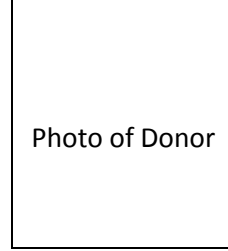




अखिल भारतीय आयुर्विज्ञान संस्थान पटना
ALL INDIA INSTITUTE OF MEDICAL SCIENCES PATNA
Department of Anatomy

BODY DONATION FORM

TO,
The Head of Department
Department of Anatomy, AIIMS PATNA
Ph. no – 9905130001
E-mail address –



Sir,

I wish to donate my entire body after my death to the Anatomy Department AIIMS Patna for study and educational purpose .The Following are the necessary details required to fill –

Name:

Son / Daughter /Husband / Wife of.....

Age :.....

Address:

.....Pin code :.....

Phone no Residential: Office:

Email:

Any past medical history:

You need to have two witness of the will. One of the witness should be near relative (Father, Mother, Spouse, Son, Daughter, Brother, Sister)

1. Witness No. 1	Witness No. 2
Name	Name
Address	Address.....
Relationship	Relationship.....
Phone	Phone.....
Email.....	Email.....
Signature.....	Signature.....

Declaration

All my legal heirs, relatives and friends present at time of my demise, I
Agedam willing to voluntarily donate my body after death to the Department of Anatomy , Aiims, Patna , Bihar 801505. I hereby declare that this donation is out of my free will and is under no compulsion. I also declare that I am in complete sanity of mind and deeds. I have no objection that my body after death being used for dissection and educational purposes.

Date:

Signature of donor

Draft letter of willingness

To,

The Head of Department

Department of Anatomy

AIIMS, PATNA, PHULWARISHARIF.

Sub: Willingness of voluntary donation of dead body.

Sir

I, Residing at
.....

..... and aged
Years, am willing to voluntarily donate my body after my death to the students of AIIMS,
PATNA for their study and research purpose.

I hereby declare that this donation is out of my free will and is under no compulsion. I
also, declare that I am in complete sanity of mind and deeds.

I declare that I have no history of HIV/ Hepatitis or any other contagious disease.

I have donated / not donated my eyes (after death)

I am willing to know the details of further procedure and abide by the same.

I request you to kindly issue the necessary forms to me so that I can fulfil the necessary
formalities.

Thanking you.

Yours faithfully,

.....

Name:

Address in full:

Phone no:



अखिल भारतीय आयुर्विज्ञान संस्थान पटना
ALL INDIA INSTITUTE OF MEDICAL SCIENCES PATNA
Department of Anatomy

DONAR Card No.
Certified that Sh. / Smt. / Kum.
Age
Sex.....

PHOTO

Has bequeathed his/ her body to Department of Anatomy after
Death for educational & teaching purpose.

Date:

Signature of officer Incharge

Ph. no: 0612-2452108
(MOB) : +91 – 9835717523 , +91- 9905130001

BODY DONOR POCKET CARD

Kindly inform immediately on my demise on address
Mention below and help them to fulfil my last desire.
Thanking you

Address
Department of Anatomy
AIIMS, PATNA, Phulwarisharif
801507

Signature of the donor
Date:

Forms and documents to be submitted for purposes for Registration voluntary Donation.

1. A letter written by the donor
 - a) That he / she is donating his / her body after death, at his / her own will and is under no compulsion.
 - b) That the legal heirs will have no objections to the donation , at the time of registering the donation and subsequently thereof
 - c) That the legal heirs or near – relatives of the donor will not raise any objections and thus claim the body after death;
 - d) That the body of the donor shall be brought to the AIIMS, PATNA, PHULWARISHARIF.
2. The aforesaid letter should be endorsed by two witnesses.
3. A letter from the legal heirs of the donor, clearly specifying that they have no objection to the donation of body of the donor.
4. A copy of proof of legal heir indicating relation with the donor.
- 5 . A photo ID proof (Voter Identity Card, Driving License, Passport ,Arm’s License Central Government Health Scheme Card or Ex-servicemen Contributory Heath Scheme photo card, Ration Card having photograph of applicant,Photo identity card issued by the Central Government or a State Government or a Public Sector Undertaking Pensioner Card having photograph of the applicants ,Elector’s photo identity card
- 6 .Three passport size photographs of the donor.