



MEDINIRAI MEDICAL COLLEGE & HOSPITAL PALAMU, JHARKHAND

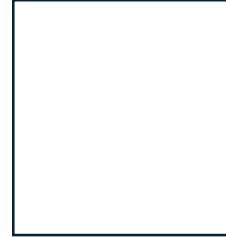


DEPARTMENT OF ANATOMY

BODY DONATION FORM

(Declaration of Bequest)

(To whom it may concern)



It is wished that my **MORTAL REMAINS** (body after death) be made available to the department of Anatomy, Medinirai Medical College & Hospital, Palamu, Jharkhand to be used in whatsoever way it shall be deemed most beneficial for the advancement of medical education and research.

Dated :

Signed :

The following information will be considerable value :

NAME (CAPITAL LETTER) : _____

FATHER'S NAME : _____

HUSBAND'S NAME : _____

GUARDIAN NAME : _____

DATE OF BIRTH : _____

OCCUPATION : _____

Permanent Address : _____

Pin Code : _____

Present Address : _____

Pin Code : _____