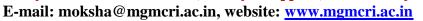


MOKSHA

(Voluntary Body Donation)
MAHATMA GANDHI MEDICAL COLLEGE & RESEARCH INSTITUTE Pondicherry-Cuddalore Main Road, Pillaiyarkuppam, Pondicherry-607403





APPLICATION FOR VOLUNTARY BODY DONATION

		size photo of
	Email ID:	Dollor
	DECLARATION	
	Hereby make this as my last WILL leath, thereby revoking all other Wills and Co	0
	do so of my own free accord, will and act, and body, after my death for the good cause of	
-	pressed my desire of donating my body, after embers of my family and they have no object eath for the said cause.	•
I declare that I have no hi	istory of Hepatitis / HIV or any contagious dise	ease.
At present, I am not suffering /	suffering from Hypertension / Diabetes Melli	tusYears.
D/o, H/o, W/o ofaddress)	Ir. / Mrsres	siding at (full
	be responsible for informing the hospital	
Mahatma Gandhi Medical & R absolutely with full powers to us	L will, bequeath my body after death to Research Institute, Pillaiyarkuppam, Puducher se for the educational & research purpose and ean of the said Institute as the Executor.	rry – 607 403,
Signature of lawful relatives (Name in CAPS)		ature of Donor me in CAPS)
Witness 1: (Signature with N		
Witness 2: (Signature with N		

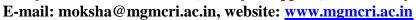
Enclosure:

- 1. Aadhar card of Donor.
- 2. Aadhar card of Lawful relatives.





(Voluntary Body Donation)
MAHATMA GANDHI MEDICAL COLLEGE & RESEARCH INSTITUTE Pondicherry-Cuddalore Main Road, Pillaiyarkuppam, Pondicherry-607403





APPLICATION FOR THE RELATIVES OF THE DECEASED			
Name: Name in CAPS	Age:	Sex:	
Address:			
Mobile No:			
Name of Deceased: Name in CAPS			
Age: Sex:		Affix Passport size photo of	
Relation to Deceased: Father/ Mother / Husband/ Wife		Voluntary Body Donor (Deceased)	
DECLARATION			
Ithe deceased Mr. / Mrs.			
hereby would like to fulfill their last DESIRE/ WILL/ W mother / husband/ wife to the MOKSHA (Voluntary Body College & Research Institute and Shri Sathya Sai Medical Col and research purpose.	Donation) of Mahatma G	andhi Medical	
I declare his / her desire of donating the body after death, members have no objection in such a Voluntary Body Donation		d other family	
I declare that he / she had no history of Hepatitis / HIV or any	contagious disease.		
I declare am wholly held responsible for the above Volunta that all the particulars furnished in this application are true, knowledge and belief. And MOKSHA of Mahatma Gandhi Puducherry absolutely with full powers to use for the ed dispose the remains of it and appoint the Dean of the said	correct and complete to the Medical College & research purcational &	the best of my earch Institute, urpose and to	
	Signature of law (Nan	rful Relative ne in CAPS)	
Witness 1: (Signature with Name in CAPS)			
Witness 2: (Signature with Name in CAPS)			
Enclosure: 1. Death Certificate			

2. Aadhar card of Deceased 3. Aadhar card of Lawful relatives 4. Affidavit of lawful relatives