## **Affidavit**

l,	D/S/W/a. Sh/Smt	
R/o	,District	_ do
hereby solemnly affirm that:-		
1. I am resident of District	, my Educational	
Qualification is	and I am registered with	
	under Regd. No.	
dated	, valid upto	

- That mere selection for the said course, and completion of the course shall not entitle me for any appointment as MLHP at HWC-SC under NHM, J&K.
- That I shall join at the allotted PSC within stipulated time period, failing which I shall not have any claim in the FDR pledged to FA/CAO.
- That after completion of BPCCHN course, I am willing to serve at any of the HWC-SC, where I am placed by the department.
- 6. That I have neither concealed any material facts nor misrepresented any information in the application form. In case if in future at any time it is found that I have misrepresented/concealed any information, my selection may be cancelled without any notice and the same shall be liable to legal action.