



# Vishwakarma Professional Councils

## Application Form For Registration in (Tick)

Vishwakarma Health Care Council of India [ ]

Vishwakarma Nursing Council of India [ ]

Vishwakarma Para-Medical Council of India [ ]

Vishwakarma Skill Council of India [ ]

Photo  
(Attested)

Name \_\_\_\_\_ DOB \_\_\_\_\_

Father/Mother/Husband's Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Contact No. \_\_\_\_\_

Academics /Technical Qualifications /Skills

\_\_\_\_\_

\_\_\_\_\_

Achievement \_\_\_\_\_

\_\_\_\_\_

I, Solemnly Declare Self-Recognition of my Talent & Skills for Lifetime Membership of the Council to Excel & Explore in my Specialization. I am Transferring Lifetime REGISTRATION FEE of Rs. 5,000/- +18% GST For Council in Voc-Varsity INDIAN BANK Account .

You can Deposit the Amount Directly in Any Branch of "INDIAN BANK"  
or through Bank Money Transfer Mode, Online NEFT/RTGS/ IMPS/ UPI in favour  
of "VOC-VARSITY LLP", Current A/C No.7958925563, Indian Bank, Kundli,  
IFSC Code IDIB000K273, TDI City (Branch Code: 02642),Kundli-131028

X

Full Name  
Date

List of Enclosing Testimonials: Academics, Technical, Professional, Appreciation Letters, Appraisal, Self-Declaration Detail of Skills

No. of Total Pages { } 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_ 7. \_\_\_\_\_

### For Official Use Only:

Receipt No. \_\_\_\_\_ Dated \_\_\_\_\_ Council \_\_\_\_\_

Registration No. \_\_\_\_\_