

TRAVANCORE-COCHIN COUNCIL OF MODERN MEDICINE

APPLICATION FOR UPDATING THE REGISTER AND FOR ISSUE OF

NEW HIGH SECURITY CERTIFICATE OF REGISTRATION Name (in block letters) :: Permanent Address ::

3. If there is change in address; Give the new address ::

1.

2.

4. Phone numbers & e-mail ID ::

5. Father's Name ::

6. Date of birth (in figures) ::

> (in words) ::

Registration number and date of 7. Registration ::

8. Qualification ::

9. Name of the College ::

Name of the University 10. ::

11. Date of completion of internship ::

Additional qualifications registered 12. 1) with date of registration

2)

3)

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13. Whether holds registrat any other State Council	or MCI,
if so, Reg. No., Date an	d Period ::
14. Details of fee remitted:	Amount Rs
	Chalan receipt No.&Date
	DD No. & Date
	<u>Declaration</u>
I, Dr	, do hereby declare that the details given
above are true to the best of my	knowledge and belief.
Place:	Signature :
Date:	Name :

Instructions

- Original Registration Certificate should be surrendered along with the application. 1. Registration Certificates issued for additional qualifications need not be furnished.
- 2. Three passport size colour photos (identical) of which one should be affixed on a plain paper and certified to be the true likeness of the applicant by signing across the photo by a Gazetted Officer of the Kerala state with name, designation, office seal and date should be attached with the application.
- 3. Fee of Rs. 10,000/- (Rupees Ten Thousand only) should be remitted towards the cost of new certificate. Fee can be remitted by the special chalan issued by the Council at the SBI City Branch, Thiruvananthapuram or by D.D. from any Nationalized Bank payable at SBI City Branch, Thiruvananthapuram, drawn in favour of the Registrar, Travancore-Cochin Medical Councils, Red Cross Road, Thiruvananthapuram. Fee once remitted shall not be refunded under any circumstances.
- 4. Self addressed, cloth-lined envelop (30 cms x 26 cms) with stamp of Rs. 41/- should be attached for sending the new Certificate by Registered Post.
- 5. Duly filled application along with all documents mentioned above should reach the office of the Registrar, Travancore-Cochin Medical Councils, Red Cross Road, Thiruvananthapuram -695035.