



SOUTH EASTERN KENYA UNIVERSITY

NOMINATION PAPER FOR THE SATELLITE CAMPUS REPRESENTATIVE POSITION

Election of Satellite Campus Representative of the Student Governing Council to be held on the 4th day of November 2024.

We, the under-signed proposer and seconder, being registered as voters in **SEKUSA**, do hereby nominate the under-mentioned person as a candidate at the said election.

Candidate's Name in Full

Reg No

Course.....

Department.....

School.....

Phone Number.....SEKU email address.....

National ID Number.....

Signature.....Date.....

Proposer's Full Names.....

Reg. No:

Course:

Department.....

School.....

Phone Number.....SEKU email.....

National ID Number.....



Signature: Date.....

Seconders' Full Names:

Reg. No:

Course:

Department.....

School.....

Phone Number.....SEKU email address.....

National ID Number.....

Signature: Date.....

And I,

do hereby consent to my nomination as Satellite Campus Representative of **SEKUSA** and certify that I am in all respects qualified for nomination as such candidate.

Signature: **Date:**

NB: (i) FORM NOT DULLY FILLED WILL NOT BE PROCESSED

(ii). THIS FORM SHOULD BE RETURNED BY THE ASPIRANT IN PERSON