**APPLICATION FORM FOR ADDITIONAL QUALIFICATION 2D BARCODE CERTIFICATE**

From

|  |  |  |  |
| --- | --- | --- | --- |
| Dr.  Reg.No :  S/o / D/o.  Address:  District :  Pincode: | | **Recent Passport**  **Size Photo to be affixed here** | |
|  | |
| To  The Registrar,  Tamil Nadu Homoeopathy Medical Council,  Arumbakkam, Chennai – 600 106.  Phone No: 044 - 26286458 |  | |  |
| Left Thumb impression  (for Male) | | Right Thumb impression  (for Female) |

Sir,

Sub. : Issue of 2D barcode certificate & Id card of M.D. (Hom) qualification.

I am enclosing my required documents and request you to provide Registration Certificate and Id card with 2D barcode of M.D. (Hom). I haven’t registered with any other state Council / Board in India. I am giving my Bio-data below.

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| Phone and Mobile No : |
| Email Address : |
| Date of Birth : |
| Place of Birth (District) : |
| Blood Group : |
| Studied College : Yours faithfully,  Studied University:  Date: |
| Place: (SIGNATURE) |

**Enclosures** :

1. Original Degree (or) Provisional certificate of additional qualification with copy (Front & Back) – with original
2. Rs.2000/- online payment through G-pay / Net Banking / DD In Favour of “The Registrar, Tamil Nadu Homoeopathy Medical Council, Arumbakkam, Chennai – 106. **A/c. No.10144208864, IFSC Code SBIN0006495**
3. Copy of Permanent Registration Certificate (Front & Back)
4. Recent Passport Size Photo – 2 Nos.
5. Copy of Part-I & II Marksheets (Attested by College Principal) – with original
6. Copy of SSLC & HSC Marksheets (Attested by College Principal)
7. Address Proof – copy of Aadhar card (Attested by College Principal)
8. Self Addressed Stamped (Rs.60/-) Cloth lined Cover (30×45) cms.