

# 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. 1000/- 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.

Bank Draft No. .... dated .....

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 \_\_\_\_\_ 20

B.D. Receipt No. \_\_\_\_\_

Dated \_\_\_\_\_ 20

Despatch No. \_\_\_\_\_

Dated \_\_\_\_\_ 20

Please turn over for instructions

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

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**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.**

## **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