

ANNEXURE 'A' – DNB-SS 2019

Format of Joining Report to be furnished by all DNB Candidates who have been allotted DNB seats at NBE accredited Medical Colleges/Institutions/Hospitals for DNB training, through DNB-SS – Centralized Counseling –2019 Admission Session

NOTE: Ensure that Joining Report MUST be issued on an OFFICIAL LETTER HEAD 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: / / 2019

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 DNB Super Specialty course.

Sir,

It is certified that Dr. _____ Son/Daughter/Wife of _____ who has appeared in DNB-SS 2019 conducted by National Board of Examinations vide Roll No. _____ has reported for joining DNB course at our NBE accredited Medical College/Institution/Hospital on _____ (Date of Joining DNB training). He/she has scored _____ rank in NEET-SS for 2019 admission session as per the seat allotment letter received from NBE.

His/Her original documents have been verified for their genuineness & authenticity. *It is also certified that this candidate is Eligible for admission to DNB-SS as per NBE guidelines published in the Information Bulletin for NEET-SS 2019.*

He/She may be registered for DNB Super Specialty course in the specialty of _____ w.e.f. _____ (Date of Joining DNB-SS Training).

He/she will be doing his/her thesis under guidance of _____ (Name & designation of thesis guide) as per prescribed NBE guidelines for thesis submission.

It is also certified that the candidate will be made to work during the entire DNB (Super Specialty) 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