 **U.P. Nursing Home Association**  **President: Dr. Ajit saigal Regd. No. 679/03-04 Secretary Dr. Devesh Maurya Mob.** 09415204489  **Mob. 9839179775**

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| **Founder President Dr. Saroj Srivastava**  **Patron: Dr. Chandrawati**  **Dr. S. K. Bhasin**  **Vice President**  **Dr. G. C. Makker ( Lucknow)**  **Dr. J. Bhamri (Zone-1)**  **Dr. Sushil Kr. Sinha ( Zone-2)**  **Dr. Pushpendra Panwar (Zone-3)**  **Dr. Kusum Chandra ( Zone -4)**  **Jt. secretary Dr. Gayatri Singh (Lucknow) Dr. Raj Kr. Srivastava (Zone – 1)**  **Dr. Anel Soni ( Zone-2)**  **Dr. P.K. jain (Zone-3)**  **Dr. Anil Kedia (Zone-4)**  **Treasurer**  **Dr. R.C. Singh (Lucknow)**  **City Representatives Aligarh Dr. Sanjay Garg Allahabad Dr. Alok Mishra Agra Dr. R.N. Goel Azamgarh Dr. Anand Singh Amroha Dr. S.K. Chaudhery Barhalganj Dr. Aruna Agrawal Bareilly Dr. Rajeev Agrawal Barabanki Dr.Yogesh Bijnore Dr. Sudhanshu sharma Bahraich Dr Vijay Kr. agrawal Bulandshaher Dr. Nidhi sharma Bhadoi Dr. A.K. Gupta Basti Dr. Deepak Srivastava Faizabad Dr. Afroz Khan Farukhabad Dr. A.K.Gupta Gonda Dr. Jyotsana Shukla Gorakhpur Dr. Ajay Shukla Ghaziabad Dr. P.K. Jain Hathras Dr. Deepak Sharma Hapur Dr. Dushyant Bansal Jaunpur Dr. Tej Singh Jhansi Dr. Mukesh Naja jain Kanpur Dr. Sandeep Rohatgi Lakhimpur Dr. Dharmendra Lucknow Dr. Anup Agrawal Muzaffarnagar Dr. M.K. maheshwari Meerut Dr. Anis Khan Mau Dr. M. A. Nomani Mirzapur Dr. A.K. Srivastava Muradabad Dr. Deepak Rastogi Mathura Dr. Mukesh jain**  **Noida Dr. N.K. Sharma Pilibheet Dr. Tarun Sethi Raibareilly Dr. A.S. Verma Saharanpur Dr Ashok Gupta Shahjahanpur Dr. Vikas Tandon Sitapur Dr. G.P.Gupta**  **Shamli Dr. Pradeep Gaur Varanasi Dr. Ajit Saigal Manager Md. Zubair Khan +91-9795017000 +91-9305472266** | Nomination form for UPNHA Executive For Year 2018 **Last date of nomination form receiving is 30th Oct. 2017,) Last date of withdraw is 05th Nov. 2017 05:00 PM.) Election on 12th Nov. 2017**  **\* Mandatory fields**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | \*Name of the nominee | In Block letters | | | | | \*Full Postal Address with Pin code no. |  | | | | | \*e-mail id |  | | | | | \*Mobile no. |  | | Land line no. |  | | \*Post for which applied | |  | | | | \*Date & Signature of contestant | |  | | |   1-\*Proposer name…………………………………………………City…………………………….Signature……………  2-\*Proposer name…………………………………………………City…………………………….Signature……………  \*Approved & Recommended by Branch name………………………………………………………………………  \*President/Secretary Name…………………………………………Signature& Stamp……………………………   |  |  |  |  | | --- | --- | --- | --- | | 1 Post | For President | No Reserved |  | | 5 Post | For Vice President | 1 Reserved for Lucknow. | 1 from each zone | | 5 Post | For Joint Secretary | 1 Reserved for Lucknow. | 1 from each zone | | 1 Post | For Treasurer | Reserved for Lucknow. |  |   **Note: - Form will be rejected If 1- Branch has dues for 2017. 2- Contestant is not present in GBM at Agra.**  **For office use:- Form Rec. on ………………………Checked by………………………………………………………… ………… Approved/ Reject Remarks:-** |

**Office: - L.N.H.A. Blood & Components Bank, B-72 (A), Nirala Nagar Lucknow-226020 Ph. - 0522 4070185 Tel. fax 0522-4070285 E- mail-upnha@rediffmail.com,upnhalucknow@gmail.com, web site:- upnha.org.**