

IAP KERALA STATE ELECTION 2018 NOTIFICATION

Elections for the post of State President Elect 2019	- 1 Post (Term 1 year)
State Vice President Elect 2019	- 1 Post (Term 1 year)
State Secretary 2019-20	- 1 Post (Term 2 years)
State Joint Secretary 2019-20	- 1 Post (Term 2 years)
State Treasurer 2019-20	- 1 Post (Term 2 years)

Eligibility- Candidates should have served in the State EB for 2 complete years.
President Elect candidate should be an IAP Life / Ordinary member for at least 10years
Vice President Elect candidate should be an IAP Life / Ordinary member for at least 7years
Secretary/Joint Secretary/Treasurer candidate should be an IAP Life / Ordinary member for at least 3years

Completed forms to reach the Chief Election Commissioner by 5pm on 7th July 2018
Scrutiny of forms on 8th July 2018
Withdrawal date on 9th July 2018

Dr George F. Moolayil
Chief Election Commissioner

Dr M. Narayanan
Election Commissioner

Dr Jacob Abraham
Election Commissioner

INDIAN ACADEMY OF PEDIATRICS

KERALA STATE BRANCH 2018

NOMINATION FORM FOR THE POST OF
PRESIDENT / VICE PRESIDENT / SECRETARY / JOINT SECRETARY / TREASURER

(PLEASE FILL-UP THE FORM IN BLOCK LETTERS)

Name of the Office for which the Candidate is to be nominated

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Name of the Candidate (in full)

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Address

.....

.....

District.....State.....

IAP Membership No. of the Candidate.....since.....

Mobile Email:.....

(self attested copy of Passport / IAP ID Card / PAN number card / Driving license to be attached)

Name of the Proposer

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Proposer's Address

.....

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Membership No. of the Proposer.....

Mobile Email:.....

Signature of Proposer &Date.....

(self attested copy of Passport / IAP ID Card / PAN number card / Driving license to be attached)

Name of the Seconder

Seconder's Address

.....

Membership No. of the Seconder

Mobile Email:.....

Signature of Seconder & Date

(self attested copy of Passport / IAP ID Card / PAN number card / Driving license to be attached)

Place:

Date:

Signature and Name of candidate

DECLARATION

I hereby declare that I consent for nomination for the post as mentioned above. All information provided by me are true and correct to best of my knowledge and belief. I shall abide by rule and regulations as per constitution of Indian Academy of Pediatrics. I understand that Election Commission has provided adequate information, in case of any discrepancy rules and regulations of the constitution of IAP shall apply. I also declare to practice the code of conduct prescribed by election commission of IAP.

Place:

Date:

Signature and Name of candidate

Instructions

1. Please make sure about eligibility for the applied post and eligibility of proposer and seconder.
[Eligibility- Candidates should have served for **2 complete years in the State EB President Elect candidate** should be an IAP Life / Ordinary member for at least **10years**, **Vice President Elect candidate** should be an IAP Life / Ordinary member for at least **7years**, **Secretary/Joint Secretary/Treasurer candidate** should be an IAP Life / Ordinary member for at least **3years**]
2. Fill complete form in capital letters. Incomplete form will be rejected.
3. Read carefully all the details given in notice before filling the form.
4. Make sure all particulars given are true and correct.
5. Check list of enclosures-
 - Completed nomination form.
 - Self-attested photo copy of valid ID - (Signature should be same as given on ID)
 - a. Candidate- Passport / IAP ID Card / PAN card / Driving license
 - b. Proposer- Passport / IAP ID Card / PAN number card / Driving license
 - c. Seconder- Passport / IAP ID Card / PAN number card / Driving license
 - DD [**for post of President Rs5,000 and post of Vice President Rs2,500**] in favor of **IAP KERALA CHAPTER** payable at **STATE BANK OF TRAVANCORE, Thalassery**
6. Last date and time for application- The complete nomination form with the nomination fee and ID proof should reach the Chief Election Commissioner **on or before 7th July 2018, 5 PM.**
Address:
Dr. George F. Moolayil,
Emvee House,
Kizhathadiyoor PO, Pala,
Kottayam- 686 574
Mob: 9961806888

