ANNEXURE - III B

SERVICE CERTIFICATE TO BE CONSIDERED FOR P.G. MEDICAL SELECTION AS PER GOVERNMENT ORDERS

SERVICE ELIGIBILITY CERTIFICATE

This is to certify that Dr._____Son/Daughter of_____ _____is in service and working as _____under the administrative control of_____. He/She is already having _____

P.G. Diploma (Specify the specialty-If no information write Nil). He/She is eligible under Service Quota for selection into any PG Degree / Diploma (Strike off the one not applicable) admission into P.G. Medical Courses for the Academic year **2026-27** as per orders of Govt. of T.S. vide **G.O.M.s.No.155 HM&FW (C1) Dept., Dated: 18-11-2021, Govt. of Telangana,** His / Her date of birth is_____and he / she is having the requisite minimum 5 years of left over period of service after completion of the course.

SERVICE AS ON 30- 09-2026.

Type of service	Place of Service	Service		Total Period of Service
		From:	To:	
1) Tribal Service:		DD/MM/YY	DD/MM/YY	
2) Rural Service:		DD/MM/YY	DD/MM/YY	
3) Other Service:		DD/MM/YY	DD/MM/YY	

Signature of HOD

(SEAL)

Date: