

Rs 500/-

Form. No.
(Fill with Block Letter)

ID Card Issue on :

R/ No.

Dated

3.5 x 2.5



PASCHIM BANGA AYURVED PARISHAD

PURTA BHAVAN, 3RD FLOOR, ROOM NO – 304, BLOCK – DF,
SECTOR – I, SALT LAKE, KOLKATA – 700091

PH: (033) 2321-4067

E- Mail: pbapkol@gmail.com

RENEWAL APPLICATION FORM

1. Registration No. & Date :

2. Name of the Ayurvedic Pharmacist
(In block Letters) :

3. Father's/ Husband's Name :

4. Age with Date of Birth :

5. Address in full (Within the state of W.B.) :

6. Professional Qualifications
(With passing year &
Name of the College) :

7. Change of Address , Name or Surname
(If any, Separately fill up
the another form) :

.....
Registrar,
Paschim Banga Ayurved Parishad

.....
Full Signature of the Candidate with date

Mobile No
E-mail :

Rules for Renewal of Registration

1. Renewal process will be made every 5 years interval from the date of Registration.
2. On the day of Renewal for Registration, the candidates have to be Physically Present with original Registration and Xerox Copy etc. as testimonials.
3. Initial Renewal Registration fees for 5 years Rs. 500/- deposited by cash.
4. At the time of renewal any change of i.e. (a) Address, (b) Name/ Surname entry (a) Rs. 500/- and (b) Rs. 500/- will be charged separately.
5. Every five years at the time of Renewal registration candidate have to produce previous renewal certificate.
6. If any change from the original Registration certificate, kindly produced original documents with photocopy of such change.

**Registrar
Paschim Banga Ayurved Parishad**