NOMINATION FORM

Elections for Secretary, Editor and Treasurer of EC of ICAAI (2024-2026)

Part- A

	I propose the name of Dr	for the post
	of EC of In nology.	dian College of Allergy, Asthma and Applied
Place: Date:	Signature of	Fellow (proposer)
		Name (Capitals) Address
	Membership No.	*Email *Mobile No
Part-	В	
	I second the above proposal made by Dr.	in favour of of EC of Indian College of Allergy,
	for the post of a and Applied Immunology.	of EC of Indian College of Allergy,
Place: Date:	Signature of	Fellow (Seconder)
		Name (Capitals) Address
	Membership No	*Email *Mobile No
Part-	с	
	I, Drin m in m ian College of Allergy, Asthma and Applied	here by agree to the proposal made y favour for the post ofof EC Immunology.
		initiationo By:
Place: Date:		Signature Candidate
		Name (Capitals) Address Membership No
*Emai	I	*Mobile No.

*NOTE: Email IDs and Mobile Numbers of all essentially required.