

# THE JAMMU & KASHMIR MEDICAL REGISTRATION COUNCIL

Certificate of Registration of Additional Qualification U/S 15  
of the State Medical Council Act, 1998

REGISTRATION NUMBER **4173**

Jammu Dated.....26.07.2018..

I hereby certify that the following additional qualification as shown in column 4 below has/have been entered in the State Medical Register

| NAME                                             | Qualification as Entered in the State Medical Council Register | Regn. No & Date and State Medical Council with which Registered | Additional Qualification entered in the State Medical Register | ADDRESS                                 |
|--------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------|
| Dr. Mahajan<br>Shagun<br>D/O<br>Sh. Anil Mahajan | MBBS (U.Jammu)<br>October, 2012<br>ASCOMS Jammu                | 12624<br>3--1--2013<br>J&K<br>Medical Council                   | M.S.(Surgery)<br>May, 2017<br>U.Jammu<br>ASCOMS Jammu          | H.No.42, Sec-1,<br>Channi Himmat, Jammu |



*[Signature]*  
**REGISTRAR**  
J&K STATE MEDICAL COUNCIL

Only recognised qualifications (i.e. included in the schedule) are mentioned.