

Annexure 2

Name of the Medical college/Institution and address:

Adesh Medical College and Hospital, Vill. Mohri, Teh. Shahabad, Distt. Kurukshetra 136135

The Medical college/institution hereby declares the stipend paid to different categories of trainees for the financial year 2024-25.

Numbers in each cell of the months refers to the numbers of trainees

Sl #	Category	College's stipend*	State Govt Stipend*	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
1	Interns (MBBS)	17000	17000	132	139	139	141	141	141	141	141	141	141	141	
2	Ist year (MD/MS)	56100	56100	48	48	48	48	48	48	0	0	0	19	42	
3	IIInd year (MD/MS)	57800	57800	34	34	34	34	34	34	48	48	48	48	48	
4	IIIrd year (MD/MS)	59500	59500	28	28	28	28	28	28	62	62	62	62	62	
5	Ist year (DM/MCh)														
6	IIInd year (DM/MCh)														
7	IIIrd year (DM/MCh)														

*Cell values indicate the stipend (in INR) paid each month for each trainee

Date:

Signature

Name of Dean/Principal

[Handwritten Signature]
[Handwritten Name]