

**TAMIL NADU MEDICAL COUNCIL, CHENNAI-106.**

**Documents Required for Change of Name**

1. One Requisition letter addressed to the Registrar, Tamil Nadu Medical Council stating your Name, Qualification, Changed Name, Registration Certificate Number and Date of Registration.
2. Demand Draft for Rs.500/-(Rupees Five Hundred Only) drawn in favour of "The Registrar, Tamil Nadu Medical Council, Chennai" Payable at Chennai
3. Xerox copy of the Gazette Notification in respect of Change of Name or Marriage Certificate
4. If you send the Original & Xerox Medical Registration Certificate , the Changed name will be endorsed on the Certificate.
5. Self Addressed cover affixed with Postage stamps for Rs.32/-

**TAMIL NADU MEDICAL COUNCIL, CHENNAI-106.**

**Documents Required for CT FORMS, Verification**

1. One Requisition letter addressed to the Registrar, Tamil Nadu Medical Council stating your Name, Qualification, Registration Certificate Number and Date of Registration.
2. Demand Draft for Rs.5,000/-(Rupees Five Thousand Only) drawn in favour of "The Registrar, Tamil Nadu Medical Council" Payable at Chennai.
3. Xerox Copies of M.B.B.S. Medical Registration Certificate

**TAMIL NADU MEDICAL COUNCIL, CHENNAI-106.**

**Documents Required for No Objection Certificate**

1. One Requisition letter addressed to the Registrar, Tamil Nadu Medical Council stating your Name, Qualification, Registration Certificate Number and Date of Registration.
2. Demand Draft for Rs.1000/-(Rupees One Thousand Only) drawn in favour of "The Registrar, Tamil Nadu Medical Council, Chennai" Payable at Chennai
3. Xerox copy of the Medical Registration Certificate
4. If you send the Self Addressed cover, Certificate will be send by Registered Post cover affixed with Postage stamps for Rs.22/-