

FORM 'F'

FORM OF COMMUNICATION OF RESULT OF ELECTION OF UNIVERSITY FACULTY  
REPRESENTATIVE TO STUDENTS' COUNCIL

(To be communicated WITHIN TWO DAYS from the date of election)

To  
The Director,  
Directorate of Students' Welfare  
& Cultural Affairs,  
Goa University,  
Taleigao Plateau, Goa.

Sir,

This is to inform you that Shri/Miss \_\_\_\_\_  
a bonafide student of this College/Class elected to the Students' Council of the University at the  
election held on \_\_\_\_\_ by the Electoral College of this Institution.

Information in respect of his/her age, residential address-etc. Is given  
below:

NAME IN FULL : \_\_\_\_\_  
(Beginning with Surname)

DATE OF BIRTH: \_\_\_\_\_ In Words): \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

TELEPHONE No.: \_\_\_\_\_

I certify that the election to the Students' Council was held in accordance with the rules and  
procedures laid down in the Goa University Statutes, SA-23.

\_\_\_\_\_  
Specimen signature of the elected  
candidate to be taken in the presence  
of the Principal of the Institution.

\_\_\_\_\_  
Signature of the Head of the Institution

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