

STERILIZATION CERTIFICATE

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

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

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

Signature

UNDETTAKING 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 recanalisation 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.....

CERTIFICATE

Certified that my wife/husband, Mrs/Mr _____ aged _____ and employed in _____ and that he/she is not drawing the personal pay under the incentive scheme for adopting small Family Norms.

The details of my family is given below.

Date:

Signature

Family Details

Sl.No.	Name of the family member	Age	Relationship	Remarks
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