

# APPLICATION FORM FOR REGISTRATION AS DENTIST

(Under the Dentists Act 1948)

**PUNJAB DENTAL COUNCIL, S.A.S.NAGAR**  
Medical Education Bhawan (3rd Floor), Sector-69, S.A.S.Nagar-160062

Website: [www.punjabdentalcouncil.com](http://www.punjabdentalcouncil.com)

Email: [punjabdentalcouncil@gmail.com](mailto:punjabdentalcouncil@gmail.com)

Telephone No.0172-5197531

(To be filled in by the candidate)

Recent  
P.P.Size  
Photograph

To

The Registrar, Punjab Dental Council.

Sir,

I beg to apply for registration as Dentist under section 34(i), ii (a) and ii(b) of the Dentists Act 1948. I request to enter my name, address & qualifications as stated below in Part A, of the State Register of Dentists.

**Registration No.** \_\_\_\_\_ **Valid upto 31.12.** \_\_\_\_\_  
(To be issued by the Council)

Name in full :

(In Block Letters only) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_ Nationality: \_\_\_\_\_

Mobile No.: \_\_\_\_\_ E-mail Address : \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Residential Address: \_\_\_\_\_

Professional Address: \_\_\_\_\_

PAN No.: \_\_\_\_\_ Employment if any: \_\_\_\_\_

Domicile Status (India/Foreign): \_\_\_\_\_

## QUALIFICATIONS

Description of qualifications on which registration is desired BDS/MDS \_\_\_\_\_  
(only from recognized Dental College)

**Name of the University** or Faculty or Examining or Licensing body with full address

**Institution** through which appeared \_\_\_\_\_

Date of attaining the qualification: \_\_\_\_\_

(i.e. Date of completion of paid Rotatory Internship Training)

I forward herewith in original the Provisional Degree/Degree/Diploma & all other required documents for Registration as Dentist [with all the photocopies as required at Page 2 of this Form]. The Original may please be returned, after perusal.

Dated: \_\_\_\_\_

Signature of the Candidate

Name in full.....

**Regn. No.**.....

Valid Up to : **31.12.**.....

## ਕੇਵਲ ਦਫਤਰੀ ਵਰਤੋ ਲਈ (For Office Use Only)

ਡਾਇਰੀ ਨੰ \_\_\_\_\_ ਮਿਤੀ \_\_\_\_\_ ਰਸੀਦ ਨੰ \_\_\_\_\_ ਮਿਤੀ \_\_\_\_\_

- ਸਾਰੇ ਕਾਗਜ਼ ਮੁਕੰਮਲ ਅਤੇ ਦਰੁਸਤ ਹਨ। ਕੀ ਰਜਿਸਟਰੇਸ਼ਨ ਕਰ ਦਿੱਤੀ ਜਾਵੇ ਜੀ।
- ਜਾਂਚਣ ਉਪਰੰਤ ਹੇਠ ਲਿਖੀਆਂ ਕਮੀਆਂ ਪਾਈਆਂ ਗਈਆਂ:-

ਸਪਰਡੰਟ

ਰਜਿਸਟਰਾਰ

**Revised Dentists (Code of Ethics) Regulations 2014**

**Declaration** - Every dentist who has been registered (either on Part A or Part B of the State Dentists Register) shall, within a period of thirty days from the date of commencement of these regulations and every dentists who gets himself registered after the commencement of these regulations shall, within a period of thirty days from such registration, make, before the Registrar of the State Dental Council, a declaration in the form set out for the purpose in the schedule to these regulations and shall agree to have read, understood and thence to abide by the same.

**FORM OF DECLARATION**

(To be signed by the Dentist at the time of Applying for Registration under the Indian Dentists Act.1948)

- (i) I solemnly pledge myself to devote my life to the cause of serving humanity in the field of dental care;
- (ii) I shall not use my dental knowledge contrary to the law of humanity;
- (iii) I shall not permit consideration of religion, nationality, race caste and creed, party politics or social standing to intervene in any duty towards my patient & the professions;
- (iv) I shall look after the dental health of my patients as my first consideration;
- (v) I shall honour the secrets, which are confided in me by my patients during the professional services;
- (vi) I shall always maintain the honour & noble traditions of the dental profession;
- (vii) I shall deem it an honour to cherish a proper pride in my colleagues and shall not disparage them by my actions, deeds or words;
- (viii) I shall not indulge in any activity, which might bring discredit to the dental profession;
- (ix) I shall abide by the various provisions of the Act and desist from using a degree / diploma or an abbreviation indicating or implying a dental qualification, which is not in accordance with the definition of "recognized dental qualification" as defined under Clause (j) of section 2 of the Act;
- (x) I shall strictly abide by the Revised Dentists (Code of Ethics), Regulations 2014.

**Dated the** \_\_\_\_\_

**Place** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Dentist

**1. Documents required for Registration:-**

Original & self-attested photocopies of the following documents:-

- i Matric (Showing Date of Birth).
- ii Detail Marks Certificate of 1<sup>st</sup> Prof., 2<sup>nd</sup> Prof., 3<sup>rd</sup> Prof & Final Prof of B.D.S.
- iii Internship Completion Certificate (Only Paid Rotatory Internship Certificate).
- iv Attempt Certificate and Character Certificate issued by the concerned Dental College.
- v BDS Degree(or Provisional Pass Certificate issued by the concerned University or College)
- vi Proof of Domicile/Residence of Punjab State /Aadhaar Card / Ration Card/Voter-I Card/ Driving Licence/Passport/any other proof/Certificate issued by the concerned authority.
- vii 2 Passport size photos.

**Original testimonials will be returned after checking/comparison.**

**2. Fee:-**

Registration fee	: ₹ 1200	Fee can be paid in cash or through Bank Draft favoring " <b>Registrar Punjab Dental Council</b> " Payable at Chandigarh
Renewal fee	: ₹ 200 per year (₹ 1000 for 5 years)	
Misc.Office Exp.	: ₹ 500	
Smart Card	: ₹ 500	
Maintenance Fund	: ₹ 100	

**For out of state Regn.** : ₹ 1000

(Candidates passing B.D.S. Course from out-side Punjab State Dental Colleges will pay ₹1000 extra, for verification of their Certificates, being "**Out of State Registration**", along with a Self Declaration as per Specimen given at Page-4.

**3. Late Fee:-**

- a) If a candidate is applying for his registration, after one year, from the date of his passing the B.D.S. Course he / she will deposit ₹1500/- as "late-fee", for the Ist. year and for subsequent years, he/ she will pay late fee @ ₹ 2000/-per year AND a Self-Declaration given at **Page 4**

- b) If a candidate is applying for his registration, after one year, from the date of his passing the Dental Mechanics / Dental Hygienists Course, he/she will pay ₹500/- as “late-fee”, for the 1st year and for subsequent years, he/she will pay late fee @ ₹800/- per year, along with a Self Declaration given at Page-4.
- c) The Dentists who have gone abroad without getting their registration, will apply on this form and get it attested from the Notary Public / Solicitor of that country (below their signatures, along with one P.P. size photo and all the documents mentioned at Page-2 duly attested). They will pay \$ 200 as fee. In case these candidates get their registration done after one year, from the date of passing B.D.S. Course, they will pay \$ 250 as “Late Fee” for 1<sup>st</sup> year and for subsequent years, he / she will pay late fee @ \$ 300 per year. They will also submit an affidavit duly attested by the “Notary Public / Solicitor/ Any Attesting Authority of that country as per specimen given at Page-4.
- d) Candidates already registered with any other State Dental Council in India, will have to produce “No Objection Certificate” from that Council and from Dental Council of India, Delhi, for their registration with the Punjab Dental Council, along with other documents (as mentioned at Page No.2, Sr.No.1 (from i-vii) of this form).
- e) As per instructions of the DCI, NRI students having OCI/PIO Card can apply for registration (with proof of OCI/PIO) and all the documents mentioned at Page-2 (from Sr. No.1-7). Registration fee for OCI/PIO Card holder is \$100 and late fee @ \$ 50 (per year).

#### 4 Validity of N.O.C.

Regarding registration of Dentists by way of transfer from other state Dental Councils, the candidate will produce “N.O.C.” from that state and from Dental Council of India (along with requirements mentioned at Page-2 of this Form). Validity of that NOC will be considered for 6 months, from the date of issue of NOC for his/her registration. Similarly validity of NOC issued by this Council will also be six months from the date of issue of the NOC. Fee for issue of N.O.C. is ₹2000.

#### 5 Issue of Duplicate Registration Certificate

For issue of Duplicate Registration Certificate, in case it is lost / misplaced, the applicant will **personally** submit a Self Declaration or copy of D.D.R., along with one P.P. size photo and will deposit a fee of ₹1000. For issue of duplicate Smart Card in case it is lost, fee of ₹500 will be charged (with a Self Declaration or a copy of D.D.R.).

6. Any change in address, Mobile No. may please be intimated to this Office, immediately.

#### 7 Time Schedule for issue of various certificates by the Council:-

i	Time for issue of fresh/new Registration Certificate to B.D.S./ M.D.S. / Dental Mechanics / Dental Hygienists by the Punjab Dental Council.	=	7 Working Days
ii	Time for issue of Fresh Registration to B.D.S./ M.D.S./Dental Mechanics / Dental Hygienists, who pass out from out of State Dental Colleges.  (Because their D.M.C. / Degree is to be got verified from the concerned Dental College / university as per instructions).	=	2 Weeks
iii	Renewal of registration	=	3 Working Days
iv	Issue of N.O.C.	=	7 Days
v	Issue of Good Standing Certificate / Duplicate Certificate and other misc. services	=	7 Days
vi	Issuance of Smart Card Subject to the Biometric /Online Computerized system is working	=	Same day

#### 8 Important Note :-

- A candidate will have to come personally for his/her registration.
- Form & fee can be deposited in the office from 9:00 AM to 1:00 PM and 2:00 PM to 3:00 PM on working days.
- Please display your Registration Certificate at your clinic.
- Do not laminate your Registration Certificate.

**Self Declaration**

I \_\_\_\_\_ S/O,D/O \_\_\_\_\_  
R/O \_\_\_\_\_  
\_\_\_\_\_, do hereby solemnly affirm and declare as under:-

- i That I have passed my B.D.S. Course from \_\_\_\_\_  
\_\_\_\_\_  
(Name of Dental College),and was awarded Degree by \_\_\_\_\_  
\_\_\_\_\_  
(Name of University) in the year \_\_\_\_\_, which is recognized by the  
Dental Council of India and that I have completed my Compulsory Paid  
Rotatory Internship from \_\_\_\_\_ to \_\_\_\_\_.
  
- ii I undertake that in case any of my B.D.S./M.D.S. course Certificate is found  
incorrect / false, I will be responsible for that and will surrender my Original  
Registration Certificate to the Punjab Dental Council immediately and will  
not practise Dentistry. In that event my Registration be deemed as cancelled.
  
- iii I further certify that I am not yet registered with any other State Dental  
Council in India, so far.
  
- iv I certify that I was not involved in any court case or any legal proceedings  
are pending against me professionally or otherwise.

\_\_\_\_\_  
Signature of Declarant

Dated:\_\_\_\_\_