



## Candidate Nomination Form for APBEE Vacant Post 2024-26



Please fill this form and send scan copy to [apbeevp20242026@gmail.com](mailto:apbeevp20242026@gmail.com) for nomination.

*(Please follow the instructions given with this form carefully. All details need to be filled.)*

Use **BLUE Pen Only**

1.	Name																																									
2.	Designation																																									
3.	Date of Joining the Deptt.																																									
4.	Current Place of Posting and it's Date																																									
5.	Zone																																									
6.	APBEE Member ID																																									
7.	Phone No.																																									
8.	Email id																																									
9.	Directorate (tick any one)	AIR <input type="checkbox"/> DD <input type="checkbox"/>																																								
10.	Nomination for Post (s)* (tick for the posts wants to apply)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="5" style="text-align: center;">Zonal Posts</th> </tr> <tr> <td style="width: 20%;">NZ Joint Secretary (Women) <input type="checkbox"/></td> <td style="width: 20%;">EZ Zonal President <input type="checkbox"/></td> <td style="width: 20%;">EZ Joint Secretary technician <input type="checkbox"/></td> <td style="width: 20%;">SZ Joint Secretary EA <input type="checkbox"/></td> <td style="width: 20%;">SZ Joint Secretary technician <input type="checkbox"/></td> </tr> <tr> <th colspan="5" style="text-align: center;">State Secretary</th> </tr> <tr> <td>Andman nicobar <input type="checkbox"/></td> <td>Asam <input type="checkbox"/></td> <td>Goa <input type="checkbox"/></td> <td>karnataka <input type="checkbox"/></td> <td>Kerala <input type="checkbox"/></td> </tr> <tr> <td>Manipur <input type="checkbox"/></td> <td>Meghalaya <input type="checkbox"/></td> <td>Mizoram <input type="checkbox"/></td> <td>Nagaland <input type="checkbox"/></td> <td>Odisha <input type="checkbox"/></td> </tr> <tr> <td>Tamilnadu &amp; Punduchery <input type="checkbox"/></td> <td>Tripura <input type="checkbox"/></td> <td>Telangana <input type="checkbox"/></td> <td>West Bengal <input type="checkbox"/></td> <td></td> </tr> <tr> <th colspan="5" style="text-align: center;">Joint State Secretary</th> </tr> <tr> <td>Delhi-2 <input type="checkbox"/></td> <td>Delhi-3 <input type="checkbox"/></td> <td>Delhi-4 <input type="checkbox"/></td> <td>Madhya Pradesh <input type="checkbox"/></td> <td>Uttar Pradesh <input type="checkbox"/></td> </tr> </table>	Zonal Posts					NZ Joint Secretary (Women) <input type="checkbox"/>	EZ Zonal President <input type="checkbox"/>	EZ Joint Secretary technician <input type="checkbox"/>	SZ Joint Secretary EA <input type="checkbox"/>	SZ Joint Secretary technician <input type="checkbox"/>	State Secretary					Andman nicobar <input type="checkbox"/>	Asam <input type="checkbox"/>	Goa <input type="checkbox"/>	karnataka <input type="checkbox"/>	Kerala <input type="checkbox"/>	Manipur <input type="checkbox"/>	Meghalaya <input type="checkbox"/>	Mizoram <input type="checkbox"/>	Nagaland <input type="checkbox"/>	Odisha <input type="checkbox"/>	Tamilnadu & Punduchery <input type="checkbox"/>	Tripura <input type="checkbox"/>	Telangana <input type="checkbox"/>	West Bengal <input type="checkbox"/>		Joint State Secretary					Delhi-2 <input type="checkbox"/>	Delhi-3 <input type="checkbox"/>	Delhi-4 <input type="checkbox"/>	Madhya Pradesh <input type="checkbox"/>	Uttar Pradesh <input type="checkbox"/>
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Proposer Sign and Name/Details

(Name: \_\_\_\_\_)

Office: \_\_\_\_\_

Post: .....

Ph: \_\_\_\_\_)

Seconder Sign and Name/Details

(Name: \_\_\_\_\_)

Office : .....

Post : \_\_\_\_\_

Ph: \_\_\_\_\_)

Candidate Sign.

**Self-Declaration**

I, \_\_\_\_\_, working as \_\_\_\_\_ in the office \_\_\_\_\_ hereby declare that the information provided in this nomination form is accurate and complete to the best of my knowledge. **I affirm that I am a current and active member of APBEE and I have done the payment of membership fee and all three round contribution to APBEE.** I am not a member of any other cadre-based sister Association/ Joint platform where APBEE is not a constituent for the period 2024-2026.

Date: \_\_\_\_\_

Signature

Place: \_\_\_\_\_

(Name: \_\_\_\_\_)

## Instructions

1. This nomination form contains two-part, a) **Details of the candidate** b) **Self declaration**.
2. Both **Candidate details** and **Self-declaration** have to be **duly filled and signed**, incomplete form will be rejected.
3. It is mandatory for all members filling willingness form must complete their payment of membership form and all three round contribution.
4. Only **scanned copy of Duly filled and signed nomination form and Self-declaration**, sent to the given email id: [apbeevp20242026@gmail.com](mailto:apbeevp20242026@gmail.com) is accepted, all other means will be rejected.
5. Subject of email should be : “**Nomination for the Post \_\_\_\_\_ : APBEE Vacant Post 2024-26.**”
6. For Joint State Secretary post : Nomination should be filed only if members in that state are more than 50.
7. Paste your latest **photograph**.
8. For Member ID Please visit the page <https://www.apbee.in/members/verified.php>.
9. **Last day to apply is 20<sup>th</sup> November 2024, 6PM. Please note it.**
10. **Final list of nominated candidate will be published by 21<sup>st</sup> Nov 2024, 3PM.**

