

Nepal Medical Council Regulations

(Related to Schedule No. 2)

COVENANT LETTER

*I Dr.....hereby
solely swear that I will discharge my duties, as
per Nepal Medical Council Act and Regulations.
I hereby affirm my concurrence by signing this
covenant letter that action may be taken against
me under the prevailing Act Regulation, in case
I act in defiance of and beyond Nepal Medical
Council Act, Regulations and professional
ethics.....*

Signature:

Name :.....

Date :.....