



TNAI Karnataka State Branch Election 2026

Date: 04th September, 2026 (Friday)

Time: 11:00 am to 3:00 pm (10 am to 11 am - General Body Meeting. 11 am to 3 pm - Polling)

Venue: Hotel Pai Vista Doora, 35/A, Bangalore Nilgiri Rd, behind Bhima Jewellery, Nazarbad, Mysuru, Karnataka 570001

Please find below the election schedule, including the polling booths and their respective locations:

Sr. No.	Date & Day	Polling Booth & Place	Events
1	4th September (Friday)	1. Mysuru Address: Hotel Pai Vista Doora, 35/A, Bangalore Nilgiri Rd, behind Bhima Jewellery, Nazarbad, Mysuru, Karnataka- 570001	Open Election - Nomination submission for vacant posts & Ballot paper Election
2	6th September (Sunday)	2. Bagalkot Address: Hotel Haripriya, APMC Circle, near DC Office, A P M C Yard, Bagalkot, Karnataka 587103	Ballot paper Election
3	8th September (Tuesday)	3. Ballari Address: Hotel Allum Gokulam Park, A. D. City, by pass of, Bellary - Uravakonda - Anantapur Rd, beside Allum Bhavan, Venkateswara Nagar, Bandimot, Bellary, Karnataka 583101	Ballot paper Election
4	10th September (Thursday)	4. Bengaluru Urban Address: Hotel CRN Canary, 274 Subedar Chetram Rd, Gandhi Nagar, Majestic, Bengaluru, Karnataka 560009	Ballot paper Election Final counting & Declaration of results

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(Open Election) Nomination Form

Note: Please fill the details in **BLOCK** letters only

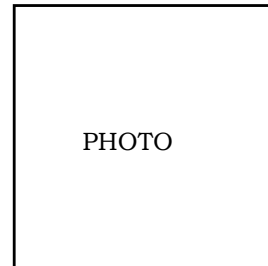
Name of the post: _____

Name of the Candidate: _____

Designation of the candidate: _____

(Please attach the proof of designation)

TNAI No. of the Candidate: _____



Address:	
Residence:	Official:
Mobile No.	Mobile No.
Email id (In Capital Letters):	Email Id (In Capital Letters):

Consent

1. I _____ hereby give my voluntary consent for the post of _____ TNAI Karnataka State Branch.

Declaration

1. I hereby declare that if elected I am willing to serve the Association to the best of my abilities and efforts.
2. I declare that, I am not expelled from the position of any state/UT branches, not involved in litigation with the association and not a part of any dissolved state/UT branch.
3. I also declare that I am not holding any office positions in parallel Nursing Organizations (trade unions, other associations or societies).
4. I also declare that, I am not holding the highest nursing position (Education/ Service) in the State (Government/ Regulatory/ Statutory bodies)

Signature of the contestant: _____**Place** _____ **Date** _____

Particulars	Proposer	Seconder
Name:		
TNAI Number:		
Signature:		
Address:		
Mobile Number:		
Email Id (In Capital Letters):		

Note:

1. The contestant, Proposer and Seconder (all three) shall submit the self- attested photocopy of the TNAI Life Membership photo ID Card.
2. The information and signature given in the nomination sheet shall match with the TNAI records to consider as valid nominations.