INDIAN SOCIETY OF ANESTHESIOLOGISTS, DELHI BRANCH

NOMINATION FORM – ELECTIONS 2026

PRESIDENT

PRESIDENT- ELECT

VICE-PRESIDENT

HONORARY. SECRETARY

HONORARY TREASURER

EDITOR

ZONAL GC MEMBERS (NORTH / SOUTH / CENTRAL / EAST / WEST)

I propose the name of Dr.……
ISA No. ……
for the post of
….....and partner
Dr.……
ISA No. ……..
for the post of.....of
Indian Society of Anaesthesiologists, Delhi Branch.(In case of nomination for the post of Honorary Secretary please mention Treasurer partner and in case of nomination for the post of Honorary Treasurer please mention the Secretary partner.)

Name of the Proposer
Dr.....…….
ISA No. …….
Address……
……
Mobile No. :.....E-mail ID:
……

Signature of the Proposer:

I hereby second the Above nomination

Name of the Seconder
Dr. ……
ISA No. …….
Address……
……
Mobile No. :.....E-mail ID :

………………………………………………………………………………………

Signature of the Seconder:

I hereby consent to the above proposal and promise that I shall abide by the rules and regulations of the Indian Society of Anaesthesiologists. I am an Active member of the ISA since.....(Year of acquiring membership) for …..... years. (Total duration of membership till date).

I have attended the following Delhi state annual conferences in last five years (Attach copies of Certificate of Attendance)

S. no. Name and city of the conference Year of Attending

OR

I have attended the following monthly clinical meetings in last one year

S. no. Name and city of the conference Year of Attending

I certify that the details provided in the nomination form are true to the best of my knowledge

Name of the
Candidate:…….
ISA No. ……
Post Applied for:.
……
Mobile No.: ……. E-mail ID:
……
Postal Address:
……
……..

Signature:……Place:……
Date……..