

STERILIZATION CERTIFICATE

I, Dr. _____ hereby certify
that I have conducted Vasectomy/ Tubectomy operation on Shri / Smt. _____
_____ husband /wife of Shri/Smt. _____
_____ employed as _____ in Pr.
CDA (SWC) Jaipur at _____ on

2. A sperm count was undertaken on _____ and on the basis
thereof it is certified that the Vasectomy operation was completely successful.

(Para .2 in the case of Vasectomy operations only)

Signature

UNDERTAKING TO BE GIVEN BY ALL GOVERNMENT EMPLOYEES

I/My spouse have / has undergone Vasectomy / tubectomy operation at _____ on _____ Necessary sterilization certificate issued by _____ is enclosed. In case I/my spouse have to take resort to recanalization for any reason whatsoever I undertake to report this fact forthwith to the Government. I also undertake to report to the Government if there is failure of sterilization operation.

2. I also certify that my wife Smt. _____ is not pregnant on this date.

(Para 2 for male Government employees only)

Signature

Date:

Name.....

Place : Jaipur

Designation.....

Account No.

Section

Office of the Pr. CDA (SWC) Jaipur