

**NOMINATION FORM – IASP 2025**

(Please read the relevant sections of Constitution of Indian Association for Social Psychiatry mentioned in the Website before filling the nomination form)

**Name of the Post** (in CAPITAL LETTERS)

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**Name of the fellow nominated** (in CAPITAL LETTERS)

.....

IASP fellow number:

.....

**Proposed by** (name of the member, IASP membership number & Signature)

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**Seconded by** (name of the member, IASP membership number & Signature)

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**Consent**

I ..... (Name) hereby give my consent to be nominated for the post of  
..... (name of the post)

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(Name & Signature with date)