## ANNEXURE IV

## **AUTHORISATION LETTER**

## SUBMITTED BY AN AUTHORISED REPRESENTATIVE / PROXY OF CANDIDATE [See Clause 24]

I,		(name of candidate) son/daughter of Shri/Smt
	with	n application numberand Rank No
	in	Rank list(s) do hereby authorize Shri/Smt
		ed) to represent me to report at the allotment venue
for admission	to General Nursing & Midwif	Fery Courses, 2019. The signature of the person
authorized is a	ttested below by a Gazetted Offic	cer.
Dhata wash		
Photograph of candidate	Signature	e of Candidate:
attested by a	Name:	
Gazetted	Address:	
Officer		
(Gazetted Office	r to attest the Photograph)	
Name :		
Designation:		
(Office Seal)		
	-	(Signature of authorized representative)
Photograph of		,
authorized		(ATTESTED)
representative	(Candidate to sign	
attested by candidate	over the Photograph)	Signature of Candidate
candidate	IINDEF	RTAKING
	02	·
venue shall be	<u>•</u> ·	by my authorized representative at the allotment have any claim whatsoever, other than the decision behalf.
Place:		

Note: An authorized representative attending Allotment Process must bring a photocopy also of the filled up form. The same will be returned to the representative with the seal of the DME's office. This copy of the filled up form having the seal of the DME's office can be used in lieu of authorization letter during subsequent appearances.

Date:

Signature of candidate