



Indian Society of Anaesthesiologists

Tamil Nadu State Branch

www.isatamilnadu.com



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|--|---|---|--|
| Dr. R. Selva Kumar President | Dr. G. P. Kirupakaran President Elect | Dr. N. Basker Hon. Secretary | Dr. S. Giridharan Hon. Treasurer |
| Dr. R. Amutha Rani Academic Chairman | | Dr. S. Kumar Chief Election Officer | |

Ref: SEC/ ISA NHQ/ PTA/ 2024/228 - NOTIFICATION OF ELECTIONS OF ISA STATE, METRO & CITY BRANCHES 2024

Application Form

Date: 21-06-2024

For Elections ISA TAMILNADU State, Metro and City Branches 2024

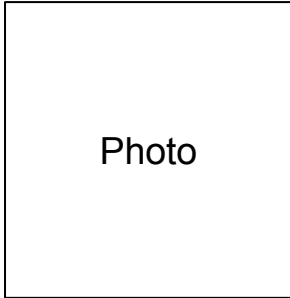
To
The Chief Election Officer,
TAMILNADU ISA /city branch

Date:

I am interested in contesting elections of TN ISA for the post of:

A) TAMILNADU ISA

- 1) President Elect
- 2) Hon. Secretary
- 3) Hon. Treasurer



OR

B) city branch

- 1) President/President Elect*
- *Applicable to city branches which already has President Elect post*
- 2) Hon. Secretary
- 3) Hon. Treasurer

Here are my details:

Name:

FBF No:

ISA no:

Mobile No:

Duration of ISA Membership:

Email:

Address for Correspondence: **Dr. N. Basker,**

No: 59/143-P, Bangaru street,
Near Sayani complex,
Chennai - 600023.

Phone: 9443686001

Email: secretaryisatn@gmail.com



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Details of GBM attended at

Date: 21-06-2024

- 1) _____ 4) _____
- 2) _____ 5) _____
- 3) _____

I have served my city branch as for the year

Number of meetings attended in your local branch in the last year %

ALL THE ABOVE INFORMATION FURNISHED BY ME IS CORRECT TO MY KNOWLEDGE AND I AM AWARE THAT IF IT FOUND UNCORRECT NECESSARY ACTION CAN BE TAKEN AGAINST ME.

Please accept my application and allow me to contest election.

Proposer:

Name: ISA No: Signature:

Name: ISA No: Signature:

Yours Sincerely,

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Address for Correspondence: Dr. N. Basker,
 No: 59/143-P, Bangaru street,
 Near Sayani complex,
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 Email: secretaryisatn@gmail.com