NOMINATION FORM – AGOI EXECUTIVE COMMITTEE ELECTION 2026

Name:	
Designation:	
Institution:	
Full work address:	
Post Applied for:	
Cell #:	**E-mail id:**
AGOI membership #:	**Year membership enrolled:**
Signature:	**Date:** **Place:**
Proposed by:	
Name:	
Cell #:	**E-mail id:**
AGOI membership #:	**Year membership enrolled:**
Signature:	**Date:** **Place:**
Seconded by:	
1. Name:	
Cell #:	**E-mail id:**
AGOI membership #:	**Year membership enrolled:**
Signature:	**Date:** **Place:**
2. Name:	
Telephone/ Cell #:	**E-mail id:**
AGOI membership #:	**Year membership enrolled:**
Signature:	**Date:** **Place:**
Note: Mention Zone for Executive Member post.	**Zone:**
***Incompletely filled forms in any manner are liable for disqualification.**	