

JOINING LETTER OF DNB CANDIDATE

To,

The Medical Director,

Jagjivan Ram Hospital, Western Railway, Mumbai.

(Through proper channel)

Sub: Joining report for Course- **DNB** (Diploma/Primary/Post Diploma/SS)

Ref: Allotment Letter No. dated

Roll No. YEAR - Rank

Respected Sir/Madam,

I, Dr. _____ have reported today on to join as a DNB trainee in above mentioned course for a period of two/three years. I have deposited fee amount Rs /DD No/Txn No dated Bank Name to NBEMS/JRH towards the **First year** tuition fees as per requirement. I declare that I am not pursuing a DNB or any other post graduate course currently.

Address

Mob No Email ID

DOB Medical Council Registration no

Date:

.....
Signature of Candidate

He/ She will be doing the thesis under guidance of Dr / NA.

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

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Signature of Head of Department

He/ She may be permitted to join the DNB Course with effect from

.....
Signature of DNB In-charge

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/OS

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

MEDICAL DIRECTOR
Jagjivan Ram Railway Hospital, WR, Mumbai