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KERALA STATE MEDICAL COUNCIL
COMBINED COUNCIL BUILDING, RED CROSS ROAD, THIRUVANANTHAPURAM, KERALA – 695 035

Attention

Specimen NOC for doing Internship in other State
Medical Councils as per the Council Decision dated
05/05/2023




REGISTRAR

**APPLICATION REQUESTING NO OBJECTION CERTIFICATE FOR
APPLYING FOR PROVISIONAL REGISTRATION WITH OTHER STATE
COUNCILS IN RESPECT OF FOREIGN MEDICAL GRADUATES**

- 1) Name :-
- 2) Address:-
- 3) Application Id & date of submitting hardcopy for Provisional Registration in Kerala State Medical Council:-
- 4) Whether Provisional registration has been received; if so Quote Provisional registration Number issued from this Council:-
- 5) Reason for applying for NOC:-
- 6) To Which Council NOC is required:-

DECLARATION

I understand that by receiving the NOC from this Medical Council for applying for provisional registration for Medical Internship with other State Medical Council, My Provisional registration application pending with Kerala State Medical Council will not be processed further until requested in writing by me with a **Non Utilization Certificate** of the NOC from the respective State Medical Council.



APPLICANT