FORM IV- B
(See rule 4 (4).

S. No. _____

National Council for Homoeopathy

Fazil Town (Phase-I), Airport Link Road, Rawalpindi. Ph: 051-5409075, 5409003

Application for Renewal of Registration of Practitioners of Homoeopathic System of Medicine

Three Copies of Passport Size Photograph duly attested.

To,

The Registrar
National Council for Homoeopathy,
Islamabad.

Particulars of Applicant:

1. Name (in block letters): _____

2. Father's Name: _____

3. Address: (a) Present _____

_____

(B) Permanent _____

4. Date of Birth _____ In figures _____

5. Sex _____ 6. Religion _____

7. Nationality _____ 8. Identity Card No _____

9. NCH Registration Card No. _____

10. NCH Registration No. _____

Date of Renewal _____ Year of Registration _____

11. Professional Experience:-

(I) Teaching experience _____

(ii) Publications _____

(iii) Research _____

(iv) Practical Experience _____

(v) Basic Knowledge of Homoeopathy _____

I solemnly declare that the above information given by me is true to the best of my knowledge and belief and that nothing has been withheld or concealed.

I shall abide by the rules and regulations made under the Unani, Ayurvedic and Homoeopathic Practitioners Act, 1965.

Date. _____ (Signature of the Applicant)

CERTIFICATE

I Certify that the applicant who has put his signature in my presence is not related to me and that the particulars given by him are true to the best of my knowledge.

(Signature with designation and seal)

Note:-

I. The certificate must be signed by one of the following:-

(I District Coordination Officer (DCO),
(ii) Executive District Officer of Revenues (EDOR),
(iii) Superintendent/ Deputy Superintendent of Police,
(iv) Gazetted officer of grade 17 or above and
(v) Amember of the National Assembly or a Provincial Assembly

2. The application must be accompanied by:-

(A) A bank draft or postal order of Rs. 2228/- in favour of the Council as Renewal / Registration / Dr's id card fee.
(B) Three copies of passport size photograph of the applicant.
© Photostate of certificate of registration and NIC Card, duly attested by Gazatted Officer of grade 16 or above.

Grams "HOMCOUNCIL"
Phone : 051-9243605

Government of Pakistan

National Council for Homoeopathy

Fazal Town (Phase-I), Airport Link Road, Rawalpindi

Ref. No. NCH/F 8-6 /2017 -7021 **Dated:** 31st October 2017

The Principals of:
All Recognized Homoeopathic Medical Colleges

The Editors of:
All Homoeopathic Magazines / Journals

Subject: **VERIFICATION OF SECONDARY SCHOOL CERTIFICATES.**

It has been decided that no application for registration of Practitioners of Homoeopathic System of medicine and renewal of registration will be entertained by NCH unless it is accompanied by verified Secondary School Certificate from the concerned Board. This is one time exercise and kept as permanent record of NCH, for the all concerned. Your co-operation will be highly appreciated.

2. In case of non-verification of certificate from the Boards, the case will be returned unprocessed.

3. This issues with the approval of Administrator, NCH.

(Aamir Nadeem Ramay)
Registrar

Copy to:-

PA to Administrator, NCH