



AIIMS, MANGALAGIRI
DEPARTMENT OF ANATOMY
BODY DONOR CARD

DONOR DETAILS

Donor ID: AIIMS/MG/ANAT/

NAME:

DOB: SEX : BLOOD GROUP:

ADDRESS:

.....

..... AADHAAR CARD NO:

MOBILE NO:

EMAIL ID:

BODY DONOR CARD

I hereby declare that my body is pledged to be donated for medical science and research.

I request that after my death my body shall be handed over to the Department of Anatomy, AIIMS, Mangalagiri after the death is certified.

Any part of my body can be used for medical education and research

.....
Signature of Donor

.....
Signature of the HOD-Anatomy

Identification marks of the applicant

Contact us:

Dept of Anatomy
AIIMS, Mangalagiri-522503

Email: anatomy@aiimsmangalagiri.edu.in
Contact:

If lost, Please deposit the card at nearest Police Station