



# VETERINARY COUNCIL OF SRI LANKA

(Established under the Veterinary Surgeons and Practitioners Act No.46 of 1956)

## APPLICATION FOR REGISTRATION

Affix a colour photograph of 35mm x 45mm taken within last six months

Full Name : .....  
(As given in Degree Certificate)

Name with Initials : .....

Permanent Address : .....

.....

Address of Correspondence: .....

.....

Contact No : ..... Email Address : .....

Sex : ..... Marital Status : .....

National ID / Passport No: ..... Date of Issue : .....

Qualification(s) : .....

Date of Graduation : : .....

Place of Graduation : : .....

Provisional Registration Certificate Number : ..... Date : .....

Date of Completing Internship : .....

- Documents to be attached:
1. Degree certificate (original and a copy)
  2. Provisional Registration certificate
  3. Internship certificate (original and a copy)
  4. One character certificate
  5. National identity card / Passport (original and a copy)

I certify that the information provided above is correct to the best of my knowledge. I agree to abide by the rules and regulations governing the veterinary profession in Sri Lanka and by the provisions of the Veterinary Surgeons and Practitioners Act No.46 of 1956 and the subsequent amendments to the same and the regulations framed.

.....  
Date

.....  
Signature of Applicant

### For Office Us Only

Veterinary Council Registration Date : ..... Registration No : .....

Registration Fee : ..... Receipt No.: .....

**REGISTRAR**

