

## DECLARATION

I ✓ Bhabani Prasad Nanda.....OFS (P)  
✓ Son/Daughter/Wife of Pratap Chandra Nanda declare that  
the following facts are true and correct to the best of my  
knowledge and belief for the purpose of recording in my  
Service Book.

1. Present Address of correspondence:-

At- Medical campus, Bantala  
Po- Jananpur  
Dist- Angul  
PIN- 759129

2. Permanent Address:-

At- Medical campus, Bantala  
Po- Jananpur  
Dist- Angul  
PIN- 759129

3. Mark of Identification:-

i) Black mole under nose

ii) Scar in face near right ear (2cm approx.)

4. Height:- 168 cm

Place :- Bhubaneswar

Date :- 10.01.2023

Bhabani Prasad Nanda  
Signature

**STATEMENT OF TRUTH**  
**(UNDERTAKING)**

I Bhabani Prasad Nanda.....(full  
name) ✓ Son/Daughter/Wife of Pratap Chandra Nanda.....(full  
name), the undersigned, hereby declare:

- 1) That the information contained in the documents submitted by me to MDRAFM stand true to the original documents. I undertake to provide documentary evidence as and when required.
- 2) That I am aware that the lack of veracity of the information or distortion of the facts and documents will entail the invalidity of the merits affected and that I may be liable for legal responsibility/my joining in this service may be liable for cancellation.

I declare that the foregoing facts are true and correct to the best of my knowledge and belief.

Bhabani Prasad Nanda

Signature

Date- 10.01.2023

Place- Bhubaneswar

FORM OF DECLARATION (APPLICABLE TO BOTH SEXES)

✓  
Shri/Smt/Kumari Bhabani Prasad Nanda  
declares:

- i) That I am unmarried / a widower / a widow.
- ii) That I am married and have only spouse living.
- iii) That I have entered into and contracted a marriage with another person having a living spouse. Application for grant of exemption is enclosed.
- iv) That I have entered into and contracted a marriage with another person during the life time of my spouse. Application for grant of exemption is enclosed.

I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment. I shall be liable to be dismissed from service.

Bhabani Prasad Nanda

Signature