



(OCCUPATIONAL THERAPY / ERGO MEDICINE)

ALL INDIA OCCUPATIONAL THERAPISTS' ASSOCIATION

[Election 2012-14]

NOMINATION FORM

(To be filled in Capital Letters)

Dated: July -----, 2011

To,

Dr. R.K. Sharma

Chairman, Election Committee, AIOTA

D-59, Suncity, Sector 54, Golf Course Road,

Gurgaon- 122002 (Haryana)

Tel: 9811147423

Dear Sir,

I wish to contest for the Post of [_____] in the AIOTA Election being held under your able control for constituting the **Executive Committee for the Financial Years 2012-2014.**

- I hereby certify that: **I am a regular Life Member of AIOTA since _____ .**
- I have also renewed my membership before 1st July, 2011. **Applicable only for Members who had obtained their Life Membership on or before 1995.**
- **I have served in AIOTA Executive Committee as:**

A. **E.C. Member:** From _____ To _____

B. _____ From _____ To _____

C. _____ From _____ To _____

- **I also certify that neither there has been any disciplinary proceeding against me nor my membership is/was withheld and/or suspended for any reason, till date. All information given in the Nomination Form and the Annexure are correct to the best of my knowledge.**

Kindly accept my Nomination and oblige.

Thank you

Sincerely

Signature of the Contestant: _____

Name (as in record of AIOTA): _____

Full Address: _____

AIOTA Membership No.: _____ **Date of Issue of Membership** _____

Tel. Nos: _____

E Mail: _____

Letter of Endorsement from any TWO Members of A.I.O.T.A.

I/We herewith endorse the name of Dr _____
for contesting the Election on the Post of _____ for AIOTA Executive Committee
(2012-2014). My/our AIOTA/ACOT Membership Certificate is enclosed with this letter of Endorsement.

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <u>Endorsee: 1</u> _____ Signature: _____ Name: _____ Membership #: _____ Address: Tel. #: _____ Email: _____ | <u>Endorsee: 2</u> _____ Signature: _____ Name: _____ Membership #: _____ Address: Tel. #: _____ Email: _____ |
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ANNEXURES:

1. **Election Deposit:**
DD for Rs 1000/- in favor of AIOTA, payable at Aurangabad (Maharashtra).
D.D. No _____, Dated _____ Bank/ Branch _____
2. a. AIOTA and/or ACOT Membership Certificates of Contestant and Endorsees (Self Attested)
or
b. **Copy of Renewed Membership Certificate** in case original Life Membership of AIOTA is issued on /or before the year 1995(Self Attested)
3. **Letter of Endorsement** from Members preferably on Xerox copy of the Nomination Form if the member/s is from other place with that of the Contestant.

Dated _____

Signature of the contestant

For Office Use

Nomination Form received on Dated _____

Nomination approved: Yes/No

Withdrawal of Nomination: Yes/No *Received Letter of Withdrawal on Dated:* _____

Reasons for Non-acceptance of Nomination: _____

Permitted to Contest on the post of: _____

Chairman Election Committee

Member Election Committee