



WEST BENGAL MEDICAL COUNCIL

IB 196, SECTOR III, SALT LAKE, KOLKATA – 700 106
☎ 2335 – 5575, 2335 – 3078 & 2335 – 5663 Email : [wbmc@vsnl.net](mailto:w BMC@vsnl.net)
Website : www.wbmc.in

**NOTICE FOR UPDATING
OF REGISTRATION PARTICULARS OF DOCTORS (2014 - 15)**

West Bengal Medical Council is entrusted with the responsibility of maintaining the State Medical Register in respect of the medical practitioners registered with the Council in exercise of the powers conferred under the Bengal Medical Act, 1914.

In exercise of the power conferred under Section 16(2) of the Bengal Medical Act, 1914 (as amended), the Registrar, West Bengal Medical Council for the purpose of updating of the State Medical Register invites applications from the medical practitioners registered with this Council up to 31.12.2010 in the prescribed Proforma, as were done in the past i.e. 2001-2002 and 2009-2010 respectively.

Doctors registered from 01.01.2011 upto date need not submit application for the said updating at present.

Hence, all medical practitioners, who are registered with this Council till 31st December, 2010 are advised to update their registration particulars by filling in prescribed Proforma along with payment of Rs.1050/- (Rupees One Thousand Fifty) only [service charge of Rs.1000/- + Rs.50/- for postal charges for delivery of Certificate to the address as mentioned in the Application Form]

The Council shall provide the following against the application received from the medical practitioners for updating:-

1. An Updated Registration Certificate (2014-15) [laminated]
2. An Identity Card containing Registration Particulars.

Updated Registration Certificate & Identity Card to be delivered to the address as mentioned in the Application Form.

APPLICATION FOR THE ABOVE WOULD BE ACCEPTED ON AND FROM 18TH AUGUST 2014 ONWARDS WITHIN WORKING HOURS FROM MONDAY TO FRIDAY AT THE OFFICE OF THE WEST BENGAL MEDICAL COUNCIL IN THE ABOVE ADDRESS.

(D. K. Ghosh)
Registrar, WBMC

1 August, 2014

WEST BENGAL MEDICAL COUNCIL

P R O F E S S O R M A

(To be filled in **block letters**)

1. Name

(Surname)

(Middle Name)

(First Name)

2. Father's Name : Mr. / Dr. / Late

3. Date of Birth :

4. Sex : M F (Please put \sqrt mark)

5. BLOOD GROUP :

6. (A) Address : (i) **Permanent**

P.O. District. Pin Code

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State..... Country

(ii) **Present**

P.O. Dist. Pin Code

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State..... Country

(iii) **Address where the applicant desires to get the Updated Registration Certificate by Speed Post**

(Please put \sqrt mark) [Permanent Address / Present Address]

7. (B) Applicant's
Phone Nos.

Chamber / Hospital

Residence

Mobile

8. Email :

9. Registration (a) No.

(b) Date

10. Details of Medical Qualification (s) :

Qualification and qualifying year *	Name of the Medical College / School	Name of the University / Institution conferred Degree / Diploma

* Please refer to the Original Registration Certificate issued by this Council.

11. Details of payment : (Please put \sqrt mark)

(i) Challan No..... date of deposit in Bank for Rs. 1050.00

(ii) Bank Draft No..... dated on..... (Name of the Bank) for Rs. 1050.00

12.

Affix recent passport
size color photograph
of the applicant
(The photograph
should not be
signed or attested)

Signature of the applicant in full against **A** and specimen against **B**

A.

B.

Do not sign outside the boxes and in block letters

13. **Certification** by another Medical Practitioner registered with the West Bengal Medical Council.

Certified that the above particulars, photograph and signatures are true.

Signature with date and Registration Number

HOW TO SUBMIT APPLICATION FOR UPDATING

- **The medical practitioners can obtain Proforma Application for Updating (2014-15) from the office of the West Bengal Medical Council free of cost or can download the same from our website [www.wbmc.in] and print the same in a Legal size paper.**
- **The Proforma duly filled in (without leaving any column blank), signed and countersigned to be submitted affixing a recent passport size colored photograph together with Service Charge of Rs.1050/- (Rupees One Thousand Fifty) only [through duly receipted Challan in case of Online / Offline payment or Bank Draft] in the office of the Council at the drop box during normal office hours or be sent by post / courier on and from 18th August, 2014.**

HOW TO DEPOSIT SERVICE CHARGE

- **Online payment** – **The medical practitioners will select “online payment” from the website, put their name and the registration number and then select the mode of payment i.e. Debit Card/Credit Card/Fund Transfer and proceed to make payment. After making payment, print out of duly receipted Challan generated from the website be obtained.**
- **Offline payment** – **The medical practitioners will select “offline payment” from the website and take print out 3 copies of Challan from the website. He/She will then fill up the Name, Registration No. etc. and deposit the challan to any branches of ICICI Bank in West Bengal / India by cash only and receive a copy of Challan.**
- **Payment by Demand Draft** - **The medical practitioners can also deposit Service Charge directly to the office of Council through Bank Draft drawn in favour of “West Bengal medical Council” payable at Kolkata. The filled up Application Form along with Demand Draft may be submitted to the Council Office either personally /messenger or by post.**
- **In no way, Cash / Cheque would be accepted by the Council in its office for such updating purpose.**

FOR RECORDING ADDITIONAL QUALIFICATION AND / OR CHANGE OF SURNAME
(IN CASE OF FEMALE DOCTORS ONLY) WITH THIS APPLICATION FOR UPDATING

- 1) **The medical practitioners who have already registered their additional qualification(s) / Change of Surname (in case of female doctors only) with the Council** need not to apply again but they would only apply for updating mentioning their additional qualification(s) / changed surname already registered with the Council.
- 2) **The medical practitioners who have not yet registered their additional qualification(s) / Change of Surname (in case of female doctors only) with the Council**, the incumbent is first required to make separate application for registration of additional qualification(s) / Change of Surname (in case of female doctors only) which can be had from the office of the Council free of cost or downloaded from our website along with prescribed fees* and supporting documents. The details of prescribed fees and supporting documents can be had from the Application Form for Additional Qualification / Change of Surname. Payment of fees for recording Addition Qualification / Change of Surname cannot not be made through online or offline mode or by Demand Draft, as stated above. The deposit of application & fees are to be made in the office of the Council only (Time – Monday to Friday up to 2.30 PM). **Then he/she will make Application for updating either through online payment or offline payment or by Bank Draft as stated above.**

*** Prescribed Fees [existing] – may vary from time to time.**

Rs. 1000.00 for each Post Graduate Diploma Qualification.

Rs. 2000.00 for each Post Graduate Degree Qualification.

Rs. 3000.00 for each Post Doctoral Qualification.

Rs. 600.00 for Change of Surname.
