



Pakistan Association of Dermatologists

PAD Elections – 2020

(Nomination Form)

Paste your latest
picture here

Name of Candidate: _____

PAD No. _____

Qualification: _____

PMDC No. _____

Post Applied for: _____

Residence Address: _____

Contact No. _____

Email Address: _____

Signature of candidate

Proposed By:

Name: _____

PAD No. _____

Signature _____

Seconded By:

Name: _____

PAD No. _____

Signature: _____

Dr. Doctor Khan Wazir
General Secretary, PAD