

FORM-C

(Nomination Form for Office-Bearer's Post)

I Propose..... (PFNo./HRMSID).....
(in Block Letters)
of.....Unit
as a candidate for the office of.....
of the State Banks' Staff Union (Karnataka)

Date:
(Name of the Proposer) (Signature of the Proposer)
DESIGNATION :
PFNo./HRMSID :
UNIT :

I SECOND THE ABOVE PROPOSAL

Date:
(Name of the Seconder) (Signature of the Seconder)
DESIGNATION :
PFNo./HRMSID :
UNIT :

NOMINEE'S CONSENT

I do hereby give my consent to the above Nomination.

Place:

Date:

.....
(Signature of the Nominee)
PFNo./HRMSID:.....
UNIT:.....

NOTE: All Nominations should be sent in a **sealed cover**
superscribed '**NOMINATIONS**'.