## APPLICATION FORM FOR CHANGE OF NAME DUE TO MATRIMONEY

To,		
	The Registrar, Uttar Pradesh Medical Council, Lucknow.	
Sub.:		gistration Certificate No
Sir,		
	I beg to state that I passed my M.B.B.S. Exar	nination from
Medica	l College	in year and that subsequently I
was reg	gistered with your Council vide Provisional/Perr	manent Registration No dated
Now I h	ave been married to Sri	
		on
		to
	(Name of Place)	(Customs or Rite)
customs	s or rite and consequent to my marriage with at	pove named person, my name has been changed from
Dr. (Km	) to I	Dr. (Smt.)
Certifica	Therefore, I wish that the above change in	my name should also be made in my registration istrate / Notary is submitted and fees of Rs. 500-00
		Your faithfully,
Dated		(Name of Applicant)
		Address
	CERTIF	ICATE
(	Certified that Dr. (Km.)	
D/o Sri		who passed her Final M.B.B.S.
Examina	tion from	
	Appearing from	Medical College
		I to Sri
		place and is now known
as Dr. (S	mt.)`	

(COURT STAMP)

FIRST CLASS MAGISTRATE / NOTARY