

NOMINATION FORM FOR PCS CENTER ELECTION

DETAIL OF NOMINEE

NOMINATION FOR THE POSITION OF _____

NAME OF THE NOMINATED CANDIDATE _____

NATIONAL ID CARD NUMBER _____

WORKING AS _____

NAME OF THE INSTITUTION _____

PROVINCE _____

DETAIL OF THE PROPOSER

NAME OF THE PROPOSER _____

NATIONAL ID CARD NUMBER _____

WORKING AS _____

NAME OF THE INSTITUTION _____

PROVINCE _____

Date: _____ Signature of Proposer: _____

DETAIL OF THE SECONDER

NAME OF THE SECONDER _____

NATIONAL ID CARD NUMBER _____

WORKING AS _____

NAME OF THE INSTITUTION _____

PROVINCE _____

Date: _____ Signature of Seconder: _____