

# **ELECTION COMMISSION, I.M.A. HEADQUARTERS**

I.M.A. House, Indraprastha Marg, New Delhi-110 002 Telephones: +91-11-2337 0009, 23378680

Email: imaelection2020@imaec.org

 Chief Election Commissioner
 Member
 Member
 Member
 Member stationed at Delhi

 Dr Ravi Wankhedkar Dhule (Maharashtra)
 Dr Anilkumar J Nayak Mehsana (Gujarat)
 Dr Brajnandan Kumar Patna (Bihar)
 Dr Vinod Khetarpal (Delhi)

 IMA/EC/2020/
 15.09.2020

 To.

Sub: IMA Elections: 2020-2021& 2021-2022

| Dear Dr.  |               |            |        |             |         |          |         |          |
|---|---------------|------------|--------|-------------|---------|----------|---------|----------|
| We are in receipt of a nomination in your name for the post of  |               |            |        |             |         |          |         | _for the |
| yearin the subjected Elections which was put before the Scrutiny Committee and the same has been <b>provisionally</b> accepted subject to fulfillment of the following requirements:- |               |            |        |             |         |          |         |          |
| Your attention  | n is drawn to | Bye Law 43 | (E) of | Memorandum, | Rules a | and Bye- | Laws of | IMA as   |

"Bye Law 43:E. ELIGIBILITY CRITERIA FOR VARIOUS POSTS

#### For National President and National Vice-Presidents

- 1) Must be a Life Member of IMA for at least 10 years.
- 2) Should have held an office at either State or Branch or IMA Headquarters level.
- Should have no outstanding dues in IMA

For Hony.Secretary General/Hony. Finance Secretary/Dean, IMACGP/Chairman, IMA AMS and Hony. Editor, JIMA.

- 1) Must be a Life Member of IMA for 10 years
- Should have held an office at either State or Branch or IMA Headquarters level.
- 3) Should have no outstanding dues in IMA

### For Chairman/Secretary/Treasurer of HBI

- 1) Must be a life member of IMA.
- Should represent Hospitals with affiliation to HBI.
- 3) Should have no outstanding dues in IMA.

## For All Other Posts

- Must be a life member of IMA, with at least 10 years of membership of IMA
- 2) Must have held the office at either Branch or State level or at IMA Headquarters
- 3) Should have no outstanding dues in IMA."

Candidates contesting for the posts of National President/ National Vice-Presidents/ Hony. Secretary General/ Hony. Finance Secretary/ Dean. IMACGP/ Chairman. IMA AMS/ Hony. Editor. JIMA are requested to kindly provide the following documents duly signed by them to meet the eligibility criteria for their nominations:-

 Photocopies of Life Membership certificate / Plastic Identity Card issued by the IMA HQs. office/ Receipt issued by their local branch in respect of their Life membership fees. (Nominees for the posts of Dean, IMA CGP and Chairman, IMA AMS to additionally provide photocopies of aforesaid proofs of Life membership of the respective wings in accordance with Rule VIII (3) of Rules and Bye-Laws of IMA AMS and Rule 10(3) of Part-II of Constitution of IMA CGP).



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- 2. Proof of their holding an office at either State or Branch or IMA Headquarters level, in original, duly attested by their respective IMA offices.
- 3. A current certificate of no dues from their local branch of IMA on the branch letterhead, in original duly signed by the Hony. Secretary. If Nominee is currently holding the post of Secretary of the local Branch of IMA, the certificate to be signed by the President / Hony. Finance Secretary/ Treasurer of the local branch.

<u>Candidates contesting for Chairman/Secretary/Treasurer of HBI</u> are requested to kindly provide the following documents duly signed by them to meet the eligibility criteria for their nominations:-

- 1. Photocopies of Life Membership certificate/ Plastic Identity Card issued by the IMA HQs. office/ Receipt issued by their local branch in respect of their Life membership fees.
- 2. Proof of representing Hospitals with affiliation to HBI.
- **3.** A current certificate of no dues from their local branch of IMA on the branch letterhead, in original duly signed by the Hony. Secretary. If Nominee is currently holding the post of Secretary of the local Branch of IMA, the certificate to be signed by the President / Hony. Finance Secretary/Treasurer of the local branch.

<u>Candidates contesting for all other posts</u> are requested to kindly provide the following documents duly signed by them to meet the eligibility criteria for their nominations:-

- 1. Photocopies of Life Membership certificate/ Plastic Identity Card issued by the IMA HQs. office/ Receipt issued by their local branch in respect of their Life membership fees. Pl. also note that for these posts, your membership in IMA should be at least 10 years. (Nominees for various posts of CGP and IMA AMS to additionally provide photocopies of aforesaid proofs of Life membership of the respective wings in accordance with Rule VIII (3) of Rules and Bye-Laws of IMA AMS and Rule 10(3) of Part-II of Constitution of IMA CGP).
- 2. Proof of their holding an office at either State or Branch or IMA Headquarters level, in original, duly attested by their respective IMA offices.
- 3. A current certificate of no dues from their local branch of IMA on the branch letterhead, in original duly signed by the Hony. Secretary. If Nominee is currently holding the post of Secretary of the local Branch of IMA, the certificate to be signed by the President / Hony. Finance Secretary/Treasurer of the local branch.

#### **Consent Letter and Demand Draft:**

Your attention is also drawn to Note-1 & Note-1(a) under Bye Law 43 and Rule 30-A of the Memorandum, Rules and Bye- Laws of the Indian Medical Association as mentioned as under:-

Note 1 Any member desiring to contest, must inform the Election Commission about his/her consent in writing on printed letter head alongwith a nomination fee (non refundable) of Rs.1 lac for the post of National President Elect.; Rs.50,000/- for the post of National Vice President & Honorary Secretary General and Rs. 30,000/- for all other posts or convey his/her withdrawal on or before 15<sup>th</sup> of October. Non receipt of any communication/nomination fee shall be interpreted as withdrawal of the candidate. \*\*



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Note 1(a) All payments will be received in the Election Commission office through Bank Demand Draft / Pay Order only. No Cash / Cheque to be accepted \*\*\*

\*\* Amendments duly approved by the Central Working Committee of IMA at its 213th meeting held at New Delhi on April 11 & 12, 2015 duly ratified by the Central Council at its 76th meeting held at New Delhi on December 27 & 28, 2015

As per the decision of the Election Commission duly approved by the Central Working Committee of IMA at its 207th meeting held at Mumbai, Maharashtra on April 4, 2012, duly ratified by the Central Council at its 73rd meeting held at Kanyakumari, T.N. on December 27-28, 2012

<u>"Rule 30-A:</u> All office bearers of the Association will hold office for one particular post for a maximum of one term of two year (except National President-Elect and National Vice Presidents, Dean, IMA CGP, Chairman, IMA AMS, Director, IM AAKN Sinha Instt. and Editor, Journal of IMA who shall be elected for one term of one year)"

You are requested to kindly send your consent/ withdrawal <u>addressed to Chief Election</u> <u>Commissioner</u> along with proofs of fulfilling above eligibility criteria for the post for which you have been nominated and <u>nomination fee</u> for the same as mentioned above to be remitted only through <u>Pay Order/ Demand Draft</u> drawn in favour of 'Indian Medical Association (HQs.)', payable at 'New Delhi' so as to reach the office of the Election Commission on or before the last date of submission of the same, i.e. Thursday, 15<sup>th</sup> October 2020 by 5.00 P.M. at the address as mentioned on the letterhead.

Non receipt of your response to this communication on or before **Thursday**, **15**<sup>th</sup> **October 2020 by 5 PM** will be interpreted as your withdrawal.

Thanking you,

Yours sincerely,

### (Dr. Ravi Wankhedkar)

Chief Election Commissioner

Note: Please read all the above instructions carefully while sending your documents.

#### **Checklist of documents:**

- Consent / Withdrawal letter on your personal letterhead
- Photocopy of Life Membership Certificate of IMA HQs
- Proof of holding an office at either State or Branch or IMA Headquarters level.
- No dues certificate in IMA
- Requisite Pay Order / Demand Draft in favour of Indian Medical Association (HQs.)
- Proof of representing your Hospital with affiliation to HBI where applicable
- Proof of your membership with IMA CGP/IMA AMS where applicable
- Send your complete application by Speed Post/Courier/By Hand.