FORMAT OF BOND (FOR UG – MEDICAL / DENTAL STUDENTS in ESIC Colleges)

(To be executed on Stamp Paper of value as applicable under Stamp Duty Act. Duly Notarized)

(hereir		- (-,	(1411./14	lrs./Ms	.)					
•	n-after called the Bounden) Son / daught	er/	wife of	:			. residi	ng at		
(Resid	ential Address)	and	(2)	Shri	/	Smt.		
	(herein after called 'th	e Su	rety / S	Suretie	s') son	/ daugh	ter / w	ife of		
	residing at (Here	ente	r addre	ss)						
do her	e by bind ourselves and each of us & our	res	ective	heirs,	execut	ors & ad	ministr	ators		
jointly	and severally to pay to the Employees	s' Sta	ate Ins	urance	Corpo	ration (herein	after		
referre	ed to as 'the Corporation') on demand the	e tot	al amo	unt of	Rs. 5,0	00,000 (Rupees	Five		
Lakh c	only) with interest @ 12% towards failure	e to	fulfill th	e oblig	ation /	for viol	ation o	f the		
conditi	on here-in-after mentioned. The bounde	en a	nd sure	eties sl	nall ha	ve the d	ption	to (i)		
furnish	n Bank Guarantee** amounting to Rs !	5,00,	000 (R	lupees	Five I	akh onl	y) 1 m	onth		
before	completion of internship, for a period of	14 n	nonths	in favo	ur of tl	he Dean	of the	ESIC		
Institu	tion in lieu of the amount, and original o	docu	ments (of the	studen	t would	be reta	ained		
•	Corporation pending the submission of				•	•				
Guarantee, as above, when original documents would be retained by ESIC till Bond										
conditions are met with, i.e. completion of service under bond or payment in lieu. The total										
_	tion amount would not exceed Rs. 05 lakh									
_	I this Day of		•			-		nden		
(Mr./M	lrs./Ms.) and Surety / Sure	ties	Shri / S	mt		· · · · · · · · · · · · · · · · · · ·				
							Siana	+		
In tho	proconce of witness*:						Signa	ture		
In the	presence of witness*:						Signa	ture		
In the	presence of witness*:						Signa	ture		
	presence of witness*: Signature (Name & Address with	1.	Signat				_			
		1.	_			DEN 6, Photo	_			
	Signature (Name & Address with	1.	_				_			
1.	Signature (Name & Address with official seal)		(Name	e & Ado	lress**	, Photo	ID No.))		
1.	Signature (Name & Address with		(Name	e & Ado ure o	f SUF		ID No.) SURE) TIES		
1.	Signature (Name & Address with official seal)		(Name	e & Ado ure o	f SUF	Photo	ID No.) SURE) TIES		
1. 2.	Signature (Name & Address with official seal)	2.	(Name Signat (Name	e & Ado ure o e & Ado	lress** f SUF lress**	RETY /	ID No.) SURE ID No.)) ETIES)		
1. 2. **The	Signature (Name & Address with official seal) Signature (Name & Address)	2.	(Name Signat (Name	e & Ado ure o e & Ado	lress** f SUF lress**	RETY /	ID No.) SURE ID No.)) ETIES)		
1. 2. **The pendin	Signature (Name & Address with official seal) Signature (Name & Address) provision of Bank Guarantee is subjecting in the Hon'ble High Courts. WHEREAS the Bounden (Mr./Mrs./Ms	2. t to .)	Signat (Name final o	e & Ado	f SUF fress** e in va has	RETY / RETY / Photo rious W been	SURE ID No.) rit Peti	TTIES itions d to		
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AND WHEREAS the Corporation have agreed to incur the expenses on condition that after successful completion of the course of study the bounden shall serve any of the institution, of the Corporation or of ESI Scheme of the State Government, as the case may be, for a period of one year anywhere in India and also subject to the terms and conditions hereinafter appearing and the bounden and the surety / sureties have agreed to the same.

NOW the condition of the above written obligation is that in the event the Bounden discontinues the study or after completion of the MBBS / BDS Course of study to which he / she was selected, fails to serve the Corporation for period of one year, the Corporation shall have the right to invoke the Bank Guarantee so furnished by the Bounden and sureties.

The bond is legally binding on the bounden and the sureties. The above written obligation shall be void and of no effect in event of invocation of Bank Guarantee; otherwise this shall remain in full force and effect.

PROVIDED further that the bounden and the surety / sureties do hereby agree that all sums found due to the Corporation under or by virtue of this bond shall be recovered jointly and severally from them and their properties movable and immovable as if such dues were arrears of land revenue under the provisions of the Revenue Recovery Act for the time being in force or in such other manner as the Corporation may deem fit.

PROVIDED further that during the tenure of study the Bounden shall be paid stipend in the internship year as per guidelines of Ministry of Health & Family Welfare, GoI, or as decided by the Corporation from time to time.

Provided further that it is not necessary for the Corporation to sue the bond holder before taking action on the surety / sureties, under this bond and the liabilities of the surety / sureties is Co-extensive with that of the Bounden and shall not be affected by the Corporation giving time or any other indigence to the bounden or by the Corporation varying of the terms and conditions herein contained,

Signed this	Day of	in the year	by the
bounden (Mr./Mrs./Ms.	.)	and surety /	sureties Shri / Smt

Signature

In the presence of witness*:

- 1. Signature (Name & Address with official seal)
- Signature of BOUNDEN (Name & Address**, Photo ID No.)
- 2. Signature (Name & Address)
- 2. Signature of SURETY / SURETIES (Name & Address**, Photo ID No.)

^{*}Dean / Administrative Officer of ESIC Medical Education Institution will sign as witness.

^{**}Proof of Residential Address of Bounden and Surety / Sureties is to be obtained.