



Radiological Society of Pakistan

Nomination Form (Election 2024)

Nomination for the post of: _____

Candidate Name: _____

Father/Husband Name: _____

RSP-LM #: _____ CNIC #: _____
(CNIC Copy should be attached)

Res Address: _____

Mobile #: _____ Res Phone #: _____

Work address: _____

Work Phone #: _____ Email Add: _____

Signature#: _____

Proposer Details:

Name: _____

RSP-LM #: _____ CNIC #: _____
(CNIC Copy should be attached)

Mobile #: _____ Email Add: _____

Signature#: _____

Secondar Details:

Name: _____

RSP-LM #: _____ CNIC #: _____
(CNIC Copy should be attached)

Mobile #: _____ Email Add: _____

Signature#: _____

Online payment receipt no. & bank _____

Note:

1. The contestant, proposer, and seconder must be a life / valid full member with good standing of at least 06 months of RSP from the date of election (vide RSP constitution clause no. 5.7).
2. Online payment receipt of the election fee along with the nomination form must be emailed to election commissioner by Wednesday, September 25th, 2024 (4:00 pm) at the email mentioned below.
3. Scanned copy of the national identity card of the candidate, proposer, and seconder should also be emailed with the nomination paper

Brig. Dr. Saleem Raza
Election Commissioner RSP
Email: rspelection2024@outlook.com
0333-5505035