

JOINING LETTER OF DNB CANDIDATE

To,
The Medical Director,
Jagjivan Ram Hospital, Western Railway, Mumbai.
(Through proper channel)

Sub: Joining report – For Course- **DNB** (**Primary/ Post Diploma/SS**).

Ref: NBE Letter No. dated

Roll No. **YEAR -** **Rank**

Respected Sir/Madam,
I, Dr. _____ have reported to join as a DNB trainee in
above mentioned course for a period of two/three years on _____. I have deposited at
NBE / enclosed DD of **Rupees** **only** towards the **First year**
tuition fees as per requirement.

Date:

.....
Signature of Candidate

Address

Mob No Email ID

All relevant certificates as per NBE Guideline/ Handbook verified. **Forwarded to DNB I/C & MD.**

.....
Signature of Head of Department

Candidate has deposited fee amount Rs / DDNo/ Txn No

Dated Bank Name at JRH/ at NBE. He/ She may be
permitted to join the DNB Course with effect from

.....
Signature of DNB In-charge

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- List of Document submitted: 1. Allotment letter
2. Medical fitness Certificate
3. Declaration form & Instructions form signed
4. Copies of all relevant Documents (Total No. only)

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Signature of Dealing clerk

Permitted to join the DNB Course at JRH with effect from _____.

MEDICAL DIRECTOR