

SPECIAL BUREAU

Dated: 27.07.2018

То

The Medical Director, AJ Hospital Group, Mangalore

Sub: Request for sharing details of foreigners connected to your organization

Respected Sir,

This application is intended to bring into your kind consideration that our department needs regular support from your organization in the form of sharing details of foreign patients admitted at AJ hospital (all branches), foreign employees hired in your organization (doctors/ nurses/ assistants) as well as foreign students applied at AJ Institute of Medical Sciences.

2. Keeping in view of our operational requirement it is hereby requested that the aforementioned details may please be shared to us.

This is for your kind perusal and necessary action.

Thanking you,

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Yours faithfully,

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OFFICER - IN - CHARGE OPECIAL BUREAU BOVT, OF INDIA MANGALORE

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FOREIGN /NRI STUDENT/STAFF INFORMATION FORMAT

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Student/Staff Name

Country

Course

Duration of Course

Last Studied School Name

School Address

Passport Number

Permanent Address in India

Date of Admission

Father Name

Abroad/Foreign Address

Occupation Working Organization in outside India Date of Joining Contact Number Email ID Mother Name Abroad/Foreign Address

Occupation

Working Organization in outside India

Date of Joining

Contact Number

Email ID