



Makerere  
University  
Retirement  
Benefits  
Scheme



octagon  
Pension | Insurance | Property | Training

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## Election of Member-Nominated Trustees Nomination Form 2020

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NAME OF PERSON NOMINATED: .....

NOMINEE'S PAYROLL NO: ..... NOMINEE'S ASSOCIATION: .....

NOMINEE'S ACCEPTANCE:

I confirm that I accept nomination as a Trustee of Makerere University Retirement Benefit Scheme and that, if elected, I shall serve diligently. .... (Nominee's Signature)

NAME	PAYROLL NO.	STAFF ASSOCIATION	SIGNATURE
PROPOSER:			
SECONDER:			
SUPPORTERS:			
1.			
2.			
3.			

***Note: A proposer, seconder, or supporter is not allowed to endorse the Nomination Form of another candidate involved in this exercise.***