

FORMAT FOR WITHDRAWAL OF CONSENT (NOMINATION) FORM

I, (Name) Son/Daughter of (Father’s Name) student of Class..... (Name of the Course) (Semester), of the Department in the School ofat voter list’s Part....., Serial number..... of Students’ Council Election-2017 of Guru Ghasidas Vishwavidyalaya, Bilaspur filed a consent (nomination) for the post of elected representative of School of Studies

Now, I want to withdraw my consent (nomination) form for the post of elected representative.

Date: -----

Time: ----- Signature and Name of the Candidate

CERTIFICATE BY THE HEAD

I,, Head of the Department of under the School of Studies, hereby, certify that the above candidate (Name) has applied for the withdrawal in person and signed before me.

Date: Signature and Seal of the Head

Time: Department of

FORWARDING BY THE DEAN OF THE SCHOOL OF STUDIES

I,, Dean of the School of Studies of....., hereby forward the withdrawal application of the above candidate (Name) duly certified by the Head of the Department.

Date: Signature and Seal of the Dean

Time: SOS