**Voting Slip**

**2016/17**

## **Course:**

## **Your student number/UPI:**

Please write the candidates number or name to indicate your preference:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1st preference:** | **2nd preference:** | **3rd preference:** | **4th preference:** | **5th preference:** |
|  |  |  |  |  |
| **6th preference:** | **7th preference:** | **8th preference:** | **9th preference:** | **10th preference:** |
|  |  |  |  |  |



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