ASSOCIATION OF CONSERVATIVE DENTISTRY AND ENDODONTICS OF KARNATAKA
ACE - KARNATAKA

Nomination Form

Name of the post proposed | |

Candidate name _____

ACE-Karnataka Membership No. _____

Address _____

_____

Mobile: _____ Email: _____

Proposer

I, Dr _____ ACE-Karnataka Membership No. _____ hereby propose the name of Dr _____ for the above-mentioned post.

Signature of the Proposer

Consent of the Candidate

I Dr _____ hereby accept the above nomination for the post of _____ for the year 2025-26.

Place:

Date: Signature of the candidate

Note: Nomination form should reach the mail box of ACE-K on or before midnight of 25th July 2025. (kace09012019@gmail.com) Only Soft copy or scanned documents. No hard copies.

President: Dr. Ramya Raghu- 9242445272
Vice President: Dr. Mohan Thomas Nainan- 9845255763
Secretary: Dr. Mithra N. Hegde- 9845284411
Treasurer: Dr. Aditya Shetty- 9886189087

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