



தமிழ்நாடு கால்நடை மருத்துவப் பேரவை
TAMILNADU STATE VETERINARY COUNCIL

(Constituted under Indian Veterinary Council Act 1984)

No.2, Pasumpon Muthuramalingam Salai, Nandanam, Chennai - 600 035.

Tele/Fax: 044-24310065, E-mail id: tnsvcchennai@gmail.com, website: www.tnsvc.org

FORM VII [See rule 9 (1)]
APPLICATION FOR REGISTRATION

From _____
DR. _____ **TNSVC Regn. No:** _____

Residential address Door no: _____

Street & Village: _____

Post & Taluk: _____

District & State: _____

Country & Pin code: _____

***Recent photo
to be pasted and
should be attested
by gazetted officer
other than
applicant

To

The Registrar

TamilNadu State Veterinary Council,
Chennai -600035.

Sir,

I am to request you that my name and particulars which are shown below may be entered in the TamilNadu State Veterinary Practitioners Register and that I may be furnished with a Certificate of Registration.

1. Applicant Name (in capital letters) : _____

2. Father's or Husband's Name : _____

3. Nationality : _____

4. Correspondence address

Door no & Street Name : _____

Village & Post : _____

Taluk & District & Pin code : _____

5. Date of birth (Christian era) : _____ **Mobile No:** _____

6. E-mail ID : _____

7. Employment status with detail Designation: _____

full Office Address _____

Pin code _____

8. Basic Registerable Veterinary qualifications Possessed by applicant,

Sl no	Qualificatio n	University	College	Passing year &date	Roll. no
1					

8. (A) Are you migrated from any other college to the college from where you have completed your B.V.Sc / B.V.Sc & A.H degree course. If SO furnish name of the college and university with a copy **of migration certificate**: _____

9. Additional Veterinary qualification possessed by the applicant,

Sl no	Qualification	University	College	Passing year & date	Roll. no	Discipline
1	M.V.Sc					
2	Ph.D					

10. Whether Registered with any other council. : _____
If so, attach the NOC from the concerned veterinary council.

11. I am enclosing the following:

- Fee of Rs.500/- (Fee Rs. 25/- + Rs. 475 office maintenance charges) through bank draft drawn in favour of **REGISTRAR**, TamilNadu State Veterinary Council.
- Two **recent stamp size** photographs in colour.
- Provisional Certificate (**internship training**) in Original issued by the council.
- Degree & Provisional certificate** possessed by me (Original along with two attested copies thereof. After verifying the original certificate, the same may please be returned to me)
- Proof of date of birth (**10th or 12th standard mark sheet**) -Two attested copies.
- Proof of Residence in TamilNadu, **two attested copies of** Ration card / Aadhar Card / Passport / Driving License

I certify that the particulars furnished above are true to the best of my knowledge and belief. I also certify that I am residing in TamilNadu in the above address.

Yours faithfully,

Date: _____

Place: _____

Signature of the Applicant

FOR OFFICE USE ONLY

- Cash Receipt No : _____ Date: _____ Amount: _____
- Registration fee : _____
- Other charges : _____
- Total amount : _____
- State Veterinary Registration No. : _____

Registrar,
TamilNadu State Veterinary Council.
Chennai.