ANNEXURE A – FET 2018

Format of Joining Report to be furnished by all FNB Candidates who have been allotted FNB seats at NBE accredited Medical Colleges/Institutions/Hospitals for FNB training, through NBE FET – Centralized Counseling – 2018 admission session.

NOTE: Ensure that Joining Report MUST be issued on an OFFICIAL LETTERHEAD under signature and stamp of DEAN/ PRINCIPAL/MEDICAL SUPERINTENDENT/ HEAD OF THE INSTITUTION/DIRECTOR ONLY, as per the prescribed format.

Office Dispatch Number:

Date of Issue:

The Executive Director National Board of Examinations (Ministry of Health & Family Welfare, Govt. of India) Ansari Nagar, Mahatma Gandhi Marg (Ring Road) New Delhi-110029

Sub: Furnishing of Joining Report for Fellowship Programme.

Sir,

lt	is	certified	that	Dr	
Son/	Daughte	r/Wife of			who has appeared
in N	BE FET	February,	2018 co	nducted b	y National Board of Examinations vide Roll
Num	ber		has	reported f	or joining FNB course at our NBE accredited
Medi	cal Coll	lege/Institut	ion/Hosp	ital on	(Date of Joining FNB training).
He/s	he has s	scored	_ rank in	NBE FET	- Centralized Counseling for 2018 admission
sess	ion as pe	er the seat a	allotment	letter rece	ived from NBE.

His/Her	original	doc	cuments l	have	been	verified	for	their	genu	inen	ess d	& authen	ticity.
He/She	may	be	register	ed 1	for F	ellowship	P	rogram	nme	in	the	specialty	/ of
	_			w.	e.f					(Da	ate of	Joining	FNB
Training).											-	

It is also certified that the candidate will be made to work during the entire FNB training as a resident doctor strictly in accordance with the leave guidelines of NBE.

Yours sincerely

Signature_____

Name & Designation_____

STAMP OF DEAN / PRINCIPAL / MEDICAL SUPERINTENDENT / HOI