

Announcement for Election - 2017

Call for Nomination for Election of Office Bearers

Nomination typed on plain sheet in the format given below is invited for the undermentioned posts. Duly filled and signed nomination form along with bio-data are to be sent by post to Secretary IAC, Dr Dev Prasoon, Consultant Pathologist, Dr. Prasoon's Diagnostic Centre, Bhagat Singh Chowk, Narayan Das Road, Munger 811201 so as to reach before due date.

1. President Elect:

- (a) Number of post - 1
- (b) Tenure of post - 1 year
- (c) Eligibility criteria:-
 - i) Should be an active life member of IAC for at least 15 years.
 - ii) Should have served at least one full term of three years as an executive committee member prior to his/her nomination.
 - iii) Should have attended three or more GBMs in the immediate past 5 years.

2. Treasurer:

- (a) Number of post - 1
- (b) Tenure of post - 3 years
- (c) Eligibility criteria:-
 - i) Should be an active life member of IAC for at least 12 years.
 - ii) Should have served at least one full term of three years as an executive committee member prior to his/her nomination.
 - iii) Should have attended three or more GBMs in the immediate past 5 years.

3. Executive Committee Member:

- (a) Number of post : 2
- (b) Tenure of post : 3 years
- (c) Eligibility criteria :
 - i) Should be an active life member of IAC for at least 10 years.
 - ii) Should have attended three or more GBMs in the immediate past 5 years.

Format for bio-data of candidate

It should be under the following headings:

1. Name of the candidate:
2. Duration and type of membership:
3. Contribution to IAC:
4. Contribution in the field of Cytology:
5. Address for Correspondence (off & res):
6. Telephone No: landline and mobile
7. E-mail id
8. Number of GBMs of IAC attended in immediate past 5 years:

Date:

Signature of Candidate

Standard format for nomination form

I propose the name of Dr....., having IAC membership No.....
for the post ofof IAC executive body

Name & Signature of the Proposer
IAC membership No of proposer.....

I, Dr.....second the above proposal

Name, Signature of the proposer
IAC membership No of proposer.....

I, Dr.....having IAC membership no.....accept the above proposal.

Name, Signature of the Candidate
IAC membership No of candidate...

Time table for election

Receipt of nominations by Secretary's Office : 15.07.17
Information to contestants after scrutiny : 31.07.17
Withdrawal of nomination : 14.08.17 by 1700 hours
Dispatch of ballot papers by post on / before : 01.09.17
Return of ballot papers by: 15.10.17
Scrutiny and counting: 20.10.17
Declaration of results: At the time of Annual General Body/Executive Committee Meeting to be held during 47th Annual Conference of IAC at Shillong.

Criteria for rejection of application

Application form shall be rejected under the following circumstances:-

- (a) Incomplete nomination form
- (b) Nomination form without appropriate signature
- (c) Nomination form received after due date
- (d) Nomination form received electronically
- (e) one member can file nomination for only post at one time – if more than one nomination is received from a candidate then all his nominations shall be rejected.
- (f) Life associate member and honorary members are not eligible for election/nomination for any post

Once rejected, application from the given candidate shall not be entertained again in the same year.