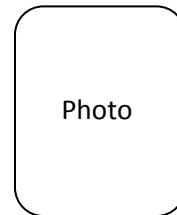


DOCUMENT REQUIRED FOR PROVISIONAL REGISTRATION

PHOTOSTAT ATTESTED COPY OF FOLLOWING DOCUMENTS:

1. Matric Certificate in support of Date of Birth (Board)
2. 10+2 Detail Mark Card.
3. Ist, IInd , IIIrd Prof. Part-I, & Part II Certificate.
4. Attempt Certificate.
5. One Passport size photograph attested by the Principal Medical College or Ist Class Magistrate.
6. Domicile if Graduate out of State.
7. Registration Fee Rs. 1000/- by way of Bank Draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali.
8. Self declaration if graduate out of Punjab (as per Format)
9. Screening test certificate if graduate out of India.
10. Application form duly filled by the candidate

FORMAT OF SELF DECLARATION



I _____ S/o / D/o _____
R/o _____ do hereby solemnly
affirm and declare as under :-

1. That I have passed M.B.B.S. Ist Prof from _____ under
Roll No. _____, held in _____, 2nd Prof. _____ from
under Roll No. _____, held in _____ 3rd
Prof. _____, under Roll No., held in _____.

2. That I have applied for Provisional Registration with the Punjab Medical Council.

3. That I have not been Provisionally Registered with Medical Council of India or Medical Council of any State till date.

4. That I do hereby undertake that, in future, or any stage, any complaint or guilty is proved against me regarding geniuses or my M.B.B.S. certificate. The Punjab Medical Council can cancel my Provisional Registration.

SIGNATURE OF DOCTOR *

VERIFICATION:-

Verified that above statement of mine is true and correct to the best of my knowledge and nothing has been concealed therein.

Place _____ :

Date :

SIGNATURE OF DOCTOR *

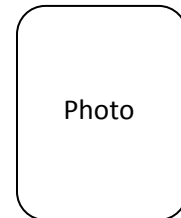
*** Signature in presence of President, Registrar or Superintendent Punjab Medical Council**

DOCUMENT REQUIRED FOR PERMANENT REGISTRATION

PHOTOSTAT ATTESTED COPY OF FOLLOWING DOCUMENTS :

1. Matric Certificate (Board) in support of date of birth
2. 10+2 Detail Mark Card
3. Ist, IInd , IIIrd Prof. Part-I, & Part II Certificate
4. Attempt Certificate
5. Internship Completion Certificate
6. One Passport size photograph attested by the Principal Medical College or Ist Class Magistrate.
7. Two same print Coloured Non-attested Photograph
8. One same print Coloured Non Attested Stamp Size Photograph.
9. Provisional Registration Certificate in original
10. Domicile if Graduate out of Punjab
11. Self declaration if graduate out of Punjab (as per Format)
12. Screening test certificate if graduate out of India
13. One file cover
14. If Registered provisionally from Punjab Medical Council, Registration Fee Rs. 2000/- by way of Bank Draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali
15. If Registered provisionally out of state fee Rs. 3000/- by way of Bank Draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali
16. Late fee if applied after one year of completion of internship Rs. 1000/- per year by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali
17. Application form duly filled by the candidate
18. **Personal Appearance must**

FORMAT OF SELF DECLARATION IF GRADUATE OUT OF PUNJAB.



I _____ S/o / D/o _____
R/o _____ do hereby solemnly
affirm and declare as under :-

1. That I have passed M.B.B.S. Ist Prof from _____ under Roll No. _____, held in _____, 2nd Prof. _____ from under Roll No. _____, held in _____ 3rd Prof. _____, under Roll No., held in _____. I have also completed Internship from Medical College _____.

2. That I have applied for Permanent Registration with the Punjab Medical Council.

3. That I have not been Permanent Registered with Medical Council of India or Medical Council of any State till date.

4. That I do hereby undertake that, in future, or any stage, any complaint or guilty is proved against me regarding geniuses or my M.B.B.S. certificate and Internship Completion Certificate. The Punjab Medical Council can cancel my Permanent Registration.

SIGNATURE OF DOCTOR *

VERIFICATION:-

Verified that above statement of mine is true and correct to the best of my knowledge and nothing has been concealed therein.

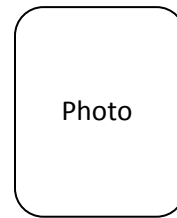
Place _____ :

Date : _____

SIGNATURE OF DOCTOR *

* **Signature in presence of President, Registrar or Superintendent Punjab Medical Council**

Format of self declaration :- Reason of delay for Permanent Registration



I _____ S/o _____ / D/o _____
R/o _____ do hereby solemnly
affirm and declare as under :-

1. That I have passed M.B.B.S. Ist Prof from _____ under Roll No. _____, held in _____, 2nd Prof. _____ from under Roll No. _____, held in _____ 3rd Prof. _____, under Roll No., held in _____. I have also completed Internship from _____ Medical College _____.
2. That I have applied for Permanent Registration with Punjab Medical Council.
3. That I have not been Permanently Registration with Medical Council of India or Medical Council of any State till date.
4. That there has been delay in getting the registration done. (Reason of Delay) _____ and did not undertake any unethical practice.
5. That I do hereby undertake that, in future or at any stage any complaint or guilty is proved against me regarding genuine of my M.B.B.S. Certificate & Internship Completion Certificate. The Punjab Medical Council can cancel my Permanent Registration.

SIGNATURE OF DOCTOR *

VERIFICATION:-

Verified that above statement of mine is true and correct to the best of my knowledge and nothing has been concealed therein.

Place:

SIGNATURE OF DOCTOR *

Date

:

***(Signature in presence of President, Registrar or Superintendent Punjab Medical Council)**

DOCUMENT REQUIRED FOR REGISTRATION TRANSFER

PHOTOSTAT ATTESTED COPY OF FOLLOWING DOCUMENTS :

1. Proof of Date of Birth:- Matric Certificate/ Municipal Committee Birth Certificate/ PAN Card etc.
2. Photostat attested copy of degree.
3. Internship Completion Certificate
4. One Passport size photograph attested by the Principal Medical College or Ist Class Magistrate.
5. Two same print Coloured Non-attested Photograph
6. One same print Coloured Non Attested Stamp Size Photograph
7. Photostat attested copy of Permanent Registration Certificate.
8. Screening test pass certificate in graduate out of India.
9. Application form duly filled by the candidate
10. One file cover
11. **Registration Fee Rs. 3000/- & NOC fee will be charged extra if registered with :-**
 - i. Karnataka Medical Council B..D. Rs. 1000/-
 - ii. Tamilnadu Medical Council B.D. Rs. 1000/-
 - iii. Bihar Medical Council B.D. Rs. 500/-
 - iv. Madhya Pradesh Medical Council B.D. Rs. 500/-
 - v. Andhra Pradesh Medical Council B.D. Rs. 200/-
 - vi. Orissa Medical Council B.D. Rs. 100/-
 - vii Sikkim Medical Council B.D. Rs. 1000/-
 - viii Jharkhand Medical Council B.D. Rs. 500/-

By way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

12. **Personal Appearance must**

DOCUMENT REQUIRED FOR ADDITIONAL QUALIFICATION REGISTRATION

PHOTSTAT ATTESTED COPY OF FOLLOWING DOCUMENTS :-

1. Recognized qualification Postgraduate Degree/Diploma.
2. Photostat Attested Copy of Permanent Registration Certificate
3. Photostat Attested Copy of Renewal Registration Certificate.
4. One photo attested by the Member Punjab Medical Council/ Principal, Medical College or Civil Surgeon.
5. One photo alongwith specimen signature attested by the Member Punjab Medical Council/ Principal, Medical College or Civil Surgeon.
6. 2 Same print non-attested photograph.
7. One stamp size photograph.
8. **Registration Fee Rs. 1000/- (per qualification) by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali**
9. Application form duly filled by the candidate

DOCUMENT REQUIRED FOR RENEWAL REGISTRATION CERTIFICATE

1. Photostat attested Copy of Permanent Registration
2. 2 Attested & 2 Non Attested Photographs
3. Registration fee Rs.1000/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali
4. Application form duly filled by the candidate

DOCUMENT REQUIRED FOR NO OBJECTION CERTIFICATE / MIGRATION

1. Application request on plain paper
2. Permanent Registration Certificate in Original.
3. Fee Rs. 5000/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

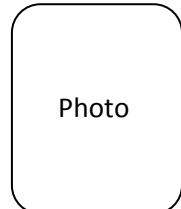
**DOCUMENT REQUIRED FOR GOOD STANDING/ VERIFICATION CERTIFICATE
FROM PUNJAB MEDICAL COUNCIL**

1. Application form alongwith request on plain paper.
2. Photostat Attested copy of Permanent Registration
3. Photostat Attested Copy of Additional Registration if any.
4. Photostat Attested Copy of Renewal Registration Certificate
5. Two testimonial character and conduct in original attested by the Member of Parliament/ MP/ MLA/ Magistrate/ Principal Medical College/ Gazetted Officer or from other persons of similar status
6. Self declaration (Format enclosed)
7. Affidavit if candidate residing out of India (format enclosed)
8. **Fee Bank Draft Rs. 2000/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali**

DOCUMENT REQUIRED FOR GOOD STANDING CERTIFICATE FROM MCI

1. Application form download from MCI website i.e. www.mciindia.org along with duplicate copy
2. Photostat Attested copy of Permanent Registration
3. Photostat Attested Copy of Additional Registration if any.
4. Photostat Attested Copy of Renewal Registration Certificate
5. Two testimonial character and conduct in original attested by the Member of Parliament/ MP/ MLA/ Magistrate/ Principal Medical College/ Gazetted Officer or from other persons of similar status
6. Self declaration (format enclosed)
7. Affidavit if candidate residing out of India (format enclosed)
8. Good Standing Fee check from MCI website i.e. www.mciindia.org.
9. **Good Standing case forwarding charges Rs. 2000/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali**

FORMAT OF SELF DECLARATION / AFFIDAVIT



I _____ S/o / D/o _____
R/o _____ do hereby solemnly
affirm and declare as under :-

1. That my Punjab Medical Council Registration No. is _____.
2. That I am not involving Moral Turpitude/Criminal Case nor any such case is pending against me in any court of law in India.
3. That the above given statement of my is correct & True.
4. That if at any later stage the above said statement is found to be false/incorrect the Good Standing Certificate being issued to me may be cancelled and I shall have no Objection to the same.

SIGNATURE OF DOCTOR *

VERIFICATION:-

Verified that the above given contents of my this self declaration are correct & True to the best of my knowledge and belief and noting has been concerned therein

Place _____ :

Date : _____

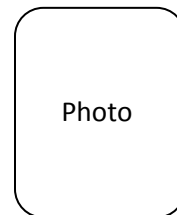
SIGNATURE OF DOCTOR *

* **Signature in presence of President, Registrar or Superintendent Punjab Medical Council**

**DUPLICATE PERMANENT / PROVISIONAL/ ADDITIONAL REGISTRATION
CERTIFICATE PHOTOSTAT ATTESTED COPY OF FOLLOWING DOCUMENTS**

1. Self declaration (demand regarding duplicate registration certificate)
(* Format attached)
2. Copy of F.I.R./DDR
3. 2 pass port size colour photograph one attested by the Magistrate/ Member Punjab Medical Council/ Principal Medical College/ Civil Surgeon.
4. Fee Duplicate Permanent 2000/-, Duplicate Provisional 1000/- and Duplicate Additional 1000/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali .

Format of self declaration :- For Duplicate Registration Certificate



I _____ S/o / D/o _____
R/o _____ do

hereby solemnly affirm and declare as under :-

1. That my Punjab Medical Council's Permanent / Provisional / Additional Registration No. is _____.
2. That I had lost my registration certificate somewhere.
3. That I made effort to trace it out but all in vain .
4. That If it is found in the near future, I will not misuse it and will deposit the same with the office.

SIGNATURE OF DOCTOR *

VERIFICATION:-

Verified that the above given contents of my this self declaration are correct & True to the best of my knowledge and belief and noting has been concerned therein

Place:

Date :

SIGNATURE OF DOCTOR *

***(Signature in presence of President, Registrar or Superintendent Punjab Medical Council)**

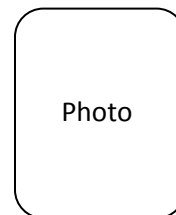
RESTORATION OF NAME

1. Application request on plain paper
2. Fee Rs.1000/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

Re-issue of registration fee

Doctors having Old certificate may also be allowed to get newer version of certificate on a nominal fee Rs. 1000/- (by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali) after surrendering the old certificate.

Format of self declaration



I _____ S/o / D/o _____
R/o _____ do
hereby solemnly affirm and declare as under :-

1. That I shall abide by the rules and regulations of the council and shall not be giving/ inserting any objectionable advertisements in the newspaper/ pamphlet/ news channel/ magazines in future in accordance with the clause 6.1 of Code of Medical Ethics cited in professional conduct Etiquette and Ethics regulations 2002 & 2004.
2. That in case of any contravention of this declaration I shall be responsible for all the legal consequences arising therefrom.

SIGNATURE OF DOCTOR *

VERIFICATION:-

Verified that the contents of the aforesaid are true and correct to the best of my knowledge and belief and no part of it is false for the same.

SIGNATURE OF DOCTOR *

***(Signature in presence of President, Registrar or Superintendent Punjab Medical Council)**