



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 IX [See rule 13]

APPLICATION FOR TRANSFER OF 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 gazette officer
other than
applicant

To

The Registrar
TamilNadu State Veterinary Council,
Chennai- 600035.

Sir,

I am to request you for transfer of registration from _____ (state) to the TamilNadu State. 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. Name of the State Veterinary Council, where the applicant is already registered

(Registration number and date : _____

11. I am enclosing the following:

- ❖ Fee of Rs.1000/- through bank draft in the favour of **REGISTRAR**, TamilNadu State Veterinary Council payable at Chennai.
- ❖ Two **recent stamp size** photographs in colour
- ❖ **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.**
- ❖ No Objection Certificate from the Registrar of the state Veterinary Council Where the applicant is already registered.

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

1. Cash Receipt No : _____ Date: _____ Amount: _____
2. Registration fee : _____
3. Other charges : _____
4. Total amount : _____
5. State Veterinary Registration No. : _____

Registrar
TamilNadu State Veterinary Council,
Chennai.