

Name of Gazzeted Officer_____

Office Address_____

Date

CERTIFICATE

This is to certify that Vaidya Shree/Shrimati/Ku _____

Resident at _____
age _____ is present before me, and I certified that he/she is live as on date.

passport size photograph
to be paste here duly
signed half on the form
half on the photograph by
the applicant, one extra
photograph to be
enclosed with this form

Signature & Stamp of Gazzeted Officer

To,
The Registrar, Gujarat Ayurved Board
Ahmedabad

Sub: Renewal of my registration Certificate No. GB(I)_____

Sir,

With reference to the above subject I am submitting the following information along with copies of documents marked as under, you are requested to renew my registration.

Name _____

Address of Resident _____

Village _____ City _____ Taluko _____ District _____

Pincode No. _____ Email Id. _____

Address of Clinic _____

Village _____ City _____ Taluko _____ District _____

Pin No. _____

Telephone (Res) _____ (Clinic) _____ (Mobile) _____

Date of Birth _____ Place of Birth _____ Married YES / NO

Qualification _____ Awarded by University _____

Name of the College from where completed study _____

Education beginning year _____ Education ending year _____

1. Copy of Registration Certificate No.GB-I-_____ is enclosed herewith
2. Copy of the degree of BAMS/BUMS is enclosed herewith.
3. Copy of the degree M.D/M.S is enclosed (for additional degree holder only)
3. Copy of resident proof is enclosed (Ration Card/Telephonebill/Light bill/Election Card)
4. Copy of the proof of Birth (School leaving certi/Birth Certi/Pan card/Driving license)
5. Copy of photo id is enclosed (Election Card/Driving License/Passport/Pan card)
6. 1 Passport size photograph is enclosed.
7. Live certificate as above is also enclosed.

Signature of the Applicant