

# BODY DONATION / APPLICATION FORM



Name PREMKUMARI Agarwal.  
Age (Date of Birth) 25-11-1958  
Gender Female.  
Occupation House Hold wife.  
Contact Address Near Jivan Jhoti Clinic, Phone 09050844660  
TAUKU Dist + Mewat.  
Whether Registered for Eye Donation No Yes No

To,

The Director,  
SHKM Govt. Medical College  
Nalhar, Mewat (Haryana)

Subject: - Voluntary Body Donation

Dear Sir,

I ~~we~~ are donating the body of my ~~our~~ Prem Kumari Agarwal voluntarily for the purpose of study and research work to SHKM GMC, Nalhar, Mewat, Haryana. The affidavit regarding this, No objection certificate from the near relatives and 2 Extra passport size photos are enclosed here with.

Yours Sincerely,

Dated: 05/12/15

Prem  
(Donor's Signature)

## NO OBJECTION FROM CLOSE RELATIVES

We, the undersigned have no objection to donate the body of ~~Shri~~ Smt.

Prem Agarwal w/o  
Dharam Kishore Agarwal Sh. Mumukshu Ram Resident of  
Near Shivon Jayati clinic, TAURU Aged 57 yrs.

After his/her death for educational purpose to Dept. of Anatomy, SHKM GMC, Nalhar,  
Mewat, Haryana.

	Name	Relation	Signature
1.	<u>D.K. Agarwal</u>	<u>wife.</u>	<u>D.K. Agarwal</u>
2.	<u>Nipun Agarwal</u>	<u>Son</u>	<u>Nipun</u>
3.	<u>                    </u>	<u>                    </u>	<u>                    </u>
4.	<u>                    </u>	<u>                    </u>	<u>                    </u>

## AFFIDAVIT

Where as I, Smt. Prem Agarwal W.O.B.K. Agarwal Resident of Near Jivan Jagt Clinic Tauru do hereby declare as under



This will does not cover my movable or immovable property.

These will is my last will regard the disposal of my body.

1. That after my death I had offered to donates my body to the SHKM GMC, Mewat, Haryana.
2. That after my death, my body would be at the disposal of the institute and now, as that there would be no dispute regarding it and my heirs may not have any objection regarding the disposal of my body.
3. I hereby declare that after my death, my body shall be placed at the disposal of the institute and the institute shall be at liberty to deal with or dispose of my body in any manner it takes and my relatives shall not have any objection to such manner of disposal of my body.
4. If my death takes place at place other than the institute, my heirs shall be responsible for informing the institute about my death and making my body available to the institute within the shortest time.
5. This will I have made at my free will and without any pressure of any kind and because I have got first belief that putting of dead body at the disposal of the institute shall be better than consigning the dead body to flames. This is my earnest desire that this will executed by me is noted upon by all heirs without any reservation. My heirs will have no claim of any kind over my dead body

Prem

Executed at Mewat today the 05/12/15 in the presence of witnesses who have signed in my presence.

Witness:

1.

2.

attested as identified

Khali Ahmed  
Advocate & Notary  
Mewat-Nuh India

5/12/15

WILLINGNESS FORM FOR DONATION OF DEAD BODY  
AFTER DEATH

DEPARTMENT OF ANATOMY, SHKM GMC, NALHAR, MEWAT, HARYANA

Authority of /by the Donor

1. Prem Kumar Agarwal W.O. D.O. D.K. Agarwal Advocate  
Aged 57 Year, Resident of Neel Tiwan  
Jyoti Clinic Ward No 6 Tauru Dist Mewat.

Hereby express my free and frank "WILL" to donate my dead body after my death to the  
Anatomy Department, SHKM GMC, Nalhar, Mewat, Haryana for the purpose of teaching of  
medical students.

Place: 5-12-2015

Date: 7 Nov

Time: \_\_\_\_\_

Prem  
Signature of Donor

Tel. No. 090 50844660

Name PREM Agarwal

Witness (next to kin)

Signature D.K. Agarwal

Name D.K. Agarwal

Relationship Husband

Signature Nipun

Name Nipun Agarwal

Relationship Son

The family members are advised to inform any of the following immediately after death:

1. Director, SHKM GMC, Nalhar, Mewat. (8222828282)
2. Head of the Department, Anatomy SHKM GMC, Nalhar, Mewat.
3. Office Superintendent, SHKM GMC, Nalhar, Mewat
4. Medical Superintendent, SHKM GMC, Nalhar, Mewat.





**ELECTION COMMISSION OF INDIA  
IDENTITY CARD**

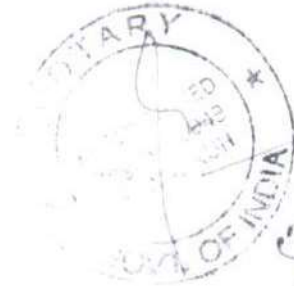
भारत निर्वाचन आयोग  
पहचान पत्र

HR/06/59/150679



Elector's Name : PREM LATA  
निर्वाचक का नाम : प्रेम लता  
Father/Mother/Husband's Name : DHARAM KISHORE  
पिता/माता/पति का नाम : धर्म किशोर  
Sex / लिंग : Female / स्त्री  
Age as on 1.1.1995 : 36 Years  
1.1.1995 की आयु : 36 वर्ष

*Self Declaration*  
*Prem*



*5/12*

Address : HNO. 122, TAORU WARD 6,  
TEH.NUH, DISTT.GURGAON

पता : मे.नं. 122, तावड़ु वार्ड-6  
तेह नुह, जिला गुडगांव

*[Signature]*

Facsimile Signature of  
Electoral Registration Officer  
for 59 - TAORU Constituency

Attested in a photocopy

KHAJIL AR MED  
Advocate & Barrister  
Teht-Nuh (H.R.) India

*5/12*

59 - तावड़ु निर्वाचन क्षेत्र की  
निर्वाचक रजिस्ट्रीकरण अधिकारी  
की हस्ताक्षर की अनुकृति

Place : GURGAON  
स्थान : गुडगांव

Date : 06.01.1996  
दिनांक : 06.01.1996

This Card may be used as an Identity Card under  
different Government Schemes.

इस पत्र को विभिन्न सरकारी योजनाओं के अन्तर्गत  
पहचान-पत्र के रूप में प्रयोग किया जा सकता है।

Duplicate Ration Card No TC No ①

Date 5/7/2012

हरियाणा सरकार

डी - III

राशन कार्ड

(केवल राशन वस्तुओं के लिए)

- वितरण क्षेत्र का नाम तापड़
  - राशन कार्ड संख्या 4608754
  - परिवार के मुखिया का नाम र. ग. कौशिक अग्रवाल
  - माता/पिता का नाम श्री. गुरुश्री शर्मा
  - पत्नी/पति का नाम श्री. गुरुश्री शर्मा
  - मकान नं० D.F. - 136 वार्ड/सेक्टर नं० 6
  - मोहल्ला/गली का नाम तापड़ सुजयिका प्रसिद्ध
  - स्थायी डाक पता म. ल. ब. नं० 1, कालीशाय, तपड़
- | राशन वस्तु संख्या | व्यक्त   | बच्चे    | शिशु     | जोड़     |
|-------------------|----------|----------|----------|----------|
| <u>4</u>          | <u>4</u> | <u>-</u> | <u>-</u> | <u>4</u> |



FOOD & SUPPLIES  
TAURU (MEWAT)

कार्ड धारक के हस्ताक्षर

तिथि 05/07/12

वितरण अधिकारी के हस्ताक्षर व मोहर

निधि  
INSPECTOR FOOD & SUPPLIES  
TAURU (MEWAT)