

Welcome to the Haryana Medical Council's New Online Registration and Renewal Portal

This Portal provides seamless access to all Services provided by Haryana Medical Council.

To access the portal, please visit:



<https://online.haryanamedicalcouncil.org/>



Home Page: Haryana Medical Council

haryanamedicalcouncil.org

CME

HOME

ABOUT US

ACT HMC

COMPLAINT

RTI

DOWNLOAD

TENDER DOCUMENT

GALLERY

SMR

SIGN UP

LOGIN

FMG Counseling 2025 (Round-2) online Registration starting from 10-07-2025. Visit <https://hmc.fmgcounseling.in> for apply.



Sh. Nayab Singh Saini
Chief Minister-Haryana



Ms. Arti Singh Rao
Health Minister, Haryana



Sh. Sudhir Rajpal (I.A.S)
Additional Chief Secretary



Dr. Manish Bansal
President, HMC



Dr. Mandeep Sachdeva
Registrar

Haryana Medical Council

SCO-410 2nd Floor, Sector-20, Panchkula-134116

Email: registrarhmc@gmail.com, info@haryanamedicalcouncil.org

Phone- 0172-4090410, 2520165

Login Page

Enter Registered email ID and Password.

Use forgot Password option in case you don't remember your password.

Note: Practitioners who have already registered on the old portal need to regenerate their password to log in. Please click on the "Forgot Password" link to generate a new password.




The image shows the login page of the Haryana Medical Council. The page has a light blue background with a decorative border at the bottom featuring various medical icons like pills, a stethoscope, and a drum. The main content is divided into two sections: a header for the council and a login form.


Haryana Medical Council
हरियाणा चिकित्सा परिषद
Online Portal for Registration, Renewal, Transfer and Related Services
पंजीकरण, नवीनीकरण, स्थानांतरण और संबंधित सेवाओं हेतु ऑनलाइन पोर्टल

The login form is titled "Login For Registered Users" and includes a link for "पंजीकृत उपयोगकर्ताओं हेतु लॉगिन". It contains the following fields and options:

- Registered Email ID/पंजीकृत ईमेल आईडी: Enter Email ID
- Password/पासवर्ड: Enter Password
- Captcha/कैप्चा: A visual captcha showing the characters "J7 5 P" and a text input field "Enter Captcha Code".
- Buttons: "Login", "Register", and "Forgot Password".

Forgot Password Page





FORGOT LOGIN PASSWORD

Email ID/ईमेल आईडी

Date of Birth/जनम तिथि

Captcha Code/कैपचा

S8MYK

Enter Captcha Value/कैपचा भरें

Enter Captcha Code

Submit

[Login](#) | [Register](#)

Registration Page

For New users they have to Register first



Are you registered in Haryana Medical Council? (If Yes, please enter Your Registration number)

Select an option

Name/नाम

Enter User Name

Father's Name/पिता का नाम

Enter Father Name

Invalid Name. Only alphabets and spaces are allowed.

Email ID/ईमेल आईडी

Enter Email ID

Mobile No/मोबाइल नंबर

Enter Mobile No

Date of Birth/जन्मतिथि

mm/dd/yyyy

Primary Qualification*

Select Qualification

Create Your Login Password/पासवर्ड

Create Password (Min 6,Max 30 Char)

Confirm Your Login Password/पासवर्ड

Create Password (Min 6,Max 30 Char)

Password must be 6-30 characters long, include at least one uppercase letter, one lowercase letter, one number, and one special character (!@#\$%^&*).

Captcha Code/कैप्चा

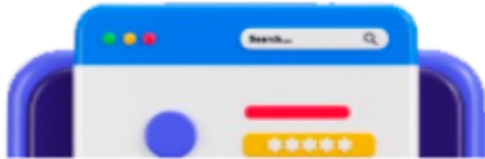
1Bv6vD

Enter Captcha Code

Register


Login | Forgot Password

YOU WILL RECEIVE OTP ON YOUR REGISTERED MOBILE NO.
Enter OTP and Press Verify OTP button



Enter OTP Received On
Registered E-Mail/Mobile No

Enter OTP

ReSend OTP 



Verify OTP

Click Here To Go Back

➤ User Profile Page

Enter all required details.

Update Profile

Name *	<div>Mr. ▼</div> <div>ENTER FULL NAME</div>	Blood Group *	<div>A RhD positive (A+) ▼</div>	Gender *	<div>Male ▼</div>
Father's Name *	<div>ENTER FATHER'S NAME</div>		Mother's name *	<div>ENTER MOTHER'S NAME</div>	
Date of Birth *	<div>MM/DD/YYYY 📅</div>		Place of Birth *	<div>ENTER PLACE OF BIRTH</div>	
Primary Qualification*	<div>Select Qualification ▼</div>		Country of Passing*	<div>▼</div>	
Aadhaar No *	<div>AADHAR NO</div>		Passport No	<div>ENTER PASSPORT NO</div>	
Nationality	<div>Select Nationality ▼</div>		Email Id *	<div>ENTER EMAIL ID</div>	
Physical Identification Mark*	<div>ENTER PHYSICAL IDENTIFICATION</div>		Mobile No. *	<div>ENTER MOBILE NUMBER</div>	
Permanent Address*	<div>ENTER ADDRESS LINE 1</div> <div>ENTER ADDRESS LINE 2</div> <div>Select Country ▼ <div>SELECT STATE</div><div>SELECT CITY <div>SELECT DISTRICT</div><div>ENTER PINCODE</div></div></div>		Correspondence address in India* <input type="checkbox"/>	<div>ENTER ADDRESS LINE 1</div> <div>ENTER ADDRESS LINE 2</div> <div>INDIA <div>Select State ▼</div><div>SELECT CITY <div>SELECT DISTRICT</div><div>ENTER PINCODE</div></div></div>	
Upload Profile Picture	<div>Choose file NO FILE CHOSEN</div> <div></div>		Upload Signature	<div>Choose file NO FILE CHOSEN</div> <div></div>	

(Note : Upload only .jpeg or .png file of Max 100 KB)

(Note : Upload only .jpeg or .png file of Max 100 KB)

- Update Profile (Optional but Recommended)
1. Click My Profile to check/edit personal details.
 2. Use Edit Profile option to make any changes in the profile.

☰


> Medical Practitioner ▾

My Profile

Apply Online

Payment History

Application Status




Haryana Medical
Council


Home / Medical Practitioner / My Profile

Hi test user ▾

Edit Profile ✎





Update Photo




Update Signature

Mr Test User

 ID Card: 2024

 09876543210

 test@gmail.com

Father's Name: RATHI, J. K.

Mother's Name: SHARMA, S. K.

Gender: Male

Blood group: O+

Address

20, G. Road, HAWES
ZIRAKPUR,
Zirakpur, Mohali
Punjab - 151003 (India)
20, G. Road, HAWES
ZIRAKPUR,
Zirakpur, Mohali
Punjab - 151003 (India)

Registered Qualifications

Course	Year of Passing	University	College
MBBS			

- User Dashboard Page: You are now taken to the User Homepage, which includes:
- My Profile
 - Apply Online
 - Payment History
 - Application Status


> Medical Practitioner

My Profile

Apply Online

Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi test user

1

Application Form For Provisional Registration

Apply Now

2

Application Form For Transfer Registration

Apply Now

3

Application Form For Permanent Registration

Apply Now

- Start Application
1. Click Apply Online.
 2. Select the relevant application form for your council/qualification.


> Medical Practitioner

My Profile

Apply Online

Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi test user

Apply Online

1	Application Form For Provisional Registration	Apply Now
2	Application Form For Transfer Registration	Apply Now
3	Application Form For Permanent Registration	Apply Now

➤ APPLICATION FOR PROVISIONAL REGISTRATION




> Medical Practitioner

My Profile

Apply Online

Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi test user

Apply Online

1	Application Form For Provisional Registration	Apply Now
2	Application Form For Transfer Registration	Apply Now
3	Application Form For Permanent Registration	Apply Now

1. IF YOU ARE GRADUATE FROM HARYANA THEN CHOOSE Application For Provisional Registration (MBBS FROM HARYANA)
2. IF YOU ARE GRADUATE FROM OTHER COUNTRY THEN CHOOSE Application For Provisional Registration (FOREIGN MEDICAL GRADUATE).


> Medical Practitioner

My Profile

Apply Online

Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi XXXXXXXXXX

1

Application Form For Provisional Registration (MBBS from Haryana)

Apply Now

2

Application Form For Provisional Registration (Foreign Medical Graduates)

Apply Now

AFTER CHOOSING YOUR APPLICATION YOU WILL SEE LIST OF DOCUMENTS REQUIRED AND IMPORTANT INSTRUCTIONS

ACCEPT THE TERMS AND CLICK ON APPLY NOW

> Medical Practitioner

My Profile

Apply Online

Payment History

Application Status

Important Instructions

Before applying please make sure that you have arranged the scanned copy of the following documents along with valid payment option to pay the application fee online.

List of Enclosures:-

1	Passport-size recent colour photograph (to be affixed on the certificate) * (Allowed file types: .jpg / .jpeg / .png) Allowed Size: 2 MB
2	Stamp Size Signature (To be affixed on certificate) * (Allowed file types: .jpg / .jpeg / .png) Allowed Size: 2 MB
3	Matric Certificate / Birth Certificate in support of Date of Birth. * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
4	Detail Mark Card of 10+2 certificate / Passing Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
5	Graduation Ist Prof. Certificate (MBBS) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
6	Graduation IInd Prof. Certificate (MBBS) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
7	Graduation Final Year Prof Part-I Certificate (MBBS) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
8	Graduation Final Year Prof Part-II Certificate (MBBS) / Attested Result by Dean / Principal * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
9	MBBS Degree (Provisional / Final) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
10	Attempt & Character Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
11	ID Proof (As selected in profile from Aadhar / Passport / Pan Card) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB

☐ I have gone through all the application instructions, hereby ready to apply.

Apply Now

➤ FILL ALL DETAILS CORRECTLY & PRESS SAVE TO MOVE FURTHER IN APPLICATION

Medical Practitioner

My Profile

Apply Online

Payment History

Application Status

Haryana Medical Council

Home / Medical Practitioner / Apply Online

Hi PANKAJ YADAV

Application For Provisional Registration / Provisional Registration (MBBS From Haryana)

Medical Qualifications Details

Medical Qualification*

MBBS

Year of Passing*

State of Passing*

Haryana

University Name *

Select University

College Name *

Select College

College Email*

Enter College Email

College Landline/Mobile Number*

Enter College Landline/Mobile Number

Universty Email*

Enter Universty Email

Internship Details

Place of Internship *

Select Hospital/College

Haryana

Select District

Select City

Enter Pincode

Is Internship Already Started *

Select Is Internship Already Started

Date of joining Internship *

mm/dd/yyyy

Save

Reset

By Clicking on "Save", you will confirm that you have filled valid information.

➤ UPLOAD ALL THE DOCUMENTS IN THE CORRECT/ASKED FORMAT


Medical Practitioner

My Profile

Apply Online

Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi

Upload Original Coloured Copy Of The Following Documents (Max Allowed Size 2MB)
Documents Marked With (*) Are Required

1	Passport-size recent colour photograph (to be affixed on the certificate) *	<div>Choose file</div> No file chosen
2	Stamp Size Signature (To be affixed on certificate) *	<div>Choose file</div> No file chosen
3	Matric Certificate / Birth Certificate in support of Date of Birth. *	<div>Choose file</div> No file chosen
4	Detail Mark Card of 10+2 certificate / Passing Certificate *	<div>Choose file</div> No file chosen
5	Graduation Ist Prof. Certificate (MBBS) *	<div>Choose file</div> No file chosen
6	Graduation IInd Prof. Certificate (MBBS) *	<div>Choose file</div> No file chosen
7	Graduation Final Year Prof Part-I Certificate (MBBS) *	<div>Choose file</div> No file chosen
8	Graduation Final Year Prof Part-II Certificate (MBBS) / Attested Result by Dean / Principal *	<div>Choose file</div> No file chosen
9	MBBS Degree (Provisional / Final) *	<div>Choose file</div> No file chosen
10	Attempt & Character Certificate *	<div>Choose file</div> No file chosen
11	ID Proof (As selected in profile from Aadhar / Passport / Pan Card) *	<div>Choose file</div> No file chosen

By Clicking on "Upload", you will confirm that you have uploaded valid document. After uploading of requird enclosure, payment option will be displayed.

➤ AFTER UPLOADING ALL DOCS, YOU NEED TO CLICK ON PAY APPLICATION FEE


Medical Practitioner

My Profile

Apply Online

Payment History

Application Status

























Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi Dr. VAD

Upload Original Coloured Copy Of The Following Documents (Max Allowed Size 2MB)
Documents Marked With (*) Are Required

1	Passport-size recent colour photograph (to be affixed on the certificate)	 Uploaded ✓	Delete 
2	Stamp Size Signature (To be affixed on certificate)	 Uploaded ✓	Delete 
3	Matric Certificate / Birth Certificate in support of Date of Birth.	 Uploaded ✓	Delete 
4	Detail Mark Card of 10+2 certificate / Passing Certificate	 Uploaded ✓	Delete 
5	Graduation Ist Prof. Certificate (MBBS)	 Uploaded ✓	Delete 
6	Graduation IInd Prof. Certificate (MBBS)	 Uploaded ✓	Delete 
7	Graduation Final Year Prof Part-I Certificate (MBBS)	 Uploaded ✓	Delete 
8	Graduation Final Year Prof Part-II Certificate (MBBS) / Attested Result by Dean / Principal	 Uploaded ✓	Delete 
9	MBBS Degree (Provisional / Final)	 Uploaded ✓	Delete 
10	Attempt & Character Certificate	 Uploaded ✓	Delete 
11	ID Proof (As selected in profile from Aadhar / Passport / Pan Card)	 Uploaded ✓	Delete 

Pay Application Fee/Check Payment Status

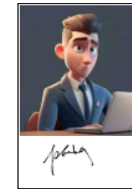
- YOU WILL GET A DRAFT REPORT FORM WHICH WILL INCLUDE ALL EDUCATIONAL AND OTHER DETAILS FILLED BY YOU AND FEES STRUCTURE FOR APPLICATION .



Haryana Medical Council
Sco 410, 2nd floor, Sector 20, Panchkula, Haryana 134117
www.haryana.medicalcouncil.in Phone : 0172 252 0165 Mobile : 0172 252 0165 Fax : 0360-2246708
Email: info@haryanamedicalcouncil.org
[Application For Provisional Registration](#)
Application No : 2025000095 Date : 17/09/2025

Personal Details

1. आवेदक का नाम (Applicant's Name)
2. पिता का नाम (Father's Name)
3. माता का नाम (Mother's Name)
4. जन्म तिथि (Date of Birth)
5. लिंग (Gender)
6. ईमेल (Email Address)
7. Mobile No:
8. Permanent Address:
9. Correspondence Address:



Qualifications Detail:-

Course	University/Board	College Name	Passing Year
MBBS	Unis	Dr. Sankar Prasad Memorial Medical College, Faridkot	Mar-2432

Internship Details:

State	District	City	Pin Code	Date of Joining	Place of Internship	Already Started Internship
Haryana				Jan/2020	Dr. Sankar Prasad Memorial Medical College, Faridkot	Yes

Pay Application Fee For Provisional Registration

Application Fee	Rs. 2,100.00
GST	Rs. 378.00
Hartron Portal & Bank Charges	Rs. 229.22
Total Fee	Rs. 2,707.22

[PayNow](#)

Note: After successful transaction, payment confirmation will be displayed and in case if payment got deducted from bank side and confirmation not displayed then go to payment history link available in your login and click on Verify button to check the status for the same.

➤ YOU NEED TO FILL ALL PAYMENT DETAILS IN THIS PAYMENT GATEWAY TO SUCCESSFULLY SUBMIT YOUR APPLICATION

Haryana Medical Council

Payment For Provisional Registration Application

Contact Details

Contact

Email

Select a payment method

Credit/Debit Card

Visa, Mastercard, Maestro, Rupay

Netbanking

Pay with Internet Banking Account

Wallet

Pay using a Wallet

UPI

Pay using BHIM, GPay and other UPI apps

Amount payable is

₹2,707.22 + Convenience Charges

Pay with Credit/Debit Card

Card Number


Expiry Date

MM / YY


CVV


Cardholder's Name

PAY NOW

Powered by 

VISA



 iCompliance

- AFTER SUCCESSFUL PAYMENT A FORM WILL GENERATE THAT WILL INCLUDE ALL YOUR PERSONAL, EDUCATIONAL, APPLICATION & FEE RELATED DETAILS.

YTo0OntzOjM6InBpZCI7aTowO3M6MzoiY2lkjtpOjA7czo0OiJsaW5rIjtzOjI0OiJtX2Fwc...

1 / 2 | 100% +

Sco 410, 2nd floor, Sector 20, Panchkula, Haryana 134117
www.haryana.medicalcouncil.in Phone : 0172 252 0165 Mobile : 0172 252 0165
Fax : 0360-2246708
Email: info@haryanamedicalcouncil.org

Application For Provisional Registration
Application No : 2025000095 Date : 17/09/2025

Personal Details

Applicant's Name
Father's Name
Mother's Name
Date of Birth
Gender
Email Address
Mobile No
Permanent Address
Correspondence Address

Qualifications Detail:-

Course	University/Board	College Name	Passing Year
MBBS			

Internship Details:

State	District	City	Pin Code	Date of Joining	Place of Internship	Already Started Internship
Haryana						Yes

➤ APPLICATION FOR TRANSFER REGISTRATION


> Medical Practitioner

My Profile

Apply Online


Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi **Prakash** 

Apply Online

1	Application Form For Provisional Registration	Apply Now
2	Application Form For Transfer Registration	Apply Now
3	Application Form For Permanent Registration	Apply Now

1. IF YOU ARE GRADUATE FROM INDIA THEN CHOOSE FOR APPLICATION NUMBER 1 (INDIAN MEDICAL GRADUATE).
2. IF YOU ARE GRADUATE FROM OTHER COUNTRY THEN CHOOSE FOR APPLICATION NUMBER 2 (FOREIGN MEDICAL GRADUATES).

☰


> Medical Practitioner ▾

My Profile

Apply Online

Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi ▾

Apply Online

1	Application Form For Registration Transfer (Indian Medical Graduates)	Apply Now
2	Application Form For Registration Transfer (Foreign Medical Graduates)	Apply Now

➤ AFTER CHOOSING YOUR APPLICATION YOU WILL SEE LIST OF DOCUMENTS REQUIRED AND IMPORTANT INSTRUCTIONS

> Medical Practitioner

My Profile

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Payment History

Application Status

Important Instructions

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3	Matric Certificate / Birth Certificate in support of Date of Birth. * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
4	Detail Mark Card of 10+2 certificate / Passing Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
5	MBBS Degree (Provisional / Final) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
6	NOC of State Medical Council * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
7	Permanent Registration Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
8	Internship Completion Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
9	ID Proof (As selected in profile from Aadhar / Passport / Pan Card) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
10	Self declaration form * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB

→ ACCEPT THE TERMS AND CLICK ON APPLY NOW

4	Detail Mark Card of 10+2 certificate / Passing Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
5	MBBS Degree (Provisional / Final) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
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9	ID Proof (As selected in profile from Aadhar / Passport / Pan Card) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
10	Self declaration form * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
11	Recognized PG degree/diploma and higher (combined into a single PDF if submitting multiple qualifications) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB

☐ I have gone through all the application instructions, hereby ready to apply.

Apply Now

➤ FILL ALL DETAILS CORRECTLY


Medical Practitioner

My Profile

Apply Online

Payment History

Application Status



Haryana Medical Council

Home / Medical Practitioner / Apply Online

Hi

Application For Transfer Registration / Registration Transfer (Indian Medical Graduates)

Medical Qualifications Details

Medical Qualification*

MBBS

Year of Passing*

-----, ----

State of Passing*

Select State

University Name *

Select University

College Name *

Select College

College Email*

Enter College Email

College Landline/Mobile Number

Enter Mobile (10) or STD-Landline (e.g. 011-12345678)

Internship Details

Place of Internship *

Enter Name of Internship Hospital

Address*

Haryana

Select District

Select City

Enter Pincode

Date of joining the internship *

dd-mm-yyyy

Date of completion of the internship *

dd-mm-yyyy

Previous Registration Details

Permanent Registration No of Old Council *

Permanent Registration No

Permanent Registration Date of Old Council*

dd-mm-yyyy

NOC Issued By State Medical Council *

NOC Issued By State Medical Council

NOC Issued On *

dd-mm-yyyy

NOC Validity Date *

dd-mm-yyyy

Do you have any additional qualification(s) already registered with Previous State Medical Council?

Select 'Yes' if **it was mentioned** in your Previous State Medical Council NOC letter.

☐ Yes ☐ No

➤ PRESS SAVE TO MOVE FURTHER IN APPLICATION

Do you want to register any new additional qualification(s) (which is not mentioned in your NOC) with HMC?

Select 'Yes' if it is not mentioned in your Previous State Medical Council's NOC. Additional Fee will be applicable.

☐ Yes ☐ No

Current Working Details

Current Working Place Address

Enter Working Place Address

Remarks

Enter Remarks If any

Purpose of Registration

Purpose of Registration in HMC*

-- Select Purpose of Registration --

Remarks*

Enter Remarks if any

Save

Reset

By Clicking on "Save", you will confirm that you have filled valid information.

➤ UPLOAD ALL THE DOCUMENTS IN THE CORRECT/ASKED FORMAT


Medical Practitioner

My Profile

Apply Online

Payment History

Application Status



Haryana Medical
Council

Home / Medical Practitioner / Apply Online

Hi

Upload Original Coloured Copy Of The Following Documents (Max Allowed Size 2MB)
Documents Marked With (*) Are Required

1	Passport-size recent colour photograph (to be affixed on the certificate) *	<div>Choose File</div> No file chosen
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10	Self declaration form *	<div>Choose File</div> No file chosen
11	Recognized PG degree/diploma and higher (combined into a single PDF if submitting multiple qualifications) *	<div>Choose File</div> No file chosen

By Clicking on "Upload", you will confirm that you have uploaded valid document. After uploading of required enclosure, payment option will be displayed.

➤ AFTER UPLOADING ALL DOCS, YOU NEED TO CLICK ON PAY APPLICATION FEE


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Payment History

Application Status

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Upload Original Coloured Copy Of The Following Documents (Max Allowed Size 2MB)
Documents Marked With (*) Are Required

1	Passport-size recent colour photograph (to be affixed on the certificate)		Uploaded ✓	Delete
2	Stamp Size Signature (To be affixed on certificate)		Uploaded ✓	Delete
3	Matric Certificate / Birth Certificate in support of Date of Birth.		Uploaded ✓	Delete
4	Detail Mark Card of 10+2 certificate / Passing Certificate		Uploaded ✓	Delete
5	MBBS Degree (Provisional / Final)		Uploaded ✓	Delete
6	NOC of State Medical Council		Uploaded ✓	Delete
7	Permanent Registration Certificate		Uploaded ✓	Delete
8	Internship Completion Certificate		Uploaded ✓	Delete
9	ID Proof (As selected in profile from Aadhar / Passport / Pan Card)		Uploaded ✓	Delete
10	Self declaration form		Uploaded ✓	Delete
11	Recognized PG degree/diploma and higher (combined into a single PDF if submitting multiple qualifications)		Uploaded ✓	Delete

Pay Application Fee/Check Payment Status

➤ YOU WILL GET A DRAFT REPORT FORM WHICH WILL INCLUDE ALL EDUCATIONAL AND OTHER DETAILS FILLED BY YOU AND FEES STRUCTURE FOR APPLICATION .

<div>5. लिंग (Gender)</div> <div>6. ईमेल (Email Address)</div> <div>7. Mobile No:</div> <div>8. Permanent Address:</div> <div>9. Correspondence Address:</div> <div>10. Permanent Registration Number:</div> <div>11. Permanent Registration Date:</div>		<div></div>
--	--	-------------

Qualifications Detail:-

Course	University/Board	College Name	Passing Year
MBBS		Atal Bihari Vajpayee School Of Medical Sciences and Research, Gurukul	Sep-2025

Internship Details:

Name of Hospital	State	District	City	Pin Code	Date of Joining	Internship Completed Year
HOSPITAL NAME		PANCHKULA	PANCHKULA			

Current Working Details:

Working Place	Working Purpose in HMC	Remarks
20 c essential medicines distributor	Private Practice	

Pay Application Fee For Transfer Registration

Application Fee	Rs. 3,100.00
GST	Rs. 558.00
Hartron Portal & Bank Charges	Rs. 394.00
Total Fee	Rs. 4,052.00

PayNow

Note: After successful transaction, payment confirmation will be displayed and in case if payment got deducted from bank side and confirmation not displayed then go to payment history link available in your login and click on Verify button to check the status for the same.

Note: Please apply carefully, No refund will be made for wrong application.

➤ YOU NEED TO FILL ALL PAYMENT DETAILS IN THIS PAYMENT GATEWAY TO SUCCESSFULLY SUBMIT YOUR APPLICATION

Haryana Medical Council


Payment For Transfer Registration Application


Contact Details


Contact


Email

Select a payment method

 **Credit/Debit Card**
Visa, Mastercard, Maestro, Rupay

 **Netbanking**
Pay with Internet Banking Account

 **Wallet**
Pay using a Wallet

 **UPI**
Pay using BHIM, GPay and other UPI apps

Amount payable is

₹4,052 + Convenience Charges

Pay with Credit/Debit Card

Card Number


Expiry Date

MM / YY

CVV

Cardholder's Name

PAY NOW

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➤ APPLICATION FOR PERMANENT REGISTRATION


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Payment History

Application Status



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Hi **RAHUL KUMAR D.**

1

Application Form For Provisional Registration

Apply Now

2

Application Form For Transfer Registration

Apply Now

3

Application Form For Permanent Registration

Apply Now

- 1. IF YOU ARE GRADUATE FROM HARYANA THEN CHOOSE FOR APPLICATION NUMBER 1 (MBBS FROM HARYANA).
2. IF YOU ARE GRADUATE FROM OTHER COUNTRY THEN CHOOSE FOR APPLICATION NUMBER 2 (FOREIGN MEDICAL GRADUATES).


> Medical Practitioner

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Apply Online

Payment History

Application Status



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Hi

Apply Online

1	Application Form For Permanent Registration (MBBS from Haryana)	Apply Now
2	Application Form For Permanent Registration (Foreign Medical Graduates)	Apply Now

➤ AFTER CHOOSING YOUR APPLICATION YOU WILL SEE LIST OF DOCUMENTS REQUIRED AND IMPORTANT INSTRUCTIONS


Medical Practitioner

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Payment History

Application Status



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Hi

Important Instructions

Before applying please make sure that you have arranged the scanned copy of the following documents along with valid payment option to pay the application fee online.

List of Enclosures:-

1	Passport-size recent colour photograph (to be affixed on the certificate) * (Allowed file types: .jpg / .jpeg / .png) Allowed Size: 2 MB
2	Stamp Size Signature (To be affixed on certificate) * (Allowed file types: .jpg / .jpeg / .png) Allowed Size: 2 MB
3	Matric Certificate / Birth Certificate in support of Date of Birth. * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
4	Detail Mark Card of 10+2 certificate / Passing Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
5	Graduation Ist Prof. Certificate (MBBS) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
6	Graduation IInd Prof. Certificate (MBBS) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
7	Graduation Final Year Prof Part-I Certificate (MBBS) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
8	Graduation Final Year Prof Part-II Certificate (MBBS) / Attested Result by Dean / Principal * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
9	MBBS Degree (Provisional / Final) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
10	Internship Completion Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB

→ ACCEPT THE TERMS AND CLICK ON APPLY NOW

9	MBBS Degree (Provisional / Final) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
10	Internship Completion Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
11	Provisional Registration Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
12	Attempt & Character Certificate * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
13	ID Proof (As selected in profile from Aadhar / Passport / Pan Card) * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB
14	Self declaration form * (Allowed file types: .jpg / .jpeg / .pdf) Allowed Size: 2 MB

☐ I have gone through all the application instructions, hereby ready to apply.

Apply Now

➤ FILL ALL DETAILS CORRECTLY & PRESS SAVE TO MOVE FURTHER IN APPLICATION .

Medical Practitioner

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Payment History

Application Status

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Hi

Application For Permanent Registration / Permanent Registration (MBBS From Haryana)

Medical Qualifications Details

Medical Qualification*

MBBS

Year of Passing*

State of Passing*

Haryana

University Name *

Select University

College Name *

Select College

College Email*

Enter College Email

College Landline/Mobile Number

Enter Mobile (10) or STD-Landline (e.g. 011-12345678)

Internship Details

Place of Internship *

Select Hospital/College

Haryana

Select District

Select City

Pincode

Date of joining the internship *

dd-mm-yyyy

Date of completion of the internship *

dd-mm-yyyy

Provisional Registration Details

Provisional Registration No *

Provisional Registration No

Provisional Registration Date *

dd-mm-yyyy

Save

Reset

By Clicking on "Save", you will confirm that you have filled valid information.

➤ UPLOAD ALL THE DOCUMENTS IN THE CORRECT/ASKED FORMAT

> Medical Practitioner

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Application Status

Upload Original Coloured Copy Of The Following Documents (Max Allowed Size 2MB)
Documents Marked With (*) Are Required

1	Passport-size recent colour photograph (to be affixed on the certificate) *	<div>Choose File</div> No file chosen
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3	Matric Certificate / Birth Certificate in support of Date of Birth. *	<div>Choose File</div> No file chosen
4	Detail Mark Card of 10+2 certificate / Passing Certificate *	<div>Choose File</div> No file chosen
5	Graduation Ist Prof. Certificate (MBBS) *	<div>Choose File</div> No file chosen
6	Graduation IInd Prof. Certificate (MBBS) *	<div>Choose File</div> No file chosen
7	Graduation Final Year Prof Part-I Certificate (MBBS) *	<div>Choose File</div> No file chosen
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9	MBBS Degree (Provisional / Final) *	<div>Choose File</div> No file chosen
10	Internship Completion Certificate *	<div>Choose File</div> No file chosen
11	Provisional Registration Certificate *	<div>Choose File</div> No file chosen
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Medical Practitioner

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8	Graduation Final Year Prof Part-II Certificate (MBBS) / Attested Result by Dean / Principal		Uploaded ✓	Delete
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10	Internship Completion Certificate		Uploaded ✓	Delete
11	Provisional Registration Certificate		Uploaded ✓	Delete
12	Attempt & Character Certificate		Uploaded ✓	Delete
13	ID Proof (As selected in profile from Aadhar / Passport / Pan Card)		Uploaded ✓	Delete
14	Self declaration form		Uploaded ✓	Delete

Pay Application Fee/Check Payment Status

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Haryana Medical Council
Sco 410, 2nd floor, Sector 20, Panchkula, Haryana 134117
www.haryana.medicalcouncil.in Phone : 0172 252 0165 Mobile : 0172 252 0165 Fax : 0360-2246708
Email: info@haryanamedicalcouncil.org
Application For Permanent Registration
Application No : 2025000105 Date : 19/09/2025

Personal Details

1. आवेदक का नाम (Applicant's Name)
2. पिता का नाम(Father's Name)
3. माता का नाम (Mother's Name)
4. जन्म तिथि (Date of Birth)
5. लिंग (Gender)
6. ईमेल (Email Address)
7. Mobile No:
8. Permanent Address:
9. Correspondence Address:



Qualifications Detail:-

Course	University/Board	College Name	Passing Year
MBBS	PT. B.D. Sharma University Of Health Sciences, Rohtak	Post Graduate Medical College, Rohtak, Kurukshetra, Haryana	Sep-2025

Internship & Registration Details:

State	District	Pin Code	Date of Joining	Place of Internship	Registration No	Registration Date
Haryana	PANCHKULA	140603	Feb/2002	Post Graduate Medical College, Rohtak, Kurukshetra, Haryana		

Pay Application Fee For Permanent Registration

Application Fee	Rs. 3,100.00
GST	Rs. 558.00
Hartron Portal & Bank Charges	Rs. 394.00
Total Fee	Rs. 4,052.00
PayNow	
Note: After successful transaction, payment confirmation will be displayed and in case if payment got deducted from bank side and confirmation not displayed then go to payment history link available in your login and click on Verify button to check the status for the same.	

➤ YOU NEED TO FILL ALL PAYMENT DETAILS IN THIS PAYMENT GATEWAY TO SUCCESSFULLY SUBMIT YOUR APPLICATION

Haryana Medical Council


Payment For Permanent Registration Application


Contact Details


Contact


Email

Select a payment method

 **Credit/Debit Card**
Visa, Mastercard, Maestro, Rupay

 **Netbanking**
Pay with Internet Banking Account

 **Wallet**
Pay using a Wallet

 **UPI**
Pay using BHIM, GPay and other UPI apps

Amount payable is
₹4,052 + Convenience Charges

Pay with Credit/Debit Card


Card Number




Expiry Date

CVV

Cardholder's Name

PAY NOW

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- AFTER SUCCESSFUL PAYMENT A FORM WILL GENERATE THAT WILL INCLUDE ALL YOUR PERSONAL, EDUCATIONAL, APPLICATION & FEE RELATED DETAILS.



1



2



Haryana Medical Council
Sco 410, 2nd floor, Sector 20, Panchkula, Haryana 134117
www.haryana.medicalcouncil.in Phone : 0172 252 0165 Mobile : 0172 252 0165
Fax : 0360-2246708
Email: info@haryanamedicalcouncil.org



Application For Permanent Registration
Application No : 2025000105 Date : 19/09/2025

Personal Details

Applicant's Name : Dr. Anshu
Father's Name : Dr. Anshu
Mother's Name : Dr. Anshu
Date of Birth : 01/01/1995
Gender : Male
Email Address : anshu@haryanamedicalcouncil.org
Mobile No : 9876543210
Permanent Address : 20 c, 2nd floor, Sector 20, Panchkula, Haryana, India
Correspondence Address : 20 c, 2nd floor, Sector 20, Panchkula, Haryana, India

Qualifications Detail:-

Course	University/Board	College Name	Passing Year
MBBS	Post Graduate Institute of Medical Sciences, Rohtak	Post Graduate Institute of Medical Sciences, Rohtak	2020

➤ TO CHECK YOUR PAYMENT HISTORY, YOU CAN OPEN PAYMENT HISTORY TAB FROM HOMPEAGE


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Application Status



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Search:

Show 30 rows

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Excel

Csv

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Column visibility

Sr	Transaction Request ID	Transaction Request Date	Transaction Date	Transaction Amount	Transaction Status	Application Type	Application No
1	68cce58871c27	2025-09-19 10:39:28		4,052.00	Not Completed	Transfer Registration	2025000104 Verify Payment
2	68cce5cfc395b	2025-09-19 10:40:39	2025-09-19 10:49:39	4,147.62	Payment Success	Transfer Registration	2025000104
3	68cd1b8addffe	2025-09-19 14:29:54	2025-09-19 02:35:47	4,147.62	Payment Success	Permanent Registration	2025000105

Showing 1 to 3 of 3 entries

Previous

1

Next

- YOU CAN CHECK THE STATUS OF YOUR APPLICATIONS BY OPENING THE APPLICATION STATUS TAB FROM HOMEPAGE.


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Payment History

Application Status



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Sr	Application No	Application Date	Application Type	Application Status	Action
1	2025000104	19/09/2025	Transfer Registration	Forwarded To Checking	View Report
2	2025000105	19/09/2025	Permanent Registration	Forwarded To Checking	View Report

Showing 1 to 2 of 2 entries

Previous

1

Next