



REQUEST FOR GOOD STANDING CERTIFICATE

I, the undersigned, hold a current and valid CCP certificate from the Board of Cardiovascular Perfusion-India. I request you to issue a Good Standing Certificate in my favour.

BCP-I Certificate No: _____ VALID UP TO: (MM/YYYY) _____

Name of the Perfusionist: _____
(FULL NAME IN CAPITAL LETTERS AS IT APPEARS IN THE CERTIFICATE)

Tele: _____ Email Address: _____

DETAILS OF CURRENT JOB:

Designation: _____

Name and Address of the Hospital: (Full Name of the hospital, city, state, pin)

Working since: (MM/YYYY) _____

Full Name of the Chief / Senior Perfusionist and Designation:

Telephone number and Email address of the Above Perfusionist:

Tele: _____ Email Address: _____

Full Name of the HOD / Consultant CVTS Surgeon and Designation:

Telephone number and Email address of the Above Surgeon:

Tele: _____ Email Address: _____

Reason why you need the Good Standing Certificate:



BOARD OF CARDIOVASCULAR PERFUSION - INDIA

Full Address where you want the certificate to be sent (with city, state, pin code and country)

DETAILS OF ADMINISTRATIVE CHARGES: With Effect from Jan 1, 2023

If the certificate is to be sent to an address within India - INR 100/- (Rupees One Hundred Only)

If the certificate is to be sent to an address outside India - INR 200/- (Rupees Two Hundred Only)

ONLINE PAYMENT:

Administrative charges have to be paid online directly into BCP-I bank account

NAME: BOARD OF CARDIOVASCULAR PERFUSION-INDIA BANK: STATE BANK OF INDIA BRANCH: ELLIS BRIDGE BRANCH, AHMEDABAD – 380006 IFS CODE: SBIN0001041 A/C No. 30749858498

Fill out the transaction details below and also send a copy of the transaction receipt

Transaction No. _____ DATED _____

FROM (NAME, BRANCH & CITY OF ISSUING BANK)

AMOUNT: Rs. 100 / 200

I solemnly affirm that there are no disciplinary proceedings against me and no adverse remarks in my appraisal. The above information is true.

Signature: _____ Date: _____

Please email the filled out and signed form along with a copy of your BCP-I Certificate and the transaction receipt to secretary.bcp@gmail.com **NOTE:** All documents should be in pdf format only. For any clarification, either email or WhatsApp +91-9831497490