**INDIAN SOCIIETY FOR VETERINARY IMMUNOLOGY AND BIOTECHNOLOGY**

**NOMINATION FORM**

(Please use capital letters)

**Name of the candidate :**

**Name of the post :**

**Proposed by (Signature)**

Name :

Address :

Phone no: e mail:

**Seconded by**

1. Signature :

Name :

Address :

Phone no: e mail:

2. Signature :

Name :

Address :

Phone no: e mail:

Positions held previously in ISVIB Executive Committee (year wise):

**Certificate**

I hereby give my consent to contest for the post of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

in the ISVIB Elections 2024 duly following the terms and conditions.

**Place: Signature of the candidate**

**Date: Name :**

**Address :**

**Phone No:**

**E mail :**