the Electoral List of	
Lecturer of the Dow University of Health Sciences, Karachi at		
CONSENT to the above mentioned nomination as a <b>Candidate</b> for Election to the Syndicate of the Dow University		
of Health Sciences.		
I hereby certify that I have not subject to any disqualification.		
Dated:	Signature of Nominee	
	Stamp of Nominee	