

PUNJAB DENTAL COUNCIL

(S.C.O. 75, Sector - 40/C), Chandigarh. (Tel.0172-2693999)

www.punjabdentalcouncil.gov.in

FORM FOR RENEWAL OF REGISTRATION

(To be filled in by the candidate)

1. Name of Doctor _____
Registration No. _____
2. Father's Name _____
3. Last Registration/Renewal Valid Up to _____
4. **Qualifications:** _____
(Name of College / University with year
of Passing B.D.S. /M.D.S.) _____
5. **i)** Permanent Address _____
with Tel.No. & E-mail. _____
ii) Correspondence Address with Tel. _____
No. & E-Mail. _____
iii) Professional Address _____
6. Name & Full address of 2 eminent persons, who personally know the applicant and to whom a reference can be made (One should be a Dental Surgeon, registered with Punjab Dental Council & Write his Registration No.)
1.) _____
2.) _____
7. Reasons for not getting Renewal Up Date in time (Wherever applicable). _____

Dated: _____

Signature of the Applicant.

(For Office Use Only)

ਸਾਰੇ ਕਾਗਜ਼ ਮੁਕੰਮਲ ਹਨ। ਪ੍ਰਵਾਨ ਹੋਵੇ ਤਾਂ ਰਜਿਸਟਰੇਸ਼ਨ ਰੀਨਿਊ ਕਰ ਦਿੱਤੀ ਜਾਵੇ ਜੀ।

ਰਜਿਸਟਰਾਰ

ਸੁਪਰਡੈਂਟ

P.T.O.

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NOTE:

- 1.** The applicant will come personally for renewal of his / her registration along with Original Registration Certificate or an attested photocopy of the registration Certificate and one P.P. Size Photo duly attested

- 2.** In case a Dentist cannot come personally, he / she will submit his / her Form and Photo for renewal duly attested by any Member of the Punjab Dental Council / Notary Public / Gazetted Officer, with renewal fee, by post or through someone. Fee can be deposited in cash or Bank Draft favoring “Registrar Punjab Dental Council” payable at Chandigarh @ Rs.200/- per year (plus late fee wherever applicable), before 3 PM.

- 3.** The Dentists applying from foreign countries will get their renewal Form attested from the Notary Public or Solicitor or Attesting Authority of that Country (below their signatures), along with one P.P. Size Photo duly attested.

- 4.** Renewal of Registration will be done within 3 Working Days