# NOMINATION FORM – IASP 2026

(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 LATTERS)

**…… ……..**

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

**……**……..**……..**

IASP fellow number:

**……..**…….**……**

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

…….**……**

…….

……

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

…….**……**

…….

……

**Consent**

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

**……**

…….. ……
(Name & Signature with date)