

PUNJAB MEDICAL COUNCIL

SCO NO. 25, PHASE 1, MOHALI-160055

Tel. 0172-2265104, Fax 0172-2266913,

ADDITIONAL QUALIFICATION REGISTRATION APPLICATION FORM

1. Name of the Doctor
(In Block Letters)
2. Father's Name
3. Present/Correspondence Address.....
Telephone No.
Mobile No./
E-Mail / Fax No.
4. Permanent Address
&
Telephone No.
5. Permanent Registration No. & Dates.....
6. Attested copy of Recognised
Qualification with name of
University & year of obtaining
the same.
7. Fee Rs. 750/- By Bank Draft (Per Qualification) once paid not refundable.

4 Coloured
Photographs
Two Attested
Two Non Attested

ONE ATTESTED
PHOTO
PASTE HERE &
ONE ON
SPECIMEN
SIGNATURE FORM.

Draft to be made in favour of Registrar, Punjab
Medical Council payable at Mohali/ Chandigarh.

Date..... Signature of
the candidate.....

I solemnly affirm and declare that the above entries are correct.

Signature of
the candidate.....

FOR OFFICE USE ONLY

Registration No. _____ Dated _____ 200

Cash Receipt No. _____ Dated _____ 200

Despatch No. _____ Dated _____ 200

Please turn over for instructions

**INSTRUCTIONS/ DOCUMENTS REQUIRED FOR ADDITIONAL QUALIFICATION
REGISTRATION :**

PHOTOCOPY ATTESTED COPY OF FOLLOWING DOCUMENTS :

1. Recognised qualification Postgraduate Degree/Diploma.
2. Photostat Attested Copy of Permanent Registration
3. Photostat Attested Copy of Renewal Registration
4. Two photo alongwith specimen signature attested by the Member Punjab Medical Council/
Principal, Medical College or Civil Surgeon to be pasted on the Application and specimen
signature form.
5. 2 Same print non-attested photograph.
6. One stamp size photograph for I.Card.
7. Registration Fee and other charges Rs. 750/-.By way of Bank Draft (per qualification).
8. Draft to be made in favour of Registrar, Punjab Medical Council payable at Mohali/ Chandigarh.

**Specimen Signature & Photo Attested by the Member
Punjab medical Council/ Principal Medical College or Civil Surgeon.**

PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC

PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC

PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC

PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC
PMC PMC PMC PMC PMC PMC PMC PMC

**Coloured Photo
Paste here, photo
should be attested
by Member
Punjab Medical
Council/ Principal
Medical College or
Civil Surgeon.**

**Signature should be attested by the Member
Punjab medical Council/ Principal Medical College
Or Civil Surgeon.**