

Indian Association of Cardiovascular Thoracic Anaesthesiologists

Application for the post of Associate Vice President of IACTA: 2022

Tenure: March 2022- Feb.2023

Name.....

IACTA Life Membership No..... Date of Joining IACTA

Mobile No..... Email.....

Age: Date of Birth: Gender:

Permanent Address.....

.....

.....

Institution/Hospital address.....

.....

IACTA national conferences attended in last ten years:

1.	2021 (Virtual):	Yes/No	2.	2020 Goa:	Yes/No
3.	2019 Kolkata:	Yes/No	4.	2018 Hyderabad:	Yes/No
5.	2017 Pune:	Yes/No	6.	2016 Chennai:	Yes/No
7.	2015 Jaipur:	Yes/No	8.	2014 Mumbai:	Yes/No
9.	2013 Cochin:	Yes/No	10.	2012 Delhi:	Yes/No
11.	2011 Bangalore:	Yes/No	12.	2010 Kolkata:	Yes/No

Previous executive committee posts held in IACTA (Enter the tenure also):

1.....

2.....

3.....

4.....

Personal Achievements:

1.....

2.....

3.....

4.....

Proposed by (Two life members of IACTA):

(1) Name.....IACTA membership No.....

Address.....

(2) Name.....IACTA membership No.....

Address.....

Declaration

Ido hereby declare that the information provided above is the truth, to the best of my knowledge, and am aware that I am likely to be disqualified from contesting if anything is proved wrong.

Date:

Place:

Applicant's signature

For Office use only

Verified the details: Yes / No

Date Received: / /

SEND TO

Email: iactasecretariat@gmail.com

OR

Surface post to: IACTA Office, Anaesthesia House, First Floor, GCDA Shopping Complex, Panampilly Nagar, Cochin - 682 036, Kerala.

(LAST DATE FOR APPLICATION TO REACH BY EMAIL or BY POST to IACTA OFFICE: 31.12.2021)

Indian Association of Cardiovascular Thoracic Anaesthesiologists

Application for the post of Secretary of IACTA: 2022

Tenure: March 2022- Feb.2025

Name.....

IACTA Life Membership No..... Date of Joining IACTA

Mobile No..... Email.....

Age: Date of Birth: Gender:

Permanent Address.....

.....

.....

Institution/Hospital address.....

.....

IACTA national conferences attended in last ten years:

1.	2021 (Virtual):	Yes / No	2.	2020 Goa:	Yes / No
3.	2019 Kolkata:	Yes / No	4.	2018 Hyderabad:	Yes / No
5.	2017 Pune:	Yes / No	6.	2016 Chennai:	Yes / No
7.	2015 Jaipur:	Yes / No	8.	2014 Mumbai:	Yes / No
9.	2013 Cochin:	Yes / No	10.	2012 Delhi:	Yes / No

Previous executive committee posts held in IACTA (Enter the tenure also):

1.....

2.....

3.....

4.....

Personal Achievements:

1.....

2.....

3.....

4.....

Details of Treasurer:

Name..... Life membership No.....

Address.....

Proposed by (Two life members of IACTA):

(1) Name.....IACTA membership No.....

Address.....

(2) Name.....IACTA membership No.....

Address.....

Declaration

Ido hereby declare that the information provided above is the truth, to the best of my knowledge, and am aware that I am likely to be disqualified from contesting if anything is proved wrong.

Date:
Place

Applicant's signature

For Office use only

Verified the details: Yes / No

Date Received: / /

SEND TO

Email: iactasecretariat@gmail.com

OR

Surface post to: IACTA Office, Anaesthesia House, First Floor, GCDA Shopping Complex, Panampilly Nagar, Cochin - 682 036, Kerala.

(LAST DATE FOR APPLICATIONS TO REACH BY EMAIL OR POST TO IACTA OFFICE: 31.12.2021)

Indian Association of Cardiovascular Thoracic Anaesthesiologists

Application for the post of Treasurer of IACTA: 2022

(tenure: March 2022- Feb.2025)

Name.....

IACTA Life Membership No..... Date of Joining IACTA

Mobile No..... Email.....

Age: Date of Birth: Gender:

Permanent Address.....

.....

.....

Institution/Hospital address.....

.....

IACTA national conferences attended in last ten years:

1.	2021 (Virtual):	Yes / No	2.	2020 Goa:	Yes / No
3.	2019 Kolkata:	Yes / No	4.	2018 Hyderabad:	Yes / No
5.	2017 Pune:	Yes / No	6.	2016 Chennai:	Yes / No
7.	2015 Jaipur:	Yes / No	8.	2014 Mumbai:	Yes / No
9.	2013 Cochin:	Yes / No	10.	2012 Delhi:	Yes / No

Previous executive committee posts held in IACTA (Enter the tenure also):

1.....

2.....

3.....

4.....

Personal Achievements:

1.....

2.....

3.....

4.....

Details of Secretary:

Name..... Life Membership No.....

Address.....

Proposed by (Two life members of IACTA):

(1) Name.....IACTA membership No.....

Address.....

(2) Name.....IACTA membership No.....

Address.....

Declaration

I.....do hereby declare that the information provided above is the truth, to the best of my knowledge, and am aware that I am likely to be disqualified from contesting if anything is proved wrong.

Date:

Place:

Applicant's signature

For Office use only

Verified the details: Yes / No

Date Received: / /

SEND TO

Email: iactasecretariat@gmail.com

OR

Surface post to: IACTA Office, Anaesthesia House, First Floor, GCDA Shopping Complex, Panampilly Nagar, Cochin - 682 036, Kerala.

(LAST DATE FOR APPLICATIONS TO REACH BY EMAIL OR POST TO IACTA OFFICE: 31.12.2021)

Application for the post of IACTA Executive Council Member-2022

(Tenure: March 2022-Feb. 2024)

Name.....

IACTA Life Membership No..... Date/yr. of Joining IACTA.....

Mobile No.....Email.....

Age..... Date of Birth.....Gender.....

Permanent Address.....

.....

Institution/Hospital address

.....

IACTA national conferences attended in last seven years:

- | | |
|-------------------|--------|
| 1. 2021 (Virtual) | Yes/No |
| 2. 2020 Goa | Yes/No |
| 3. 2019 Kolkata | Yes/No |
| 4. 2018 Hyderabad | Yes/No |
| 5. 2017 Pune | Yes/No |
| 6. 2016 Chennai | Yes/No |
| 7. 2015 Jaipur: | Yes/No |
| 8. 2014 Mumbai: | Yes/No |

Previous executive committee position held in IACTA (please enter the tenure also):

1.....

2.....

Personal Achievements (Optional):

1.....

2.....

Proposed by (Two life members of IACTA):

(1) Name.....IACTA membership No.....

Address.....

..... Mobile.....

(2) Name.....IACTA membership No.....

Address.....

..... Mobile:

... page 2 ...

Applying EC member for IACTA zone:

North / East / West / South / Central

(Click whichever is applicable. For zonal details, please see the election notification)

Declaration

I....., do hereby declare that the information provided above is the truth, to the best of my knowledge, and am aware that I am likely to be disqualified from contesting if anything is proved wrong.

Place:

Date:

Applicant's signatures

For Office use only

Verified the details: Yes / No

Date Received: / /

SEND APPLICATION TO

Email: iactasecretariat@gmail.com

OR

Surface post to: IACTA Office, Anaesthesia House, First Floor, GCDA Shopping Complex, Panampilly Nagar, Cochin 682 036, Kerala.

LAST DATE OF APPLICATION TO REACH IACTA OFFICE OR EMAIL: 31-12-2021