NOMINATION FORM

Convocation representative: UFS Council

I hereby nominate the following person as a member of the UFS Council¹:

NAME OF NOMINEE: (Complete in block letters)	SIGNATURE (As acceptance of nomination)	IDENTITY NUMBER
NAME OF PROPOSER: (Complete in block letters)	SIGNATURE	IDENTITY NUMBER
NAME OF SECONDER: (Complete in block letters)	SIGNATURE	IDENTITY NUMBER
UNIVERS	Motivation form on next page	

Inspiring excellence, transforming lives through quality, impact, and care.





¹ Every nomination form must be signed by 2 (two) members of the Convocation and must contain the written acceptance of the nomination by the nominee under his/her signature, as well as an abridged CV and a motivation of ± 200 words.

NOMINATION FORM Convocation representative: UFS Council

Motivation (approximately 200 words):		





