Form of application for Registration/Renewal of Veterinary Practitioner

To	
	The Registrar, Haryana Veterinary Council, Pet Animal Medical Centre, Sector 3, Panchkula.
Sir,	
	I request that my name, address and qualifications as stated below in the ation may be entered in the Haryana Veterinary Council register and I may be ned with a certificate of registration.
1.	Name
2.	Registration No.
3.	Father's/Husband's Name
4.	Date of Birth
5.	Present Address
6.	Professional Address
7.	Qualification
8.	Profession (Govt./Private/Retired)
9.	Tele. No
10.	E-mail
particu are tru	I enclose for your perusal and return the Certificate/Degree/Diploma in al and their attested copies for record. I hereby declare that I have read carefully and understand the instructions and alars stated in the rules Veterinary Council and that all entries in the application to the best of my knowledge and belief. I also send herewith the prescribed fee of Rs Vide Cash/Draft No (attached)
HVC' Accou	s Bank Details for Offline Payment: Int Name: Registrar, Haryana Veterinary Council & Branch: Union Bank of India, Devi Nagar, Sector 3, Panchkula Int No.: 520101038082353, IFSC: UBIN0918369
	Yours faithfully,

Signature (within box)