

ANY TYPE OF REGISTRATION FEE WILL BE ACCEPTED IN SHAPE OF BANK DRAFT ONLY

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 & Other Charges Rs. 650/- 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 (Format Enclosed)
9. Screening test certificate if graduate out of India.

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 Coloured Non-attested Photograph
7. One Coloured Non Attested **Stamp Size** Photograph.
8. Provisional Registration Certificate in original
9. Domicile if Graduate out of Punjab
10. Self declaration if graduate out of Punjab
11. Screening test certificate in graduate out of India
12. One file cover
13. If Registered provisionally from Punjab Medical Council, Registration Fee and Other Charges Rs. 1350/- by way of Bank Draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali
14. If Registered provisionally out of state fee & other charges Rs. 1850/- by way of Bank Draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali
15. Late fee if applied after one year of completion of internship Rs. 200/- per year by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali
16. Personal Appearance must

NO OBJECTION CERTIFICATE

1. Application
2. Attested photocopy of registration
3. Fee Rs. 1030/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

ADDITIONAL QUALIFICATION REGISTRATION :

PHOTostat ATTESTED COPY OF FOLLOWING DOCUMENTS :

1. Recognized qualification Postgraduate Degree/Diploma.
2. Photostat Attested Copy of Permanent Registration
3. Photostat Attested Copy of Renewal Registration Certificate.
4. One photo alongwith specimen signature attested by the Member Punjab Medical Council/ Principal, Medical College or Civil Surgeon.
5. 2 Same print non-attested photograph.
6. One stamp size photograph.
7. Registration Fee and other charges Rs. 750/- (per qualification) by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

PUNJAB MEDICAL COUNCIL GOOD STANDING/ VERIFICATION CERTIFICATE

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 and other charges Bank Draft Rs. 1050/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

MEDICAL COUNCIL OF INDIA , GOOD STANDING CERTIFICATE

1. Application form 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. 550/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

DUPLICATE PERMANENT 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 Rs. 850/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

DUPLICATE ADDITIONAL QUALIFICATION REGISTRATION CERTIFICATE

PHOTOSTAT ATTESTED COPY OF FOLLOWING DOCUMENTS

1. Self declaration (demand regarding duplicate registration certificate) (* Format attached)
5. Copy of F.I.R./DDR
6. 2 pass port size colour photograph one attested by the Magistrate/ Member Punjab Medical Council/ Principal Medical College/ Civil Surgeon.
7. Fee Rs. 750/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali, Payable at Mohali

DUPLICATE PROVISIONAL 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. 1 passport size colour photograph one attested by the Magistrate/ Member Punjab Medical Council/ Principal Medical College/ Civil Surgeon.
4. Fee Rs. 450/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

RENEWAL REGISTRATION CERTIFICATE

1. Photostat attested Copy of Permanent Registration
2. 2 Attested & 2 Non Attested Photographs
3. Registration fee & other charges Rs.550/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali
4. If required I-card, Rs. 100/- will be charged extra by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

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. Two Coloured non-attested Photograph
5. One Coloured Non Attested **Stamp Size** Photograph.
6. Photostat attested copy of Permanent Registration Certificate.
8. Screening test pass certificate in graduate out of India.
9. One file cover
10. Registration Fee and Other Charges Rs. 1850/- & 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

RESTORATION OF NAME

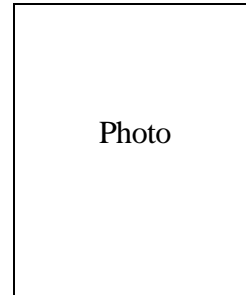
1. Application
2. Fee Rs.500/- by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali, Payable at Mohali

Re-issue of registration fee

Doctors having Old certificate may also be allowed to get newer version of certificate on a nominal fee Rs. 250/- (by way of bank draft only in favour of Registrar, Punjab Medical Council, Mohali) after surrendering the old certificate.

For Provisional Registration if graduate out of Punjab

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 :

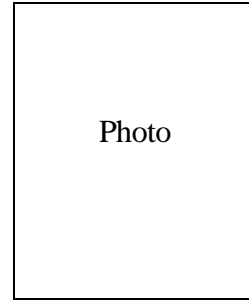
Date :

SIGNATURE OF DOCTOR *

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

For Permanent Registration
(Reason of Delay)

SELF DECLARATION



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

1. That I have passed M.B.B.S. Ist Prof. from _____ Medical College _____, under Roll No. _____, 2nd Prof from _____ Medical College, _____ under Roll No. _____, Final Part-I from _____ Medical College _____ under Roll No. _____, Final Part-2 from _____ Medical College _____ 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 genuines 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.

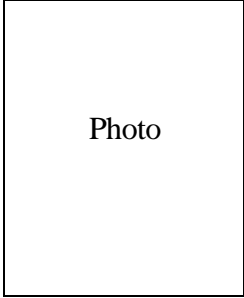
Place:
Date :

SIGNATURE OF DOCTOR *

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

For Permanent Registration if graduate out of Punjab

SELF DECLARATION



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

5. 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 _____.
6. That I have applied for Permanent Registration with the Punjab Medical Council.
7. That I have not been Permanent Registered with Medical Council of India or Medical Council of any State till date.
8. 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)

Affidavit format of Good Standing Certificate on Rs. 15/- stamp paper attested by the Notary Public

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.

Deponent

Verification

Verified that the above given contents of my affidavit are correct & True to the best of my knowledge and belief and noting has been concealed therein.

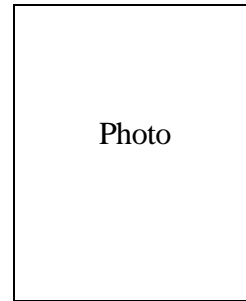
Place :

Deponent

Dated :

For Good Standing Certificate

SELF DECLARATION



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 Trupitude/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 :

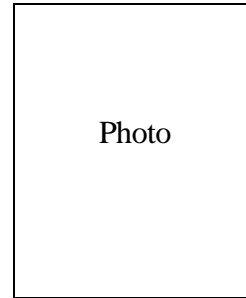
Date :

SIGNATURE OF DOCTOR *

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

For Duplicate Certificates

SELF DECLARATION



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

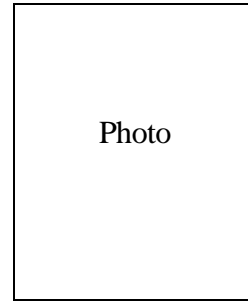
Place:

Date :

SIGNATURE OF DOCTOR *

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

SELF DECLARATION



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

1. That I shall be 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 sited in professional conduct, Etiquette and Ethics regulations 2002 & 2004.
2. That in case of any contravention of this declaration I shall be responsible for at the legal consequences arising there from.

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)