

**APPLICATION FOR PROVISIONAL REGISTRATION
(For doing Compulsory Paid Rotatory Internship only)**

To,

The Registrar,
Himachal Pradesh State Dental Council
O/O Directorate of Dental Health Services,
Swasthya Sadan, Block No-6, SDA Complex, Kasumpti,
Shimla, HP-171009, INDIA

Subject: Application for Provisional Registration as Intern Dentist

Sir,

Iwish to apply for the **Provisional Registration as Intern Dentist** and enter my name, address & qualification for doing compulsory Paid Rotatory Internship:

The attested copy of following documents/requirements is enclosed along with:

1. 2 Passport Size Photograph
2. Matriculation Certificate (Date of Birth)
3. BDS mark sheet (1st, 2nd, 3rd and Final Year)
4. Bonafide Himachali
5. Proof of Residence (Aadhar Card/ Voter Card/ Driving Licence)
6. Provisional Reg Fee (Rs 1000/- for detail Check website :www.hpsdc.org.in)

Kindly note all the documents should be attested by Principal of the concerned Dental College.

(Signature of Applicant)

Certificate by the Head of the Institution

Certified that Dr..... has passed the B.D.S. Examination held in the month
..... of 20..... from.....university with Register No./
Enrollment No..... He/ She will be provided with internship training in our
institution.

(Signature of the Head of the institution with seal)