

For use by the Ministry of Health and Family Welfare	
Application Number & Date	
Application for	Statement of Need (SON) Certificate OR Exceptional Need Certificate (ENC) (Specify)

APPLICATION

[To be filled-up by candidates applying for Statement of Need (SON) Certificate OR Exceptional Need Certificate (ENC) for training programme/course under various medical courses / specialities in medical institutions out of India]

[Note: Application, alongwith all requisite information / documents (Original or Copy – as applicable) to be sent to : The Under Secretary (IC), International Cooperation Section, Ministry of Health & Family Welfare (Department of Health & Family Welfare), Room No.514, 'A' Wing, Nirman Bhawan, New Delhi – 110011.]

Sl. No.	Items of Information	Information to be furnished by candidates		
1.	Name of the applicant and Permanent Address in India			
2.	Date of Birth (DD/MM/YYYY)			
3.	Place of Birth			
4.	Nationality:			
5.	Father's name			
6.	Mother's Name			
7.	Indian Passport Number			
8.	Date of Issue (DD/MM/YYYY)			
9.	Place of Issue			
10.	Valid upto (DD/MM/YYYY)			
11.	Validity of Visa upto (DD/MM/YYYY) [If applying for a course in USA, please enclose copy of valid USA Stamp Visa/ Visa papers]			
12.	Details of Academic Qualifications from MBBS onwards			
Sl. No.	Name of Course / Study	Year of Passing	Name of the Institution and University	Whether obtained SON Certificate for the course earlier, if yes, furnish details
(i)				
(ii)				
(iii)				
13.	MCI Registration No.			
14.	Date of MCI Registration			

15.	Details about the Training Programme/Course to be undertaken out of India [Enclose copy of Offer letter received from the University/Institution]	
	(a) Name of the Speciality Training / Course of Study	
	(b) Starting from (DD/MM/YYYY)	
	(c) Duration of the Course	
	(d) Name & complete address of the Institution/ University	
16.	WRITTEN ASSURANCE and SUBMISSION OF BOND:	
	<p>I, Dr. _____, son/daughter/wife of _____, a resident of (permanent address in India), and at present residing at _____, do undertake to return to India upon completion of training in (Name of the country) and enter the practice of medicine in India in the specialty of training.</p> <p>I have executed a Surety Bond of Rs. 10 lakhs (Ten lakhs) with two sureties on a Non-judicial Stamp Paper of Rs.100/- (Rupees One Hundred) only and the same is enclosed in original.</p>	
	<p>Full Signature _____ Name : _____</p> <p>E-Mail: _____ Tel. No.: _____</p> <p>Date: _____ Place: _____</p>	

Enclose the following documents:

- (i) Copy** of offer letter received from the concerned foreign University/Institution
- (ii) Copy** of valid INDIAN PASSPORT (excluding the blank pages)
- (iii)** If applying for a course in USA, **Copy** of valid US Stamp VISA / US VISA papers [DS-2019, I-20, I-94, I-797, Employment Authorization Card (I-766) in connection with applicant's present stay in the USA.
- (iv) SURETY BOND in original**, alongwith two Sureties, in the **FORMAT** at **ANNEX – 1**.

If applying for issue of ENC, please also enclose the following documents, in addition to the above:

- (i) Self attested copy/copies of SON Certificate(s) issued earlier
- (ii) A **"TEMPLATE"** on the *'exceptional need'* with reference to the course of study/ specialization, i.e., a paragraph having upto 10 lines, signed by the applicant.
- (iii) A signed Resume / CV of the Applicant.