

COLLEGE OF ENGINEERING TRIVANDRUM

NOTICE

Subject: College Union Election 2026–2027 – Withdrawal of Nominations.

All contestants for the College Union Election 2026–2027 are hereby notified that the submission of candidate written requests must strictly comply with the following official procedures and schedule:

1. Submission Guidelines & Modes

- **In-Person Submission (Primary Mode):**

The contestant must present themselves in person before the Returning Officer and submit the written request in the prescribed template (attached) along with their official College ID Card and a photocopy of the same for verification.

- **Submission via Representative (Alternative Mode):**

If a contestant is unable to appear in person, an authorized student representative may submit the document on their behalf. In such cases, the submission must mandatorily include:

1. Formal Authorization Letter signed by the contestant.
2. Official Recommendation from the Staff Advisor.
3. Formal Approval from the Head of Department (HoD) with seal.
4. College ID Cards along with photocopies of both the candidate and the authorized representative.

2. Deadline

- **Date & Time: On or before 12.10.2026 (Monday) at 11:00 AM.**

Note: Submissions received after 11:00 AM on 12.10.2026 or without the required attestations/documents will be rejected without further consideration.



RETURNING OFFICER

WITHDRAWAL OF NOMINATION

To,

The Returning Officer,

College Union Election 2026-27,

College of Engineering Trivandrum

I, the undersigned, do hereby formally withdraw my nomination for the position specified herein in the College Union Election 2026-27. I respectfully request your acceptance of this withdrawal and the removal of my name from the list of candidates competing for the specified position.

Name of Candidate	
KTU ID / Admission number if KTU ID not available	
Semester	
Programme/ Branch	
Post withdrawn from	
Serial Number of the POST in the Valid Nominations list	
Mobile Phone number of candidate	

Yours faithfully,

Signature: _____

Name: _____

Date: _____

Authorization of Representative (*Fill ONLY if candidate is submitting via representative*)

I, _____, contesting candidate for the post of _____, hereby authorize _____
(Dept: _____, Sem: _____, Roll No: _____) to submit my candidacy withdrawal request on my behalf.

Date: _____

Signature of Candidate: _____

Section C: Verification & Approvals (*Mandatory for Representative Submission*)

• **Recommendation of Staff Advisor:**

I have verified the request and recommend approval for representative submission.

Name: _____ Signature: _____ Date: _____

• **Approval of Head of Department (HoD):**

The candidate request and authorization are hereby approved.

Name: _____ Signature: _____ Date: _____

(Department Seal)