

## FORM—'C'

(See sub-rule (3) of Rule 12)

## VETERINARY COUNCIL REGISTRATION CERTIFICATE

M. V. C. Regn. No. \_\_\_\_\_ Date \_\_\_\_\_

This is to certify that Dr. \_\_\_\_\_ whose particulars are shown below has been duly registered under the provisions of the Indian Veterinary Council Act, 1984, (52 of 1984).

Name with Father's/ Husband's	Date of Birth	Address	Qualification and date thereof	Date of Place of Registration (if already registered with State Veterinary Council).

Certified that this is true copy of the above - specified name in the State Veterinary practitioner's register. In witness thereof the seal of Meghalaya Veterinary Council and the signature of the Secretary are as fixed below.

This certificate is valid until the name of Veterinary practitioner is removed from the Register as per the provisions of the Indian Veterinary Council Act, 1984.

Shillong  
Dated the \_\_\_\_\_

SEAL

Registrar,  
State Veterinary Council  
Meghalaya.

**IMPORTANT NOTICE :**

- Every registered Veterinary Practitioner should be careful to send to the Secretary immediate notice of any change of his address and also answer all enquiries that may be sent to him by the Secretary in regard thereto.
- All persons registered under IVC Act, 1984 are legally qualified to practice Veterinary medicine and animal husbandry.
- In case of amendment of this certificate as provided under Regulation 6, the original name shall be indicated within parenthesis (immediately below the altered name).
- In case a duplicate certificate is issued as provided under Regulation 10, the word 'DUPLICATE' shall be printed in red ink in block letters on top right hand corner of this certificate