

Elections of IOA – Year 2018
Nomination form of IOA election for year 2018

Indian Orthopaedic Association Election-2018
Nomination Form (Photocopy can also be used)

Name of Contestant : _____
Post for which contesting : _____
Membership No. / Year : _____
Address : _____

Phone No. with STD Code : _____ Fax No. : _____
Mobile No. : _____ E-mail Address : _____
Proposed by : _____ **Seconded by** : _____
Name : _____ Name : _____
Membership No. : _____ Membership No. : _____
Signature : _____ Signature : _____

Consent of Contestant

I hereby agree to contest for the post of
of the Indian Orthopaedic Association. If elected I will serve the Association to the best of my ability. I shall not
use any unfair means for my election.

Date : _____

Place : _____

Signature of Contestant

Important information:

- 1) Nomination form is to be completed and mailed to **Election Officer, IOA 2018 and Vice President, IOA** in both form i.e. Hard Copy (by Registered Mail) and Soft Copy. Please address all correspondence regarding election to

Dr R. C. Meena

Vice President & Election Officer, IOA

IOA House, Plot No. 69, Tughlakabad Institutional Area, Behind Batra Hospital, M B Road,
New Delhi - 110062

Mobile: 9414069191

Email: electionofficerioa@gmail.com / ioavp2018@gmail.com

- 2) Contestant for post of Vice President should submit a short bio-data (write-up) in 250 words along with photo to be circulated to members