

**ELECTION COMMISSION IMA HOSHIARPUR**

**Nomination Form for Post of President IMA Hoshiarpur for Year...2021**

Name (in block letters).....

Address.....

.....

Phone:-Landline..... Cell No.....

Email.....

Life membership Number.....

Proposed By

Secoded By

Dr.....

Dr.....

Life membership No.....

Life Membership No.....

Signature

Signature.....

**Consent by the Candidate.**

I, Dr.....Life membership no.....  
give my consent to contest the elections for the post of President IMA Hoshiarpur

Signature

Name .....

Documents to be attached:-

1. Bank Draft of Rs 2000/- by DD/Cheque in favour of IMA Hoshiarpur payable at Hoshiarpur
2. Undertaking by the candidate
3. Self attested Photocopy of the IMA Membership certificate

Note:- The nomination form complete in all respects along with the undertaking by the candidate in the given format should be sent so as to reach the office of the CEC IMA Hoshiarpur by 30<sup>th</sup> December.2020 by 5.00 PM

**ELECTION COMMISSION IMA HOSHIARPUR**

**UNDERTAKING BY THE CANDIDATE**

I, Dr.....Life membership no.....  
whose name has been proposed for the post of President IMA Hoshiarpur here by give an  
undertaking that I have read all the eligibility conditions as mentioned in the election notification  
and agree to these. I further declare that I fulfill all the eligibility conditions mentioned there in  
and if later on it is found that I have made a false declaration and don't fulfill all of the above  
mentioned conditions my candidature is liable to be cancelled and my security deposit will be  
forfeited .

Signature of the candidate

Date.....

Place.....