

UGANDA MEDICAL AND DENTAL PRACTITIONERS COUNCIL
MINISTRY OF HEALTH



P.O. Box 16115, Kampala
Block 5 Plot 442
Kafeero Zone road – Mulago Hill
Tel: +256-200-904427
E-mail: registrar@umdpc.com
Website: www.umdpc.com

**VERIFICATION OF DOCUMENTS FOR TEMPORARY REGISTRATION
(NON-UGANDANS)**

SN	Documents Presented	Available	Comments
1.	Duly filled and signed registration form		
2.	Recent coloured passport size photograph		
	University degree/professional Medical or Dental qualification certificates		
3.	Transcripts of University degree/Professional Medical or Dental qualification Certificates		
4.	Certificate of Registration from Country of Origin		
5.	Certificate of Good Standing/Professional Status from Medical Council/Board		
6.	Letter of invitation/introduction from intended Ugandan employer		
7.	Curriculum Vitae		
8.	Three (3) reference letters from Professional Associates		
9.	For Specialists: Attach evidence of Postgraduate training three (3) years and above		
10.	All documents written in a language other than English MUST be accompanied by a copy of an official translation duly certified by a Notary		
11.	Pre-registration examination where appropriate		
12.	Registration fees: Public sector: \$200 Private sector: \$400		

BANK DETAILS

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

Account No: 8702010712600

Bank: Standard Chartered Bank

Branch: Speke road

Note that any Standard Chartered Bank Branch can receive the Payments