

DECLARATION BY A MEDICAL PRACTITIONER/DENTIST

DECLARATION

I have never been convicted in any Country or any office against the law or been debarred from practice by reason of misconduct no proceedings of likely to involve a charge of any such nature pending against me in any country at the present time.

Place: _____

Date: _____

Signature

| | |
|-------------------------|--|
| <i>Full Name</i> | |
| <i>Registration No.</i> | |