

CLEARANCE CERTIFICATE

(For House Officers)

This is to certify that nothing is due against Dr. _____

S/D/O _____ designation House Officer worked in this hospital

with effect from _____ to _____.

Signature of Doctor: _____

(1st Rotation)

(2nd Rotation)

(3rd Rotation)

(4th Rotation)

1. AMS Admen _____
2. Accountant _____
3. Complaint cell _____
4. Incharge House Officer Lodge/LDH _____
5. M & R / SDO Electricity _____

(In case use of Air Conditioner)

(SIGNATURE WITH STAMP OF ALL DEPARTMENTS)

Countersignature

**Medical Superintendent
B.V. Hospital Bahawalpur**