



2004
SCHOOL OF DENTISTRY FACULTY COUNCIL
At Large Representative Nomination Form

Please note that only faculty holding clinical or adjunct appointments in the School of Dentistry may nominate a Representative.

I hereby nominate:

Nominee

Department

for election to the Faculty Council School of Dentistry as an At Large Representative.

ATTEST

Nominee:

If elected, I, _____, agree to serve out my full term (September 1, 2004 – August 31, 2006) on the School of Dentistry Faculty Council.

Signature

Date

This form must be returned to the
Academic Senate Office Attn: Shilpa Patel
Box 0764 *or* faxed to 476-9683 no later than **June 2, 2004**