

Internship certificate declaration

I hereby declare that I have completed my MBBS Internship/ likely to complete Internship and don't have Internship Certificate. My internship is completed by..... (date) but my certificate is still not received by College/Department. I agree to submit that Internship completion certificate to the Department if I get selected, otherwise my candidature will get cancelled.

Signature of Candidate

Name of Candidate

Mobile No .

Email Id.