

বাংলাদেশ মেডিকেল এন্ড ডেন্টাল কাউন্সিল
BANGLADESH MEDICAL AND DENTAL COUNCIL

APPLICATION FOR PROVISIONAL/FULL REGISTRATION
ON THE REGISTER OF MEDICAL/DENTAL PRACTITIONERS

To
Registrar

Bangladesh Medical & Dental Council
203, Shaheed Syed Nazrul Islam Sarani
(Old 86, Bijoy Nagar)
Dhaka-1000

| Full Registration No. | Provisional Registration No. |
|-----------------------|------------------------------|
| A- | P- |

Sir
I request you that my name, address and qualifications as stated below, may be registered on the Register of Medical/Dental Practitioners under the Medical and Dental Council and that I may be furnished with a Certificate of Registration:

NAME IN FULL (IN BLOCK LETTERS AS ON CERTIFICATE)

ENGLISH:.....

BENGALI:.....

Father's Name:.....Mother's Name:.....Religion

Nationality:..... Date of Birth: Place of Birth Sex

Student Registration Number of BM & DC Student Registration Number of University.....

Admission Session

PERMANENT ADDRESS (IN BLOCK LETTERS)

ENGLISH:

BENGALI:

Vill./Area/House No. :.....
P.O :.....
P.S :.....
Dist :.....
Phone/Mobile:.....
E-mail:.....

গ্রাম/মহল্লা/বাসা নং :.....
পোস্ট :.....
থানা :.....
জেলা :.....
টেলিফোন/মোবাইল :.....
ই-মেইল :.....

PRESENT ADDRESS:

| Description of Qualifications of which Registrations is Desired | Name of the University | Examination Held in | | Name of the Medical/Dental College or Institution from which the applicant have appeared for the said Qualifying Examination |
|---|------------------------|---------------------|------|--|
| | | Month | Year | |
| | | | | |
| | | | | |

Yours faithfully,

Date :.....

.....
Full Name

SPECIMEN SIGNATURE OF MEDICAL/DENTAL PRACTITIONERS: →

- All Particulars above must be filled in by the applicant in his/her own handwriting and should be in neat legible hand.
- Registration Fees : MBBS/BDS Provisional = Tk-300/-, Registration Fess: MBBS/BDS Full Registration Tk-1,500/-, should be paid by Cash/Bank Draft/Pay Order payable to Bangladesh Medical & Dental Council.
Whoever practices allopathy system of Medicine or Dentistry without Registration shall be liable for punishment under Section 22 of Bangladesh Medical & Dental Council Act. 2010
- The name entered by applicants in their application must correspond in all respects with their name at the University or other Examination as the case may be.

Reference overleaf:

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Please note that:

1. Provisional Registration will be granted after production of Testimonial from the Head of the Institute from where he/ she is graduated. Provisional MBBS/BDS Certificate may be submitted if issued.
2. Full Registration will be granted after completion of Internship as per Proforma of Council & submission of Provisional Registration & Internship Certificate. Internship completed after obtaining Provisional Registration will only be accepted by the Council.
3. Full Registration will not be granted unless this application is accompanied by Original Degree/Diploma Certificate of the University together with a Photostat copy thereof.
4. All original Degree/Diploma/Provisional Certificates, Internship Certificate will be returned after final perusal only when accompanied with Photostat copies.
5. Three copies of recent passport size photograph of the applicant to be submitted with application attested on back side by the Principal of the respective College in case of fresh graduates & in case of re-registration attestation on back side shall be done by 1st Class Gazetted Officer or by Registered Medical Practitioner.
6. Original Registration Certificate of Erstwhile. E. Pak Medical Council is to be surrendered.
7. When registered, he/she will have to abide by the existing Rules & Regulation of the Council or Rules to be framed from time to time.
8. He/She should also sign the code of Medical Ethics declaration form and attach it with His/ Her application.
9. If at any stage the information submitted is found incorrect, registration will be cancelled.

(FOR OFFICE USE ONLY)

1. Passed the final M.B.B.S /B.D.S. Examination of the University verified vide Original Degree/ Provisional Certificate/Affidavit of the University or Licensing Body, Photostat copy duly attested submitted for perusal;
2. Surrendered Provisional Registration Certificate No..... Date of BM&DC
3. Prescribed Registration Fee has been received by Cash/Bank/Pay order Tk. and credited Vide Receipt No. Date :.....
4. Late Fee. Tk. Receipt No.: Date :.....
5. Urgent Fee. Tk. Receipt No. :.....Date :.....
6. Fee for loss of Provisional regn. Certificate Tk. Receipt No.: Date :.....
7. Duplicate Regn. Fee Tk..... Receipt No. :.....Date :.....
8. The Registration is valid and accepted registered vide Registration No.

Date. :.....

Registrar
Bangladesh Medical & Dental Council

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