



राष्ट्रीय होम्योपैथी आयोग  
**National Commission for Homoeopathy**  
HOMOEOPATHY EDUCATION BOARD

होम्योपैथी शिक्षा बोर्ड  
JawaharLal Nehru Bhartiya Chikitsa Avum Homoeopathy Anusandhan Bhavan  
No.61-65, Institutional Area, Opp. 'D' Block, Janakpuri, New Delhi-110058  
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Azadi Ka  
Amrit Mahotsav



F.No. 3-90/2022/NCH/HEB/HEB Noti.Cir. / 6325-6332 Dated:

Notification/Circular/Advisory

10 OCT 2023

To,

1. The Secretaries/Directors (Health/Medical Education & H/I.S.M./Homoeopathy) of all States/U.T. Governments
2. The Registrars of all the Universities (including Deemed Universities), having Homoeopathic Faculties (or Departments/Boards)
3. The Registrars of all States & U.T. Homoeopathic Boards/Councils
4. The Principals/Deans/Directors of all Homoeopathic Medical colleges (including N.I.H.)

**Sub: Recognition of UG/PG medical qualification of Homoeopathy awarded by concerned University and inclusion of the same in the Medical Qualification Recognition List (MQRL) (Section 35 of the NCH Act, 2020) maintained by the Homoeopathy Education Board of National Commission for Homoeopathy-reg.**

Madam/Sir,

With reference to the subject cited above, it is to inform that regulation namely "National Commission for Homoeopathy (Recognition of Qualifications of Homoeopathy) Regulations 2023" is published online in e-Gazette of India on dated 19.07.2023.

Sub-regulation (4) of regulation 3 of "National Commission for Homoeopathy (Recognition of Qualifications of Homoeopathy) Regulations, 2023" states as below: -

*"All the Universities or medical institutions after the notification of this regulation shall apply for further continuation of recognition of the qualification in the medical qualification recognition list in the prescribed Form A or Form B as the case may be, in the manner and procedure as mentioned regulation 4."*

Sub-clause (a) of sub-regulation (2) of regulation 4 "National Commission for Homoeopathy (Recognition of Qualifications of Homoeopathy) Regulations, 2023" states as below: -

*"(a) University or medical institution fulfilling the eligibility criteria as specified in sub-regulation (1), shall submit duly filled application form offline or online addressed to the President, Board,- (i) for undergraduate Course or any other medical qualification in Homoeopathy as recommended by the Board, application shall be submitted as per the given format specified under Form-A within forty-five days of completions of undergraduate internship.*

*(ii) for postgraduate Course application shall be submitted as per the given format specified under Form-B within forty-five days of completions of postgraduate Course.*

Continued.....



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*Provided that newly established institution of undergraduate Course with due approval by Medical Assessment and Rating Board for Homoeopathy or the Central Government, may initiate the process for applying for grant of recognition of qualification through the degree awarding University, when the students enter internship:*


*Provided further, that if the established medical institution started a new Course or Higher Course in Homoeopathy with due approval by Medical Assessment and Rating Board for Homoeopathy, may initiate the process for applying for grant of recognition of qualification through the degree awarding University, when the students are in final year of the respective course. "*

For recognition of qualification in medical qualification recognition list (MQRL), following points to be kept in notice while sending the details/data of the students:

- Details/data should be prepared and sent for B.H.M.S students who completed their internship after 19.07.2023 as per Form A (for UG).
- Details/data should be prepared and sent for M.D. (Hom) students who completed their course after 19.07.2023 Form B (for PG).
- All the documents to be submitted through proper channel (through University only), separate copies of documents need not be sent by the college to Homoeopathy Education Board, National Commission for Homoeopathy.
- Signature of Registrar of university with seal and date is mandatory.
- Documents should be as per the enclosed format. (Form A/ Form B)
- Details of the student should be batch-wise and clear information may be sent.
- Details of atleast 50% of the students of particular batch who completed their internship or M.D. (Hom) course must be sent for recognition of qualification of Homoeopathy.

Thanking you.


Yours faithfully,

  
(Dr. Tarkeshwar Jain) 18/7/23  
President, Homoeopathy Education Board

Copy to: via email

1. PS to Chairperson, NCH
2. All Board's Presidents, NCH
3. Secretary, NCH
4. Guard file.

Yours faithfully,

  
(Dr. Tarkeshwar Jain)  
President, Homoeopathy Education Board



## Form - A

[see sub-regulation (4) of regulation 3 and sub-regulation (2) of regulation 4]

**Application for undergraduate courses in Homoeopathy or any other medical qualification in Homoeopathy in India**

1. Name of Applicant University granting qualification:
2. Name of the Applicant College/ medical institution:
3. Full name of undergraduate course:
4. Abbreviation of undergraduate course:
5. Application for admitted academic session/batch:
6. At the time of application (online/offline) all the documents to be submitted through proper channel
7. Details of permitted Homoeopathic medical colleges affiliated with the Medical Institution / University along with intake capacity for the applied Course: -

Sl. No.	Name of College / medical institution	Postal Address	E-mail	Website	Academic applied for	Year
(1)	(2)	(3)	(4)	(5)	(6)	

Permission from Central Government /court order for specific batch (enclose/upload the copy of same)	Admission intake Capacity permitted	Number of students admitted	Remarks, if any
(7)	(8)	(9)	(10)

## 8. Provide details of admitted students for each Medical Institution as per

Proforma provided:

Sl. No.	Name of Student	Date of Admission	Common Merit		Admission quota		Admission through	
			Rank	Marks	All India (Yes/No)	State(Yes/No)	Admission on authority (Yes/No)	Court order and Others
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

Date of enrollment in University	University enrollment number	Date of internship completion	Remarks, if any
(10)	(11)	(12)	(13)

## 9. Provide the details of migrated students college wise/ institution wise:

9 -A - For those who migrated to other college (Provide the copy of supporting documents)

S. No.	Name of the Institution/College	Name of the students	Date of migration	Professional year of migration	University enrollment number	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)

9 -B- For those who migrated from other college (Provide the copy of supporting documents) :-

S. No.	Name of the Institution/College	Name of the students	Date of migration	Professional year of migration	University enrollment number	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)

10. Provide the details of intern students for course: -

Sl.No.	Name of students	Year of Admission	Date of result of final year BHMS/ course completed	Provisional Registration No.	Year of provisional registration (from State Medical Council/ board of Homoeopathy)	Date of Starting of Internship	Date of Completion of Internship	Remarks if any
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

SIGNATURE OF REGISTRAR OF THE  
UNIVERSITY WITH SEAL and DATE

**List of enclosure:** The submission or upload of following information supported by necessary documents by medical institution shall be essential to recognise the qualification to be listed and maintained in the medical qualification recognition list by the Homoeopathy Education Board: -

- (i) All the documents to be endorsed with Registrar (Seal) of Concerned University and signature of principal of respective college/ medical institution;
- (ii) Details of number of Homoeopathic Medical Colleges or Institution affiliated to University, at present (and in past) (with their names, addresses and intake capacity);
- (iii) Copy of University Ordinance or Regulation (duly attested by Register of University);
- (iv) Upload or provide details of number of admissions made in undergraduate Course under the University in its affiliated colleges showing the names of candidates, date of admission, NEET score- if applicable, date of examination of the Course year wise in which they have appeared and result of the same.
- (v) Upload or provide details of migration of students from one college to another and vice-versa in enclosed format; and whether permission of *erstwhile* Central Council of Homoeopathy and University was taken in such cases.
- (vi) Provide details of any failure student of the course, if so number there of (college wise) and number of chances availed by them (separately) to clear successfully the said examination.
- (vii) Upload or provide details of dates of starting and completion of compulsory internship training by each student who has passed the course examination in all subjects with name of training hospital where he or she has undergone such training (with their provisional registration given by State Council of Homoeopathy).
- (viii) Copy of approval of such college from Central Government for that specific year.
- (ix) Any other relevant information as and when required.

**Form - B**

[see sub-regulation (4) of regulation 3 and sub-regulation (2) of regulation 4]

**Application for postgraduate Course qualification in Homoeopathy in India**

1. Name of Applicant University granting qualification:
2. Name of the Applicant College/ medical institution:
3. Full name of postgraduate course:
4. Abbreviation of postgraduate course:
5. Application for admitted academic session/batch:
6. Details of permitted Homoeopathic medical colleges/ medical institution affiliated with the medical institution / UNIVERSITY along with intake capacity for the applied Course:

Sl. No.	Name of College / Center/ medical institution	Postal Address	E-mail	Website	Academic Year applied for	Permission from central government /court order for specific batch (enclose the copy of same)	Admission intake Capacity permitted	Number of students admitted for said academic year	Remark, if any
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

7. Number of students admitted as regular candidate (year and subject wise) for M.D. (Hom) course (specialty subject wise)/ any other post-graduate course:

Name of the student with date of admission in the college	Date of registration with University for the Course	Common Merit		Admission quota		Admission through		Qualification (Degree) with name of awarding authority and year of award for admission to M.D. (Hom)
		Rank	Marks	All India (Yes/No)	State (Yes/No)	Admission on authority (Yes/No)	Court order and Others	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

Date of Completion of internship at undergraduate level	Date of registration with State Medical Council of Homoeopathy	Date of Completion of MD(Hom) Part-I Examination/ scheduled examination	Date of Completion of M.D.(Hom)Part-II Examination/ scheduled examination	Date of Declaration of MD (Hom.) part II result	Remarks, if any
(10)	(11)	(12)	(13)	(14)	(15)

8. Details of work done by Post Graduate Students: -

A. Dissertation Topics of P.G. Student - Year wise /Department wise:-

Sr. No.	Name of student	Duration of house job Dates from to	Name of Topic	Date of submission	Any publication from Dissertation (Yes/No)	If yes, mention details (article title/name of journal/year/month/vol.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)

B. Lecture taken by P.G. Students, Batch-

S. No.	Name of student	Class	Date and Day	Time	Topic
(1)	(2)	(3)	(4)	(5)	(6)

C. List of presentations given/seminar attended by P.G. students, Batch-

S. No.	Name of Student	List of Presentation	Title of the Seminar attended/Topic
(1)	(2)	(3)	(4)

SIGNATURE OF REGISTRAR OF THE UNIVERSITY WITH SEAL and DATE

List of enclosures: Provide or Upload following documents.

- Upload or provide details of name of students of post graduate course specialty subject-wise, batch wise with PG entrance examination (whichever applicable) score-if applicable, enrolled by the colleges concerned who have been examined by the University (till date).



- (ii) Provide or upload details of the number of beds earmarked for P.G. students in IPD in Homoeopathic Hospitals of the College concerned be sent with month and year wise bed occupation by patients.
- (iii) Upload or provide a report on work done by PG students during house job or training in the department.
- (iv) Copy of University Ordinance or Regulations (duly attested by Registrar of University) be sent for PG Courses.
- (v) Copy of results declared of PG course in various specialty subjects (college wise, eligible batch wise).
- (vi) Any other relevant information as and when required.