

INDIAN INSTITUTE OF SCIENCE EDUCATION AND RESEARCH (IISER) THIRUVANANTHAPURAM

NOMINATION FORM

NAME OF THE POST	
NAME OF THE CANDIDATE	
REGISTRATION NO.	
PROGRAMME	BSMS/IPHD/PHD
SCHOOL	Physics/Chemistry/Mathematics/Biology
DATE OF JOINING	
CGPA	
NAME OF HALL OF RESIDENCE	
ROOM NO.	
I hereby agree to be a candidate for the said post	and declare that if I am elected, shall always
uphold the dignity of the office in discharging m	y duties and responsibilities. I certify that I
have no addictions whatsoever and if needed, I v	will undergo narcotic test for substance use.
	SIGNATURE OF THE CANDIDATE & DATE
I propose of Mr./Ms	for the post of
of SAC of IISER Thiruvananth	apuram for the year 2020-2021.
Self-attested photocopy of my ID Card is submitte	ed herewith.
SIGNATU	JRE OF THE PROPOSER:
	NAME OF THE PROPOSER:
	(BLOCK LETTERS)
	REG.No.:
S	CHOOL (IF APPLICABLE):
I second the proposal of Mr./Ms	for Mr./Ms
for the post of	of SAC of IISER
Thiruvananthapuram for the year 2020-2021.	
Self-attested photocopy of my ID Card is submitte	ed herewith.
SIGNATU	RE OF THE SECONDER:
	NAME OF THE SECONDER:
	(BLOCK LETTERS)
	REG.No.:
S	CHOOL (IF APPLICABLE):

Note: 1. Self-nomination is not permitted

2. Proposer/seconder should not be the same and they should not be contesting in the election.



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FOR OFFICE USE

I HEREBY CERTIFY THAT THE DETAILS GIVEN ABOVE BY	Y THE STUDENT ARE FOUND TO BE CORRECT AND	
I HEREBY RECORD MY NO OBJECTION FOR CONTESTING HIM/HER FOR THE AFORESAID POST OF THE		
STUDENTS' AFFAIRS COUNCIL OF THE INSTITUTE.		
*INCASE OF OBJECTION, THE PARTICULAR OFFICIAL OF THE BELOW HAS TO MENTION THE SAME BENEATH OF THIS FORM.		
(1) SIGNATURE OF THE WARDEN OF HORS		
(2) SIGNATURE OF THE DEAN ACADEMICS		
(3) SIGNATURE OF THE ASSOCIATE DEAN- SA		
REMARKS FOR OBJECTION		
	NAME & SIGNATURE OF THE OFFICIAL	