PAEDIATRIC SOCIETY OF GHANA (PSG)

P.O. Box GP 498, Department of Child Health, Korle Bu Teaching Hospital, Accra
Website: www.pedsgh.com | Electoral Committee Email: psg.gh.ec@gmail.com

NATIONAL EXECUTIVE COMMITTEE ELECTIONS 2027

CANDIDATE NOMINATION FORM

Issued by the PSG Electoral Committee | Pursuant to Article VI & Bye-Law 2 of the PSG Constitution (2020)

Instructions: Please complete all sections clearly in block letters or type directly into the fields. Completed forms, along with supporting proof of Good Standing and your 200-word personal/motivational statement, must be downloaded from www.pedsgh.com and submitted to psg.gh.ec@gmail.com on or before 31st December, 2026.

SECTION 1: EXECUTIVE POSITION CONTESTED (Tick One Only)

☐ **1. President (Full Member)**	☐ **5. Treasurer / Financial Secretary (Full Member)**
☐ **2. Vice President (Full Member)**	☐ **6. Male Executive Member (Full/Associate Member)**
☐ **3. General Secretary (Full Member)**	☐ **7. Female Executive Member (Full/Associate Member)**
☐ **4. Assistant General Secretary (Full Member)**	

SECTION 2: CANDIDATE PERSONAL & PROFESSIONAL DETAILS

Full Name (Title, Surname, Other Names):	
Gender:	☐ Female ☐ Male
PSG Membership Category:	☐ Full Member ☐ Associate Member
Year Joined:	
Regional Branch Affiliation:	
Professional Qualification(s) & Specialty:	
Regulatory Body & Registration Number (e.g., MDC / NMC):	
Current Institution / Place of Work & Rank:	
Contact Details (Mobile Phone & Email Address):	Tel: Email:

SECTION 3: CONSTITUTIONAL ELIGIBILITY & GOOD STANDING CHECKLIST

Per Article III, Article VI (Section IV.3), and Bye-Laws 1 & 7 of the 2020 PSG Constitution, candidates must satisfy all applicable criteria below. Please tick to confirm compliance and attach supporting evidence where required:

Constitutional Criterion	Requirement Details	Confirm
1. Paid-Up Annual Dues (Bye-Law 1a.i)	Fully paid-up annual membership dues with no outstanding arrears.	☐YES ☐ NO
2. AGM Attendance (Bye-Law 1a.ii)	Attended at least one (1) Annual General Meeting (AGM) within the last three (3) years. Specify year(s): _____	☐YES ☐NO
3. Branch Participation (Bye-Law 1a.iii)	Attended at least two (2) Regional Branch meetings per year. Specify branch & dates: _____	☐YES ☐NO
4. Regulatory Standing (Article III, Sec. III.5)	Registered and in Good Standing with the Ghana Medical & Dental Council (GMDC) or relevant Professional Regulatory Body.	☐YES ☐NO
5. Category Qualification (Article VI, Sec. IV.3)	• President, Vice President, Secretary, Asst. Secretary, Treasurer: Must be a Full Member (Accredited Paediatrician). • Male & Female Executive Members: Full/Associate Member in Good Standing.	☐YES ☐NO
6. Term Limit Compliance (Bye-Law 7a)	Have not served two (2) consecutive terms in the specific executive office being contested.	☐YES ☐NO

SECTION 4: CANDIDATE PERSONAL / MOTIVATIONAL STATEMENT (MAXIMUM 200 WORDS)

Outline your vision for the role, leadership experience, proposed initiatives, and how you plan to advance the objectives of the Paediatric Society of Ghana if elected. Strictly not more than 200 words (may be circulated to members prior to voting).

Total Word Count: _____ / 200 words max

SECTION 5: NOMINATION ENDORSEMENTS (PROPOSER & SECONDER)

We, the undersigned Members in Good Standing of the Paediatric Society of Ghana, hereby nominate and second the above-named candidate for the stated Executive Committee position:

Particulars	Proposer (Member in Good Standing)	Seconder (Member in Good Standing)
Full Name:		
PSG Membership No.:		
Regional Branch:		
Phone & Email:		
Signature & Date:		

SECTION 6: CANDIDATE DECLARATION & CONSENT

I, _____, hereby accept my nomination for the office indicated in Section 1. I solemnly declare that all information provided in this form and my personal statement is true and accurate, that I satisfy all constitutional and Bye-Law requirements to contest this position, and that I agree to abide by the PSG Constitution (2020) and the Electoral Committee guidelines.

Candidate Signature: _____	**Date: _____**

FOR OFFICIAL USE ONLY – PSG ELECTORAL COMMITTEE VETTING

Date & Time Received:	Received By (Name & Role):
Good Standing Verification:	☐ Dues Paid ☐ AGM Attendance Verified ☐ Branch Attendance Verified ☐ Regulatory Standing Verified
Vetting Outcome:	☐ CLEARED TO CONTEST ☐ DISQUALIFIED / INELIGIBLE (State reason below)
Remarks & Electoral Chair Signature:	Signature: _____ Date: _____