

Election Notification for Office Bearers of IAP, Odisha State Branch - 2026

Dear Members,

Election for the following office bearers for the year 2026 will be held as per the schedule mentioned below. Nomination is hereby invited from the Members.

President Elect:1 Post–1 year.Executive Committee Members:6 Posts (From Six different Zones) – 1 year.North Zone:Mayurbhanj, Balasore, Bhadrak, Kenonjhar.South Zone:Malkangiri, Koraput, Nowarangpur, Rayagada, Gajapati, Ganjam.East Zone-I:Khurda, Puri, Nayagarh.East Zone-II:Jajpur, Kendrpara, Cuttack, Jagatsingpur.West Zone:Sundargarh, Deogarh, Sambalpur, Jharsuguda, Bargarh, Nuapada, Bolangir, Sonepur.Central Zone:Kandhamala, Boudha, Dhenkanal, Anugul, Kalahandi.

The address of the Members will be considered as per the record of the C-IAP. Life / Fellow members of the Central IAP attached to the State Branch are eligible to participate / Vote in the Election. The names of the members included in the CIAP Membership List on 30th June 2025 are the eligible voters of the Electoral College.

Terms & Eligibility Criteria

President Elect.

The term of the President shall be for one year.

The Life member contesting for the post of President Elect should have been a member of the Society for **10 complete years consecutively** as on 1st January 2025 to be eligible to contest for the ensuing election and should have served on the Executive Board or as State Office Bearer or both for a period of 2 complete years before contesting for the post of President Elect. The Chief editors of Indian Pediatrics and Indian Journal of Practical Pediatrics, OJP, Honorary Secretary, Joint Secretary, Treasurer and Organizing Secretary of President term in the office.

Executive Committee Members.

The term of the elected Members to the Executive Committee shall be of a period of one year.

The Life / Fellow member contesting for the post of Executive Board member should have been a member of the Society for **5 complete years consecutively** as on 1st January 2025 to be eligible to contest for the ensuing election. The term of the elected members to the Executive Board other than the Office Bearers shall be of a period of one year, and there shall be a ceiling of three years of continuous membership and there shall be a gap of one year for them to become eligible to contest again for Executive Board membership. The maximum period a member can be a member of the Executive Board after excluding the post of Office Bearer shall be 6 years which shall include the period of Vice Presidentship.

NB: The candidates claiming to be the Executive Body Members before 2006 must produce a declaration that they were the Executive Body Members for the mentioned year which would be endorsed by the General Secretary of the concerned branch to which the member belongs.

All terms of the office and Executive committee shall be from 1st January to 31st December

: Schedule of Election:

| Receipt of Nomination Papers from | 15th July 2025 onwards |
|---|------------------------|
| Last date of receiving nomination by | Dt. 26-07-2025, 5pm |
| Scrutiny of nomination papers from | Dt. 27-07-2025 |
| Declaration of eligible Candidates | Dt. 28-07-2025 |
| Last date of withdrawal by E-mail | Dt. 31-07-2025, 5 pm |
| Declaration of final list of candidates | Dt. 02-08-2025, 6 pm |
| E-Voting If required | Dt. 05-08-2025, 9am to |
| | Dt. 12-08-2025, 5pm |

Counting of vote and declaration of result

Dt. 12-08-2025, 6pm.

The candidate is required to pay nomination fee to be paid by a Demand Draft in favour of "Indian Academy of Pediatrics, Orissa State Branch " and payable at Bhubaneswar & for online transfer: Bank account details: Saving account No: 30017439559, IFSC Code: SBIN 0004414. Address: Fortune Towers Branch, Chandrasekhar Pur, Bhubaneswar 751016.

Nomination fees (nonrefundable) for the post of President Elect. Rs 5,000/- & for the EB Member is Rs 1,500/-. The members desire to apply for above office bearer should send the nomination in proper format, which is available also in IAP Odisha website i.e., <u>www.iaporissa.org</u> (attached under leaf) with duly proposed and seconded by the Fellow / Life members. The nomination should reach the Election officer in the following address by *Post / Courier within Dt. 26-07-2025, 5pm.*

Any Query or help: Address: -Dr. Gopabandhu Nanda Election-Officer, IAP-OSB Tower - 8/303, Z1 Apartment Nandan Kanan Road, Bhubaneswar 751024, Odisha Mobile No. 9437044771. Email: drgbnanda12@gmail.com



SCAN & PAY

Enclosed Nomination Application Form for Office Bearers of IAP Odisha Branch Election – 2026



Election Notification for the Year 2026 Indian Academy of Pediatrics, Odisha State Branch

NOMINATION FORM (PLAESE FILL-UP THE FORM IN BLOCK LETTERS)

| Name of the Office for which | the Candidate is Nominated |
|------------------------------|----------------------------|
| Name of the Candidate (in fu | II) |
| Candidate's Address | |
| | |
| Central Membership No. of t | he Candidate |
| МОВ | E- mail: |
| Name of the Proposer | |
| Proposer`s Address | |
| | |
| Central Membership No. of t | he Proposer |
| МОВ | E- mail: |
| Proposer`s Signature & Date | |
| Name of the Seconder | |
| Seconder`s Address | |
| | |
| Central Membership No. of t | he Seconder |
| МОВ | E- mail: |
| Seconder`s Signature & Date | |
| Demand Draft Details - | Amount |
| | DD /UTR No Date |
| | Bank |

DECLARATION BY THE CANDIDATE

I hereby declare that my consent to this above nomination and fulfil the eligibility criteria is true.

Place: Date:

(Signature of the Candidate)