

**455. 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 application may be entered in the Haryana Veterinary Council register and I may be furnished with a certificate of registration.

- 1. Name -----
- 2. Registration No. -----
- 3. Father's Name -----
- 4. Date of Birth -----
- 5. Present Address -----
- 6. Qualification -----
- 7. Phone No. -----
- 8. E-mail -----

I enclose for your perusal and return the Certificate Degree Diploma in original and their attested copies for record.

I hereby declare that I have read carefully and understand the instructions and particulars stated in the rules Veterinary Council and that all entries in the application are true to the best of my knowledge and belief.

I also send herewith the prescribed fee of Rs. ....Vide Cash Draft  
No.....dated.....(Attached)

Yours faithfully .....  
Signature .....  
Name .....  
Professional Address .....