



# Indian Society of Medical & Paediatric Oncology

Empire Clinic, 3rd Floor, Natasha Bldg., Hill Road, Bandra West, Mumbai-400 050, India.

Email: ismpoelection2021@gmail.com

## Nomination Form

### 2021 Executive Committee

I (FULL NAME) \_\_\_\_\_  
hereby nominate for the following position/s.

POSTAL ADDRESS \_\_\_\_\_

CELL PHONE NO. \_\_\_\_\_ LANDLINE NO. \_\_\_\_\_

ISMPO MEMBER SINCE (YEAR) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ (2021)

Proposed by \_\_\_\_\_ Signature \_\_\_\_\_

Seconded by \_\_\_\_\_ Signature \_\_\_\_\_

Please tick ✓ one or more as desired:

	Position	Criteria
	President (2 Year Term) – Not for election	NA
	President Elect (2 Year Term)	ISMPO Executive Committee for at least 1 term
	Vice President (2 Year Term)	
	Honorary General Secretary (4 year Term)	
	Honorary Joint Secretary (4 Year Term)	
	Honorary Treasurer (4 year Term)	Continuous membership of ISMPO for at least 3 years.
	Member (4 Year Term) (03 posts)	

It is the responsibility of the nominee to ensure that this form is correctly signed by member of ISMPO

**Dr. Govind Babu**  
Hon. President

**Dr. BK Smruti**  
Hon. Secretary

**Dr. Randeep Singh**  
Jt. Secretary