

ANNEXURE 3

NOMINATION FORM (to be filled by Candidate)

NAME

Title *surname* *first Name*

MEMBERSHIP NUMBER

COMOS *ICOMOS*

ADDRESS

(Nos) *Street)*

(City) *(State)* *(Pin Code)*

CONTACT

Mobile Nos *Email id*

ZONE

NORTH SOUTH WEST

EAST NORTH EAST CENTRAL

OCCUPATION

EXPERIENCE

CATEGORY OF EXECUTIVE BOARD MEMBER FOR WHICH NOMINATION IS BEING FILED (PLEASE TICK)

PRESIDENT TREASURER

REGIONAL REPRESENTATIVE – CENTRAL ZONE REGIONAL REPRESENTATIVE –SOUTH ZONE

NAME OF PROPOSER

Title *surname* *first Name*

MEMBERSHIP NOS OF PROPOSER

COMOS *ICOMOS*

NAME OF SECONDER

Title *surname* *first Name*

MEMBERSHIP NOS OF SECONDER

COMOS *ICOMOS*