## Proforma for Execution of Bond by the candidate for availing of MBBS seat in government medical college in West Bengal

(to be executed on Non-judicial Stamp Paper of denomination Rs. 100/- or above and notarized)

| I,Mr. / Ms. / Mrs                        |                 | ,                 | son of / daugh  | iter of / wi | ife of |
|--|-----------------|-------------------|-----------------|--------------|--------|
| Mr. / Ms. / Mrs                          |                 |                   |                 |              |        |
| Dist                                     | Pin             | having bee        | en selected for | undergrac    | luate  |
| medical degree (MBBS) course at          |                 |                   |                 |              |        |
| do hereby affirm and solemnly declare    | that I shall de | eposit a sum of   | Rs. 1,00,000/   | - (Rupees    | One    |
| Lakh) only as prescribed by the G        | overnment of    | West Bengal       | in pursuance    | of G.O.      | No.    |
| HF/O/MERT/1542/Admn/ME/STM-28-10         | /2(10) dated 2  | 5.10.2010, if I   | resign/disconti | nue the co   | ourse  |
| before completion of tenure of the cour  | se.             |                   |                 |              |        |
| Moreover, it shall be obligatory on my p | art to observe  | or perform all to | erms and condi  | tion presc   | ribed  |
| by the Government for the aforesaid pu   | rpose.          |                   |                 |              |        |
| The original documents which are         |                 | -                 |                 |              | -      |
| will not be returned to me unless and    |                 |                   |                 |              |        |
| only to the authority of                 |                 |                   |                 |              |        |
| This bond is imposed as there will be    | no further pr   | ovision on beh    | alf of the W.E  | 3.M.C.C. (   | West   |
| Bengal Medical counseling Committee)     | , Department    | of Health & Fa    | mily Welfare, ( | Governme     | nt of  |
| West Bengal, to allot another candidate  | to the same se  | eat on completion | on of the admis | sion proce   | SS.    |
| Signature of the candidate:              |                 |                   |                 |              |        |
| Name of the candidate:                   |                 |                   |                 |              |        |
| Date:                                    | Place:          |                   |                 |              |        |
| Signature of witness:                    |                 |                   |                 |              |        |
| Name of witness:                         |                 |                   |                 |              |        |
| Residential address of witness:          |                 |                   |                 |              |        |
| Date:                                    | Place:          |                   |                 |              |        |