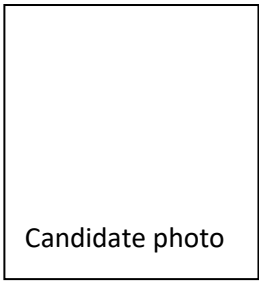


**CHRISTIAN MEDICAL COLLEGE LUDHIANA - 2020 SESSION**

**PROFORMA FOR SERVICE COMMITMENT - UNDERGRADUATE COURSES,**



BODY/CHURCH OF CMC LUDHIANA SOCIETY: \_\_\_\_\_

This is to certify that this candidate applying in the **B.Sc NURSING COURSE** at Christian Medical College Ludhiana for the 2020 session is hereby sponsored by us.

1. Full Name of the Candidate:

\_\_\_\_\_

(In block letters, as given in the application form)

2. Father's Name: \_\_\_\_\_; Mother's Name: \_\_\_\_\_

3. CMC (UG AT 2020) Application No: \_\_\_\_\_ (If available)

4. Complete Postal Address

\_\_\_\_\_

\_\_\_\_\_

Email id: \_\_\_\_\_

(As given in the application form)

5. State of Domicile: \_\_\_\_\_

6. Phone Number: \_\_\_\_\_ (R) \_\_\_\_\_ (M)

7. Date of birth: \_\_\_\_\_

8. Gender: Male / Female

9. Church /Denomination \_\_\_\_\_: Duration of Membership: \_\_\_\_\_ yrs

**Signature of 'Authorized Signatory' of the Body/Church of CMC Ludhiana Society**

Seal:

Date:

***Filling of all fields is mandatory.***