<u>Regd. No. 21337/141</u>

Form No. IMRC- 02

# **INTEGRATED MEDICAL & RESEARCH COUNCIL OF INDIA**

(Under Partnership with Govt. of India vide no. OR/2014/0074550.)

H.O Dasarath Pur Jaj Pur Orissa 755006J&K R.O Ward No. 8 Rajouri City Rajouri J&K

Website: http://www.imrc.org.in E-mail: imrc5432@rediffmail.com

# **APPLICATION FORM FOR REGISTRATION**

### IN INTEGRATED MEDICAL & RESEARCH COUNCIL OF INDIA (IMRC)

1. Name of the Candidate's (in block letters, Surname first):

Father's / Husband Name:
Sex 3. Religion 4. Nationality
Date of birth (as recorded in High School Certificate)
In figure:
In words:
resent Address:
Contact No.
E-mail Id.
Permanent Address(Home)

**Registration No. and Date:** 

b) Medical council with which registered additional qualification:

**Registration No. and Date:** 

## 8. Detail of payment of fees:

a) Name and address of issuing bank with Branch:

b) Demand Draft No. and Date:

## **Check list for submission of documents**

Please arrange the application in the following order and tick mark the relevant boxes.

- 1. Check list.
- 2. Bank Draft for Rs. 5000/-
- 3. Application form.
- 4. Xerox copy of Registration certificate.
- 5. An attested recent the application passport size photograph on form.

Date:			

**Specimen Signature** 

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_ 3.

Yes No Yes No Yes No

Signature of the candidate



Yes No

# **INTEGRATED MEDICAL & RESEARCH COUNCIL OF INDIA**

Under Partnership with Govt. of India H.D Dasarath Pur Jaj Pur Orissa 755006

J&K R.O Ward No. 8 Rajouri City Rajouri J&K

### **ACKNOWLEDGEMENT**

#### To be filed by the candidate

Received Application from Ms/ Mr.	 D/o /S/o W/o Sh.

\_\_\_\_\_ along with Bank draft /Amount Rupees No. \_\_\_\_\_\_ Dated

\_\_\_\_\_for Rs. \_\_\_\_\_Drawn on Bank for Registration Certificate

for consideration.



Signature of

**Receiving Officer with Date** 

N.B all the correspondence should be done through online only.

# Fee Structure for M.D. Courses

Doctor of Medicine Programme (M.D) INT. Medicine / Obst. and Gynecology .

- 1. Registration fee.
- 2. Admission fee.
- 3. Semester fee.
- 4. Practical Fee.

Rs.5,000/- (once) Rs. 15,000/- (once)

Rs. 20,000/-(per semester )

## Rs.10,000/- (per semester)