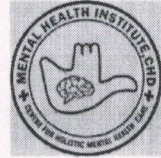


# MENTAL HEALTH INSTITUTE

Near S.D. College, Adj. to Pb. Police Officer Inst, Sector 32, Chandigarh 160030

Ph. No. 0172-5001755 Email: [mhipsychiatry@gmail.com](mailto:mhipsychiatry@gmail.com)



## NO DUES CERTIFICATE

There is nothing due against Dr./Mr./Ms. \_\_\_\_\_ S/D/W of Sh. \_\_\_\_\_  
\_\_\_\_\_ R/o \_\_\_\_\_ (Mobile No.) \_\_\_\_\_  
\_\_\_\_\_ who has worked in MHI as \_\_\_\_\_ upto \_\_\_\_\_. He/She is leaving the  
institute due to \_\_\_\_\_

1. Library (GMCH) \_\_\_\_\_
2. Library (MHI) \_\_\_\_\_
3. Pharmacy Unit (MHI) \_\_\_\_\_
4. Communication Cell (GMCH) \_\_\_\_\_
5. Medical Record Department (GMCH)  
OPD C.R.No. \_\_\_\_\_  
Dependent's Name (Father/Mother)  
(Husband/Wife) \_\_\_\_\_  
(Son/Daughter) \_\_\_\_\_
6. Medical Record Department (MHI) \_\_\_\_\_
7. Canteen/Mess (GMCH) \_\_\_\_\_  
Canteen/Mess (MHI) \_\_\_\_\_
8. Hostel Office (Hostel Room No.) (GMCH) \_\_\_\_\_
9. Hostel Office (Hostel Room No.) (MHI) \_\_\_\_\_
10. Estate Branch  
House No./Type/Sector \_\_\_\_\_
11. Licence Fee Clerk (MHI) \_\_\_\_\_
12. Bill Assistant (MHI) \_\_\_\_\_
13. Cashier (MHI) \_\_\_\_\_
14. MHI Ward (Nursing Sister Incharge) \_\_\_\_\_
15. Stores Clerk (MHI) \_\_\_\_\_
16. Central Stores (GMCH) \_\_\_\_\_
17. HOD-Psychiatry (GMCH) \_\_\_\_\_  
Medical Superintendent (MHI) \_\_\_\_\_

Note: 1. Trainees/employees of Dept. of Psychiatry, GMCH must get no dues certificate signed on this form only from concerned sections of MHI.

2. Employees of MHI must get the complete form signed by concerned sections of GMCH as well as MHI.