

Complaint Form

Step 1: Click on Log In button on right side of Home Page



[Home](#) [Acts](#) [Members](#) [Registration](#) [CME](#) [Elections](#) [Complaint](#) [Registration Fee](#) [Latest News](#) [RTI](#) [Contact](#) [Help](#) [Log In](#)

BETA

Punjab Medical Council

A Statutory Body constituted under the Punjab Medical Registration Act, 1916 & the Punjab Medical Registration (Amendment) Act, 2010. Punjab Medical Council is vested with powers, duties and function of regulating the practice of Modern Scientific System of Medicine. (Allopathy)

Punjab Medical Council Registration

One main function of the Medical Council is to provide for the registration of all doctors and to maintain an up to date register of all medical practitioners. Any person who possesses the necessary qualification/qualifications as prescribed in the Medical registration act and has passed all the necessary medical exams and wants to practice in the state of Punjab can register himself with the Punjab Medical Council. The Punjab Medical Council registration will be considered provided it follows all the norms and conditions laid down by this body. Even those persons who have passed any entrance exam of any medical institution in India and have gained admission in the said institution can get registered provisionally. If a person already registered with the council has acquired some additional qualifications, he can get those qualifications also registered with the council.



Medical Council

The Medical Council consists of different committees like the Disciplinary Committee, Ethical Committee, Executive Committee, CME Committee, and Computerization Committee & Accounts Committee. Each of this Committee has its own functions and duties. Doctors who are registered with Medical Council have many rights and privileges, at the same time, these medical professionals have to follow the code of ethics & standards of good practice set up by the Medical Council for the treatment of patients.



 [PUBLIC NOTICE-RENEWAL OF REGISTRATION](#)

 [CME GUIDELINES](#)

 [RIGHT TO SERVICE](#)

Step 2: A login window will appear in which you have to enter login credentials that you have received in email from Punjab Medical Council.

Punjab Medical Council
सत्यमेव जयते
PMC-1916

Home Acts Members Registration▼ CME▼ Elections▼ Complaint Registration Fee Latest News▼ RTI Contact▼ Help Log In

Email / Mobile

Password

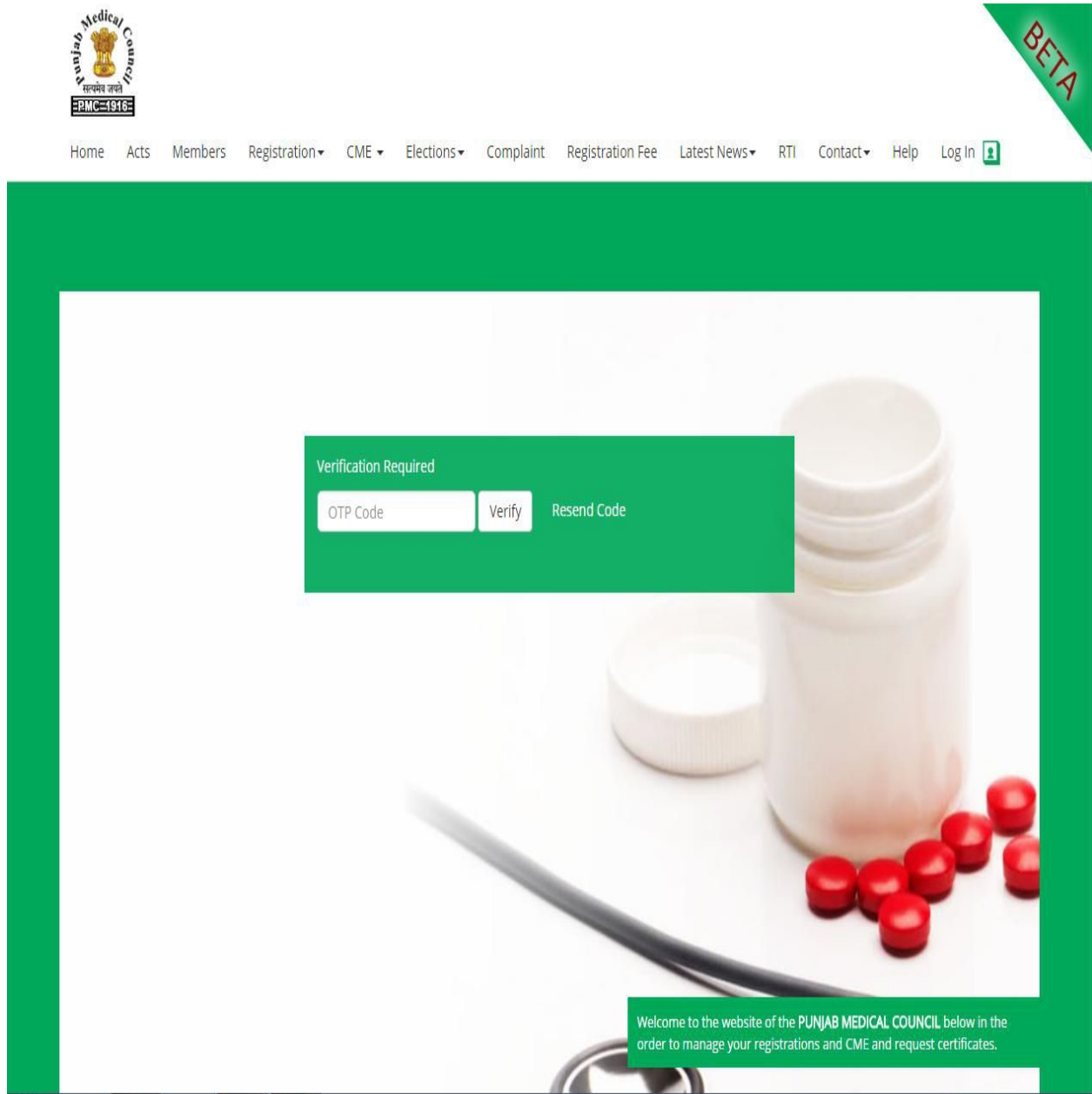
LOGIN

[PMC Old Registration? / Registration Transfer? / Forgot Password?](#)

Welcome to the website of the PUNJAB MEDICAL COUNCIL, below in the order to manage your registrations and CME and request certificates.

BETA

Step 3: After Login you have to provide OTP which you will receive on your registered mobile number.



The screenshot shows the Punjab Medical Council website interface. At the top left is the council's logo, which includes the text "Punjab Medical Council" and "PMc-1916". To the right of the logo is a green diagonal banner with the word "BETA" in white. Below the logo is a horizontal navigation menu with the following items: Home, Acts, Members, Registration, CME, Elections, Complaint, Registration Fee, Latest News, RTI, Contact, Help, and Log In. The main content area features a large green border. Inside this border, there is a white background image of a white pill bottle with its cap off, several red capsules, and a stethoscope. Overlaid on this image is a green dialog box titled "Verification Required". The dialog box contains a text input field labeled "OTP Code", a "Verify" button, and a "Resend Code" button. At the bottom right of the main content area, there is a green box with white text that reads: "Welcome to the website of the PUNJAB MEDICAL COUNCIL, below in the order to manage your registrations and CME and request certificates."

Step 4: Here you will see General Instructions regarding registrations from Punjab Medical Council; you have to read these thoroughly and click on the check box and then click on “Continue” button.



Last Login On 18-07-2016 At 3:56:40 PM

BETA

Home Acts Members Registration CME Elections Complaint Registration Fee Latest News RTI Contact Help Neha

General Instructions for Online Registrations

1. Carefully choose the application you want to apply for through online from the homepage and proceed by entering all the details required as part of the application.
2. Candidates are required to have a valid personal e-mail ID. In case a candidate does not have a valid personal e-mail ID, he/she should create his/her new e-mail ID before applying online.
3. The name of the candidate or his/ her father etc should be spelt correctly in the application as it appears in the certificates issued from other council or MCI.
4. After submission of application the system will ask to preview the detail. Please ensure to check the details no request for edit will be allowed after the proceed button is clicked.
5. After you click the submit button your LOGIN is created and your login detail will be mailed at your registered email id as mentioned in the application form. In case due to any reason you are not able to make the payment or upload the documents, please login with login details as mailed to you email id after finishing the signup. After Login the option for retry payment and retry documents is shown on clicking you are able to finish the process and acknowledgement is generated.
6. On successful submission of application, the system will generate a unique Case ID (Case ID) for the application. You should note remember your system generated Case ID. (Case ID) for future reference and use.
7. On successful submission the system will ask to upload the documents. Kindly upload the documents as per documents type. Documents are to be uploaded in particular order no request for wrong upload will be entertained later.
8. The system will provide you with "Acknowledgment" option on successful submission of application online.
9. No photocopy of any documents need to be submitted when documents are verified at registration counter.

Declaration:

Each applicant at the time of making an application for registration under then provisions of the act, shall be provided a copy of the declaration and shall submit a duly signed declaration as provided in appendix. The applicant shall also certify that he/she has read and agreed to abide by the same.

Please read these instructions carefully, because if application forms are not well filled in, they may be rejected and not evaluated for the selection.

Continue

Enter your email address

Subscribe

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Step 5: Here you will see Instruction for proceeding with Complaint form, you have to read and click on agree check box and then click on “Continue” button.



Last Login On 28-07-2016 At 12:25:38 PM

Home Acts Members Registration CME Elections **Complaint** Registration Fee Latest News RTI Contact Help Neha

BETA

Instructions for Complaint

Choose Language [English](#) [Punjabi](#)

1. Incomplete applications shall not be entertained by the council.
2. Persons Below Poverty Line (BPL) shall not have to pay any fees for the original complaints provided that a certificate issued by a government Authority/attested copy of the BPL Card issued by the Competent Authority is attached with the complaint/appeal.
3. Applicant to attach the affidavit with the complaint as per given proforma on Rs.50/-stamp paper duly attested by notary public.

Self Attested Verification:

!! Please read these instructions carefully because if application forms are not well filled in, they may be rejected and not evaluated for the selection. **!!**

I hereby affirm and declare that the information provided above are true to the best of my knowledge and belief and nothing has been concealed therein.

Continue


Enter your email address

Subscribe

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Step 6: Here you have to upload all the mentioned documents. Please upload .jpg, .png, .pdf, .doc, .docx and .jpeg only and size should be less than 2MB for each type of file.

Last Login On 19-07-2016 At 4:25:09 PM

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BETA

Complaint Form

Download the format of affidavit and fill this form before upload.

Format of Affidavit Download

Affidavit	<input type="text"/> Choose file
Name of the Complainant:	<input type="text"/>
Father Name:	<input type="text"/>
Full Postal Address of the Complainant:	<input type="text"/>
City	<input type="text"/>
District	<input type="text"/>
State	<input type="text"/>
Pin Code	<input type="text"/>
Telephone No.	<input type="text"/>
(Office)	<input type="text"/>
(Residence)	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Does the Complainant Belongs to Bpl Category:	YES <input type="radio"/> NO <input type="radio"/>
If Yes, Proff May Be Submitted and Listed Below	<input type="text"/> Choose file
The Name and Addresses Along With Particulars of the Doctor(S) Against Whom Complaint is Lodged	
Name of the Doctor:	<input type="text"/>
Registration Number if Available:	<input type="text"/>
(Name of the State Medical Council)	<input type="text"/>
Address: Residential	<input type="text"/>
Clinic / Hospital	<input type="text"/>
Pin Code	<input type="text"/>
Telephone No.	<input type="text"/>
Mobile No.	<input type="text"/>
Office No.	<input type="text"/>
Nature of the Complaint / Allegations in brief along with record (In case complaint is against doctor)	<input style="height: 40px;" type="text"/>
Please schedule your appointment	Date <input type="text"/> Time <input type="text"/>
<input type="checkbox"/> I Hereby Affirm and Declare that the information Provided Above are True to the Best of my Knowledge and Belief and Nothing has Been Concealed Therein.	
Submit	

 Subscribe

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Step 7: After uploading all documents, you receive a message that your information has been uploaded successfully. The next step will be to proceed with the payment. Click on “Pay Now” to proceed further.



Last Login On 19-07-2016 At 4:25:09 PM

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Thank you

Your Information Has Been Uploaded Successfully.

- Application Type : Complaint
- Full Name : Mrs. Neha Sharma
- Email : neha.sharma@ldh.01s.in
- Mobile No : 8284000670
- Complaint Fee : RS. 200
- Bank charges : RS. 0
- Internet charges : RS. 12

[Pay Now](#)

[Subscribe](#)

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Step 8: You will see a screen from SBlePay that will ask for your Billing Address Details, after filling all information click on "Proceed" button.

SBlePay Punjab Medical Council Semi Govt

Transaction Details	Order Number PRO2543	Amount 1.00 INR + Convenience Fee if applicable will be charged to you.
----------------------------	----------------------	---

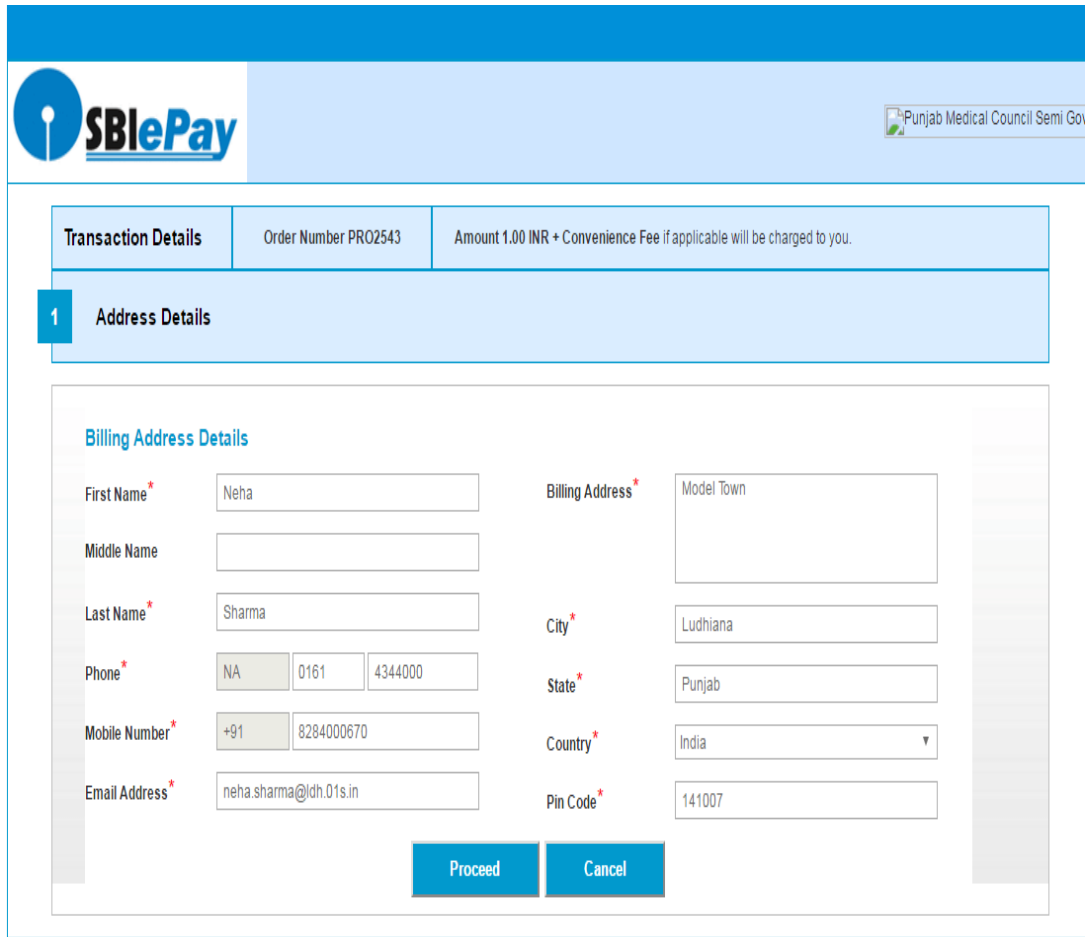
1 Address Details

Billing Address Details

First Name *	<input type="text" value="Neha Sharma"/>	Billing Address *	<input type="text"/>
Middle Name	<input type="text"/>		
Last Name *	<input type="text"/>	City *	<input type="text" value="Ludhiana"/>
Phone *	<input type="text" value="NA"/> <input type="text" value="NA"/> <input type="text" value="NA"/>	State *	<input type="text" value="Punjab"/>
Mobile Number *	<input type="text" value="+91"/> <input type="text" value="8284000670"/>	Country *	<input type="text" value="India"/>
Email Address *	<input type="text" value="neha.sharma@ldh.01s.in"/>	Pin Code *	<input type="text" value="141007"/>



Step 9: You will see a screen from SBlePay that will ask for your Billing Address Details, you can also choose Shipping Address same as your Billing Address. After filling all information click on “Proceed” button.




The image shows a web form for SBlePay. At the top left is the SBlePay logo. At the top right is a browser tab titled "Punjab Medical Council Semi Govt". Below the header is a "Transaction Details" section with "Order Number PRO2543" and "Amount 1.00 INR + Convenience Fee if applicable will be charged to you." Below this is a "1 Address Details" section. The main form is titled "Billing Address Details" and contains the following fields:

First Name *	<input type="text" value="Neha"/>	Billing Address *	<input type="text" value="Model Town"/>
Middle Name	<input type="text"/>		
Last Name *	<input type="text" value="Sharma"/>	City *	<input type="text" value="Ludhiana"/>
Phone *	<input type="text" value="NA 0161 4344000"/>	State *	<input type="text" value="Punjab"/>
Mobile Number *	<input type="text" value="+91 8284000670"/>	Country *	<input type="text" value="India"/>
Email Address *	<input type="text" value="neha.sharma@ldh.01s.in"/>	Pin Code *	<input type="text" value="141007"/>

At the bottom of the form are two buttons: "Proceed" and "Cancel".



Step 10: In this step you have to choose from Net Banking, Credit Card, Debit Card and Mobile Payments with which you choice you want to pay.

Punjab Medical Council Semi Govt

Transaction Details	Order Number PRO2543	Amount 1.00 INR + Convenience Fee if applicable will be charged to you.
----------------------------	----------------------	---

1 Address Details

Shipping address same as billing address Yes No

Payment Details







Net Banking

Credit Card

Debit Card

Mobile Payments

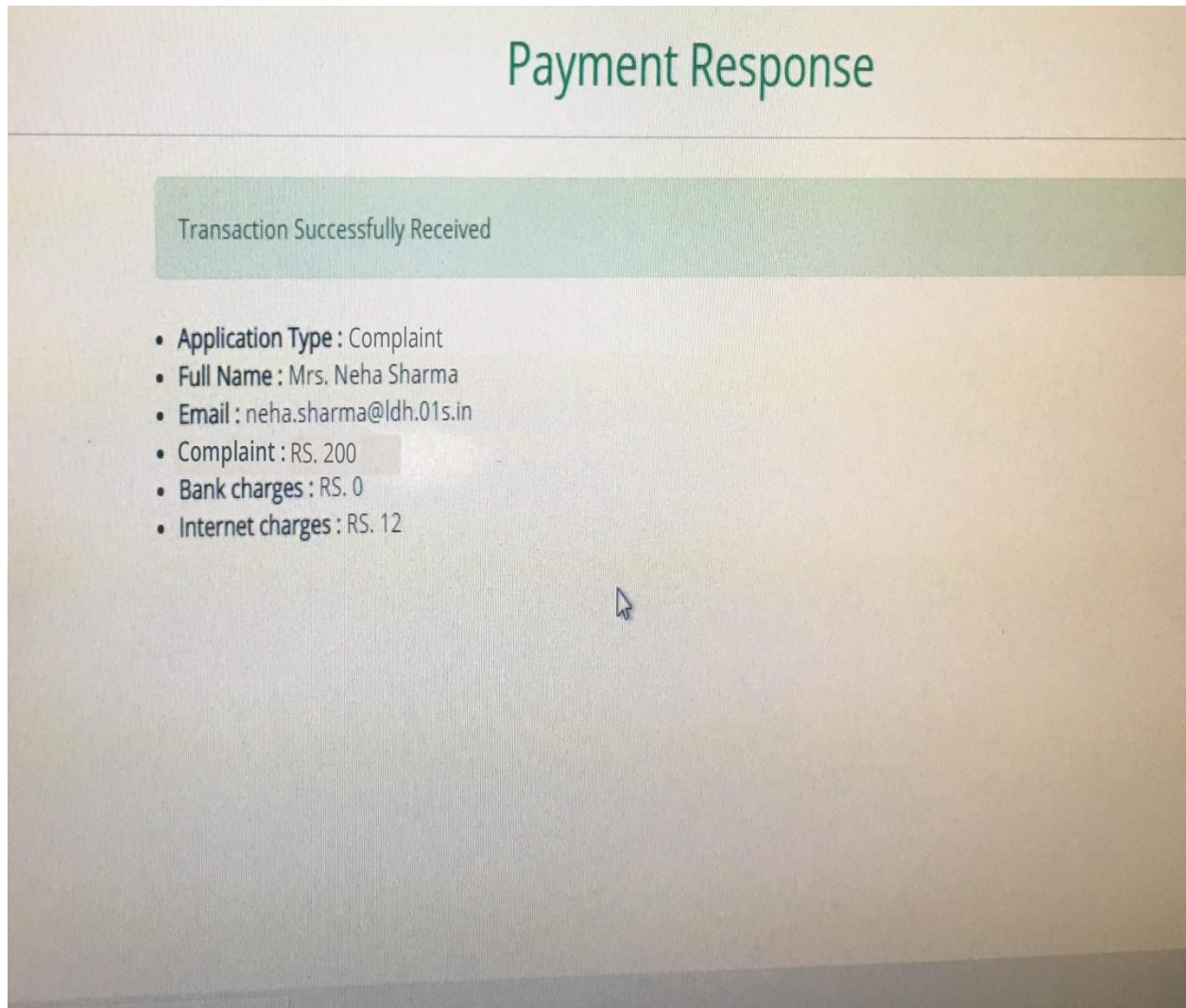
State Bank Associate Banks


Other Banks



Step 11: After submitting your payment, you will see confirmation message regarding payment.



Step 12: After payment confirmation, you will see receipt of your application, you can take print out of this receipt for your future reference.

	Application Ref No. RT312	
	Appointment: 19th July, 2016 12:00	
	System ID: 2428	
	Signature:	
Personal Information		
Applied For:	Complaint	
Name:	Dr. Neha Sharma	Please fix your photo
Father Name:	Mr. Myank Uday Charaya	
Date of Birth:	4th September, 1981	
Gender:	Male	
Course:	MBBS	
University Name:	Gujarat University	
College Name:	B..J.M.C	
Contact Information		
Residence Address:	82-83 , Golden Avenue Phase-1 Roorkee Road , Meerut , U.P.	
Mobile No. :	8284000670	
Email ID:	neha.sharma@gmail.com	
Internship Details		
Internship Joining Date:	16th September, 2005	
Internship Completion Date:	15th September, 2006	