

FORM -IF (Bond for ANM /HAPTTNominees) on ` 100/- Stamp papers

SURETY

KNOW ALL MEN BY THESE PRESENT THAT WE:-

Mr/Ms..... (hereinafter called theNominee) aged around.....years
Son/daughter/wifeof.....PO.....PS.....
.District.....and Mr/ Ms..... (hereinafter called the Surety) aged aroundyears
S/o,D/o.....PO.....PS.....
District.....in the state of Arunachal Pradesh, do hereby bind ourselves and each one of us, our and each of our heirs, executors and administrators jointly and severally to pay to the Governor of Arunachal Pradesh (hereinafter referred to as 'the Government') on demand an amount of ` 2, 00000/- (TwoLakhs) towards liquidated damages/penalty for violation of the conditions mentioned in this Bond for ANM/HAPTTcourse.

Signed on thisday.....in the year.....by theNominee

Mr/Miss.....

Signature of the Nominee

In presence of Witness:

Mr/Mrs/Miss.....

Permanent Address:

Signed by Mr/Ms./Mrs..... (the Surety)

Relation with the Nominee:

Permanent Address:

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BOND AGREEMENT

Whereas the Nominee Mr/Misshas been selected to undergo ANM/HAPTT course at.....(name and address of the School)w.e.f. session the Government of Arunachal Pradesh has decided to prescribe terms and conditions for nomination to ANM/HAPTT course as mentioned below:

i)That, theNominee shall diligently pursue and complete the course at the assigned college. Discontinuation of courseexcept in the circumstances beyond control of the nominee viz. major/disabling disease(s) or death of the nominee as duly examined and certified by a competent Medical Board, shallattract the penalty as indicated in this Bond.

ii)That, theNominee, his/her parents/legal guardian and the Surety shall solely be responsible and pay the aforementioned penalty amount besides other appropriate legal action for Termination/cancellation of admission due to forgery, fabrication of certificates, impersonation, misleading information, concealment of facts , misconduct, involvement of theNominee in other criminal activities or any other falsehood committed by his/her parents/legal guardian and consequential loss of ANM/HAPTT seat.

iii)That, upon completion of internship and within thirty days of receipt of certificate, the Nominee shall formally (in writing)inform the Director of Medical Education,Govt. of Arunachal Pradesh, Naharlagun with a copy to the Commissioner/Secretary (Health & FW)Govt. of Arunachal Pradesh) Itanagar.

iv) That, the State Govt. reserves the right to engage theNominee in contractual or emergency compulsory service at remunerations fixed by the competent authority if the circumstances demands so.

v)That, in case, the Nominee is selected for regular employment in the state Government; he/she must serve the state for a minimum period of five years including three years in rural and far-flung areas.In the event of non-compliance of the aforesaid service liability, the penalty of Rs. 2, 00000/-(two lakhs) as specified in the Surety must be paid to the state Govt. before his/her formalrelease from Govt. service.

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vi)Provided that, it would be mandatory for theNominee to apply for 'No Objection Certificate' (NOC) if he/she wishes to pursue Post-Graduation course/seek employment under NGO within Arunachal Pradesh, any other state of India or abroadimmediately after graduation/completion of course. Such representation shall be examined on merit and normally be settled within 90 days from the date of receipt of application. The Government of Arunachal Pradesh reserves the right to grant or reject such proposal.

Signature of the Nominee

Signature of the Surety

Relation with theNominee:

Signed and delivered by the above mentioned Nominee and the Surety in presence of:

Signature with date:

Name, Designation & Seal of: Judicial MagistrateFirst Class /Executive Magistrate

Place:

Accepted by the Director of Medical Education, Govt. of Arunachal Pradesh,
Naharlagun

For and on behalf of the Commissioner/Secretary (Health & FW) Govt. of
Arunachal Pradesh: