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**ELECTION FOR COUNCIL MEMBER ( 2021-24)**

**NOMINATION FORM**

We, the undersigned Fellows of the National Academy of Medical Sciences (India), propose/ second the nomination of the following Fellow for NAMS Council Member 2021

**Candidate proposed**

Name (in Block letters) \_\_\_\_\_

Address (in full) \_\_\_\_\_

\_\_\_\_\_

**Proposer**

Name (in Block letters) \_\_\_\_\_

Signature \_\_\_\_\_

Address (in full) \_\_\_\_\_

\_\_\_\_\_

**Secunder**

Name (in Block Letters) \_\_\_\_\_

Signature \_\_\_\_\_

Address (in full) \_\_\_\_\_

\_\_\_\_\_

**Bio-data of the candidate proposed to be sent in the prescribed form, enclosed along with the Nomination Form**

\_\_\_\_\_

**CONSENT OF THE CANDIDATE**

**I hereby agree to my candidature for election as Council Member of National Academy of Medical Sciences (India)**

**Signature** \_\_\_\_\_

**Name in Block letters**

Self Declaration of good standing

**(To be filled in by the office of the Academy)**

S. No. of the proposal \_\_\_\_\_

Date of receipt of the Proposal\_

**Hony Secretary**

**National Academy of Medical Sciences**

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**BRIEF BIODATA OF THE NOMINEE FOR COUNCIL MEMBER**

1. Name with Academic Qualifications:
2. State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
3. Year in which Fellowship (FAMS) awarded:
4. Council Member in the past (Yes/No), If Yes, year and no.of terms:
5. Important appointments held beginning with present assignment: (limited to 4 only)  
.
6. President/Chairmanship/Vice-President of National/International scientific bodies:  
(limited to four only)  
.  
.  
.  
.
7. Editorship of the Journal(s)
8. Awards: (limited to 6 only)  
(a) National (limited to 4 only)  
.  
(b) International (limited to 2 only)  
.  
.
9. Specialty:
10. Contribution to NAMS as Office Bearer:
11. Self Declaration of good standing

**Date:**

**Signature of the Nominee**

**NATIONAL ACADEMY OF MEDICAL SCIENCES (INDIA)**  
NAMS House, Mahatma Gandhi Road, New Delhi-110029

**PERFORMA FOR SELF DECLARATION OF GOOD STANDING**

This is to certify that I, ....., have not been penalized / any case pending against me for any professional, financial and ethical misconduct during my service / in the professional member associations and scientific bodies etc. till date.

Signature:

Name

Address:

Place

Date