



དཔལ་ལྷན་འབྲུག་གཞུང་།
གསོ་བ་ལྷན་ཁག གླིང་ཕྱོད་

**Royal Government of Bhutan
Ministry of Health, Thimphu**

"A Nation with the Best Health"



MoH/HRD-18/

Date:

No Due Certificate Form

This is to certify that there is no outstanding bills, payments, and government property and office files of any kind with Divisions / Services of the Ministry of Health against the person mentioned below who has been superannuated/voluntarily resigned/compulsorily retired, transferred and granted EOL:

Name of Employee: _____

Employee ID: _____

Position Title & Position Level: _____

Name of Division, Department: _____

1. Handing-taking Note attached: ☐ Yes ☐ No: _____

Sign of Division/Department/Secretariat/Ministry

2. Government properties returned (list attached): ☐ Yes ☐ No _____

Sign of Procurement Officer, DoS

3. HSWS loan payment pending: ☐ Yes ☐ No: _____

Sign of HSWS Office Secretary

4. Any outstanding dues: ☐ Yes ☐ No: _____

Sign of CFO, Finance Division

5. Any pending Legal Case: ☐ Yes ☐ No: _____

Sign of Legal Officer, Legal Unit

6. Any training obligation: ☐ Yes ☐ No: _____

Sign of Focal HRO, HRD

7. Declared Vacation of Office: ☐ Yes ☐ No: _____

Sign of Asset Administrator, HRD

8. Minimum Service Obligations (Section 4.14.1, 7.16.1 of BCSR):

a) SSC and OC: 2 years: ☐ Yes ☐ No: _____

Sign of Focal HRO, HRD





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གསོ་བ་ལྷན་ཁག གཞི་རྒྱ།
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b) PMC: 4 Years: ☐ Yes ☐ No:

Sign of Focal HRO, HRD

9. Civil Service Exit Interview (scan below) ☐ Yes ☐ No:



Sign of Focal HRO, HRD

Recommendation of Division/Department, MoH:

Name & Signature: _____

Approved by Secretary/Minister, MoH

Name & Signature: _____

