

UGANDA MEDICAL AND DENTAL PRACTITIONERS COUNCIL

MINISTRY OF HEALTH



P.O. Box 16115,
Plot 6, Lourdel Rd., Wandegaya,
Kampala, Uganda.
Tel: +256-414-345844
E-mail: registrar@umdpc.com
Website: www.umdpc.com

VERIFICATION OF DOCUMENTS FOR APPLICATION FOR CERTIFICATE OF GOOD STANDING – COG

Sn	Documents Presented	Available	Comments
1.	Duly filled and signed application form		
2.	Recent clear coloured passport size photograph		
3.	Clear photocopy of valid APL or last temporary registration certificate (for Non-Ugandans)		
4.	Payments: 100,000=		

Records Verification

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Accounts Verification

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Registrar Approval

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Bank Details

Account Name: Uganda Medical and Dental Practitioners Council (UMDPC)

Account No: 9030005784785

Bank: Stanbic Bank

Branch: Forest Mall

Note that any Stanbic Bank Branch can receive the Payments