



**THE ASSOCIATION OF SURGEONS OF INDIA
NOMINATION FORM**

For the post of one CHIEF EDITOR /one EDITOR /5 EDITORIAL BOARD MEMBERS of IJS for 2019 - 2024

I, Dr.....Member (Membership No.) of the Association of Surgeons of India, propose Dr..... (Membership No.....) for the Post of CHIEF EDITOR / EDITOR / EDITORIAL BOARD MEMBER of IJS for 2019 – 2024.

.....
Signature of the Proposer
(With Name in Capitals)

.....
Signature of the Seconder
(With Name in Capitals)

ASI Membership No.....
Full Residential Address:

ASI Membership No.....
Full Residential Address:

Telephone No:- ().....
Mobile No:
Email:

Telephone No:- ().....
Mobile No:
Email:

Place:
Date:

Place:
Date:

Declaration by the Candidate

ASI Membership No.....
Experience in Editorial field:-
Full Residential Address:

Year of Joining ASI.....

I agree to serve as **CHIEF EDITOR / EDITOR / EDITORIAL BOARD MEMBER** of IJS for 2019 – 2024.

Signature
(With Name in Capitals)

Place:
Date:

Telephone No:- ()..... Mobile No:
Verified by:

Email: