Student Parliament Niederrhein University of Applied Sciences

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Election proposal

Student Parliament, elections 2025

Name of the election proposal			
Representative of the election proposal	Signature		
The presentative of the election proposal	Joignature		
If no person authorised to declare or represent is indicated, the person seated in place 1 shall be deemed to be the person			
	shall be decined to be the person		
authorised to declare and represent.			

Important

- Please fill in legibly with a biro.
- When drawing up the election proposal, attention must be paid to gender parity in representation. Please note the explanation in the election notice.
- The signature confirms the inclusion in the election proposal and is considered as an assurance to accept the election in case of an election.

Please do not write in this field!				
Received	on:			
	at:	o'clock		
Signature, date, stamp				
A copy is handed over to the authorised representative of the election proposal.				

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e, first name	E-mail			
epartment no. Course of study Matricu		Matriculation numb	culation number	
Signature			Gender (d/m/f)	
Name, first name E-mail				
o. Course of study		Matriculation numb	mber	
Signature			Gender (d/m/f)	
No. 3 Name, first name E-mail				
Department no. Course of study		Matriculation number		
Signature			Gender (d/m/f)	
e, first name	E-mail			
Department no. Course of study Matriculation number		er		
Signature			Gender (d/m/f)	
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No. 5	Name, f	irst name	E-mail		
Departi	ment no.	Course of study		Matriculation numb	per
Signatu	Signature			Gender (d/m/f)	
No. 6	Name, f	irst name	E-mail		
Departi	ment no.	Course of study		Matriculation number	
Signature				Gender (d/m/f)	
No. 7	Name, f	irst name	E-mail		
Department no. Course of study			Matriculation number		
Signature					Gender (d/m/f)
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No. 8	Name, f	irst name	E-mail		
Department no. Course of study			Matriculation numb	per	
Signature					Gender (d/m/f)

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No. 9	Name, f	irst name	E-mail		
Departr	Department no. Course of study Matriculation num		Matriculation numb	er	
Signatuı	re				Gender (d/m/f)
No. 10	Name, f	irst name	E-mail		
Departr	nent no.	Course of study	Matriculation number		er
Signatuı	re				Gender (d/m/f)
No. 11	Name, f	irst name	E-mail		
Department no. Course of study Matricula		Matriculation number			
Signature			,		Gender (d/m/f)
No. 12	Name, f	irst name	E-mail		
Departr	nent no.	Course of study		Matriculation numb	er
Signatuı	re				Gender (d/m/f)

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No. 13	Name, f	irst name	E-mail		
Departr	nent no.	Course of study		Matriculation numb	per
Signatuı	re				Gender (d/m/f)
No. 14	Name, f	irst name	E-mail		
Departr	nent no.	nent no. Course of study Matriculation number		er	
Signatuı	re				Gender (d/m/f)
No. 15	Name, f	irst name	E-mail		
Department no. Course of study Matriculation		Matriculation numb	atriculation number		
Signature			Gender (d/m/f)		
No. 16	Name, f	irst name	E-mail		
Departr	nent no.	Course of study		Matriculation numb	per
Signatuı	re				Gender (d/m/f)

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Candidates

No. 17	Name, f	first name	E-mail		
Departr	ment no.	Course of study		Matriculation numb	er
Signatu	Gender (d/m/t		Gender (d/m/f)		
No. 18	Name, f	first name	E-mail		
Departr	tment no. Course of study Matriculation number		per		
Signatu	Signature		Gender (d/m/f)		
No. 19	Name, f	first name	E-mail		
Departr	ment no.	Course of study		Matriculation numb	per
Signatu	re				Gender (d/m/f)

- Attach copies for other candidates if necessary. -

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Supporting signatures

Please fill in legibly with a biro.

Name of the election proposal

The e	The election proposal requires at least 10 supporting signatures from eligible voters.				
No.	Name, first name	Signature			
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

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