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| --- | --- | --- | --- | --- |
| **Nomination Details:** | | | | |
| Nominee’s Full Name \* : |  | | | |
| Gender \*: (Male / Female) |  | | Date of Birth : (DD/MM/YYYY) |  |
| Residence Address \* : |  | | | |
| Email Address \*: |  | | | |
| Home Tel: |  | | | |
| Mobile Nos.\*: |  | | | |
| Nomination For \*: |  | Suvarna Mahotsav Paritoshik | | |
|  | Amrut Mahotsav Paritoshik | | |
|  | Shatabdi Mahotsav Paritoshik | | |
|  | Shatabdi Mahotsav Suvarnachandrak | | |
|  | Shatabdi Mahotsav Vishistha Sanman | | |
| Brief Details of Nominee : (Attach more details in separate documents) |  | | | |
| **Your Details:** | | | | |
| Your Name \*: |  | | | |
| our Contact Nos. \*: |  | | | |
| Your Email Address: |  | | | |
| Any other Remarks: |  | | | |