

**ASSENT FORM FOR NOMINATION
INDIAN SOCIETY OF TRANSFUSION MEDICINE**

**ELECTION OF MEMBERS OF EXECUTIVE COMMITTEE FOR
[Jan 2020- Dec 2022]**

To,
The Returning Officer,
ISTM

Dear Madam,

I am willing, if elected, to serve the Executive Committee of ISTM. I will abide by all the rules and regulations as mentioned in the constitution of the society. My membership dues have been paid up till date.

SN	Name of post	Please tick the position you want to stand for
1.	President	[]
2.	Vice President	[]
3.	Secretary	[]
4.	Joint Secretary	[]
5.	Treasurer	[]
6.	Editor	[]
7.	Zonal Representative	[]

Please mention the Zone: _____

Date Signature

Name of the candidate:

ISTM Membership number:

Mailing address:

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Email: Mobile:

Proposed by: **Seconded by**

Signature: Signature:

ISTM Membership No..... ISTM Membership No.....

E Mail E Mail

Mailing Address Mailing Address.....

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Note:

- The Assent form should be sent to the returning officer on or before 18-11-2019. Last date of withdrawal on or before 18-12-2019.

Dr Jayashree Sharma
Professor and Head,
Department of Transfusion Medicine,
Seth GS Medical College & KEM Hospital,
Parel, Mumbai – 12,
Email ID: javashreesharma@kem.edu

- Please provide details of payment of fees of Rs 5,000 / as follows
 1. Demand Draft number
 2. Date of Demand Draft
 3. Issuing Bank or NEFT payment details.