FOR OFFICE USE ONLY

Rcpt. No..... Date.....Amount ₹ ..... Issuing Date .....

Board of Electro Homoeopathic Medicine, Uttar Pradesh

8- Lal Bagh, Lucknow-226001

E-mail:- behm.up@rediffmail.com,registrarbehmup@gmail.com

(Application Form For Renewal of Registration)

"PROFORMA - A1"

(Under Clause-31

Affix a Recent Photograph Please do not Stapel

(Specimen Signature)

To,
The Registrar
Board of Electro Homoeopathic Medicine , Uttar Pradesh
Lucknow

Sir,
I beg to apply for Renewal of my Registration vide No [ ] Photo Copy Enclosed

(This form should be filled by the Candidate in his own handwriting).[यह फार्म अभ्यर्थी द्वारा स्वयं भरा जाये]

This is accordance with the requirement of clause 31 subclause I , II , III , & IV of the Articles of the Board.

(Fields marked with * are mandatory it must be filled.) **[* चिन्ह वाले कालम भरना आवश्यक हैं]**

1.*Name of the applicant (In Block Letters)

2.*Father's/ Husband's Name

3.*Address

Police Station

Pin Code No

4.*Adhar (UID) No

5.*Mobile No

6.Email id .....

ANSWER THE FOLLOWING

1. Weather you practicing in any system other than Electro Homoeopathy ?
[क्या आप इलेक्ट्रो होम्योपैथी के अतिरिक्त किसी अन्य पद्धति में भी चिकित्सा व्यवसाय कर रहे हैं?]

Answer[उत्तर] .....

2. During the gap period have you done practice without valid registration.
[अन्तर अवधि में क्या आपने बिना वैध रजिस्ट्रेशन के प्रैक्टिस की?]

Answer[उत्तर] .....

3. During your regular practice period weather any complaint have been done against you?
[नियमित प्रैक्टिस काल में आपके विरुद्ध क्या कोई शिकयत हुयी ?]

Answer[उत्तर] .....

4. During your regular practice period if any FIR have been lodged against you?
[नियमित प्रैक्टिस काल में क्या आपके विरुद्ध कोई प्राथमिकी दर्ज हुयी?।]

Answer[उत्तर] .....

5. What is the reason of being delay of renewal of registration?
[नवीनीकरण–पंजीकरण में विलम्ब होने का कारण क्या है ?]

Answer[उत्तर] .....

I do hereby declare that I am doing practice only in Electro Homoeopathic System.
I also declare that the statement given above is true, correct and to the best of my knowledge.

Place .....

Enclosers Attached :- Bankdraft, + 2 Photograph, Xerox Copy of Registration

Signature .....