



MALAYSIAN PHYSIOTHERAPY ASSOCIATION

Nomination Form

Candidate Details

Name
Email
Contact Number
Membership number

Name	
Email	
Contact Number	
Membership number	

Nomination for
(Please Tick max 2 only)

President
Vice President
Secretary
Vice Secretary
Treasurer
Exco

President
Vice President
Secretary
Vice Secretary
Treasurer
Exco

Please attach :-
(Tick if you have attached)

Profile picture
Short Profile
Manifesto (for
president post)

Profile picture
Short Profile
Manifesto (for president post)

Propose by

Name
Email
Phone No
Membership Number

Name	
Email	
Phone No	
Membership Number	

Declaration :

I (Candidate Name) _____ & Proposer (Proposer Name) _____ declare that above details are correct. The candidate is eligible to run for election. At this point of submission, candidate is not committed in criminal offense, bankruptcy, and not in court trials for negligence and not convicted in medico-legal cases. Candidate shall be an active mpa member (current year 2021)

Candidate Signature

Candidate Name

Date

Proposer Signature

Proposer Name

Date

* Please send nomination form via Email to mpa.secretariat2020@gmail.com for validation