

## **Nomination Form LAP Elections Sept 2015**

1. Name of post for which the candidate is nominated:
2. Name of the candidate in full:
3. Address of the candidate:
4. Email address of candidate:
5. Central IAP membership number LAP membership number:

**6. Proposer A.**

- i. Name:
- ii. Central IAP membership number LAP membership No:
- iii. Email address:

**7. Seconder B.**

- i. Name:
- ii. Central IAP membership number LAP membership No:
- iii. Email address of seconder:

### **Declaration by candidate**

I declare that I am willing to be nominated to the above post. I shall abide by the rules and regulations of the LAP .

Date:

Signature:

Name:

***Last date for filing nominations – 5 PM, September 30, 2015***

***Last date for withdrawal of nomination – 5 PM, October 10<sup>th</sup> , 2015***

***Nomination forms to be Mailed to Dr Piyali Bhattacharya, at Type 5/2, New Campus  
SGPGIMS, Raebareilly Road, Lucknow 226014***