

## INDIAN PSYCHIATRIC SOCIETYTELANGANA STATE BRANCH

NOMINATION	PAPER			
NOMINATION FOR THE POST OF	:			
NAME OF THE CANDIDATE	:			
IPS Membership No	:			
Year of LF (For President Elect, Hon General Secretary and IPSTSB REP TO SZ only)	:			
	ICE BEARER/EC MEMBER/ORG SECRETARY ( Tick whichever is applicable) President Elect/ Hon Gen Secretary/ IPSTSB REP TO SZ)			
Mention the Year/term /Program Conducted	:			
PROPOSED BY NAME	:			
IPS LF Membership No	:			
PROPOSED BY SIGNATURE	:			
SECONDED BY NAME	:			
IPS LF Membership No	:			
SECONDED BY SIGNATURE	:			
DECLARATION				
I solemnly affirm that I have read and will uphold the aims and objectives of the Indian Psychiatric Society – Telangana State Branch to the best of my ability and agree to abide by its constitution and bylaws, which come to force from time to time.				
DATE:	APPLICANTS SIGNATURE			
PLACE:	NAME:			