



**UNIVERSITY OF BALTISTAN SKARDU
(OFFICE OF THE REGISTRAR)**

ACKNOWLEDGEMENT RECEIPT FOR SUBMISSION OF NOMINATION FORM-2024

Name: _____ Date: _____

Designation: _____

Department: _____

Campus: _____

Serial No in the Electoral Roll: _____

Contesting for the Election of: _____

Nomination Form Submitted by:

Name: _____

Signatures: _____

Nomination Form Received by:

Name: _____

Signatures: _____

(FOR OFFICE USE)

Name: _____

Designation: _____

Campus: _____

Serial No in the Electoral Roll: _____

Date: _____

Time: _____

Contesting for the Election of: _____

Nomination Form Submitted by:

Name: _____

Signatures: _____

Nomination Form Received by:

Name: _____

Signatures: _____