

Council of Homoeopathic System of Medicine – Haryana
Near Youth Hostel, Sector 3, Panchkula-134109

APPLICATION FOR ISSUANCE OF IDENTITY CARD

Name

Father's Name

Permanent Address

.....

Present Practice Address

.....

Registration Number

Sign of Identification

Date:

Signature of Practitioner

CERTIFICATE FROM GAZETTED OFFICER / PRESENT MEMBER OF THE
COUNCIL /MLA/M.P./SARPANCH.

Certified that I know Mr./Miss/Mrs.....

Son/Daughter/Wife of

He/She is practicing in Homoeopathic System of Medicine at the above mentioned address.

Name & Designation of
Attesting/Issuing Authority
With Stamp & Signature.

Note:

1. Send three passport size Photograph.
2. Two photograph should be attested by any Gazetted Officer/Present Member of the Council /M.P./MLA/Sarpanch.
3. Send Identity Card fee of Rs. 100/- only by Money Order or deposit in cash on any working day in council's office.