SPECIMEN OF SELF DECLARATION FOR FIRST REGISTRATION

To be submitted before the Registrar Punjab State Pharmacy Council

IS/o,D/o Father Sh	Mother
Smt R/o	
do here by solemnly do	declare as under:-
1. That I have passed Matriculation Examination from (School, Place Tehsil Distr	
Year/ Session and my date birth is	nr the
2. That I have passed 10+2 Examination from (School, Place	
Year/Session and I have already completed 18 year of age.	
3. That I have passed my Diploma/Degree in Pharmacy from _	
Distt State in year/session	
4. I have undergone practical training (Industrial) in (Name of Hospital	
in Tel bours from to	spread
over a period of three months.	
5. That I declare under oath that I have genuinely obtained all my qualificates of Matric, 10+2 & Diploma/Degree attached herewith are concerned Board/University and PCI, New Delhi & are completely genuinotherwise, I'll not claim for Registration as Pharmacist. Furthermore I shall a for producing fake or false certificates before the Registrar & Staff, PSPC guilty & punished for this offence not the Registrar or Staff, PSPC.	approved from the ne & true. If found alone be responsible
6. That I am a domicile of Punjab being permanent resident of Vi	ill
Tehsil Distt in Punjab State. (Adhaar Card enclosed	d).
7. That I am not registered as a pharmacist anywhere in India with a Council. I have applied for the Registration with Punjab Pharmacy Council fo	•
8.I undertake that my registration as Pharmacist may be cancelled if I found gaccording to the Pharmacy Act, 1948 as amended and State Pharmacy Coagree that I will follow the Rules of Punjab Pharmacy Council which may be guidance of registered pharmacists from time to time.	uncil Rules, 1951. I
<u>VERIFICATION</u> DI	EPONENT
I the above said deponent further declare that the above given the best of my knowledge and belief.	statement is true to
Dated:-	EPONENT

SPECIMEN OF SELF DECLARATION FOR FRESH REGISTRATION OF PHARMACIST $\underline{FROM\ ABROAD}$

To be submitted before the Registrar Punjab State Pharmacy Council

	S/o,D/o F	ather Sh		Mother
Smt.	K	0	do here by soler	nnly declare as under:-
1. That I have passed				
Distt. in the	ne Year/ Session	·		
2.That I have passed 1			-	1 11
Disttin	the Year/Session	and I l	nave already con	npleted 18 year of age.
3.That I have passed m			omistt.	State
in y	vear/session			
4.I have undergone p			(Name of Hos	pital/Dispensary,Place) in
Tehsil				hours from
tos	pread over a period	of three month	S.	
5.That I declare under Certificates of Matric, concerned Board/Unive otherwise, I'll not claim for producing fake or fi guilty & punished for the	10+2 & Diploma ersity and PCI, New for Registration as alse certificates be	n/Degree attack v Delhi & are Pharmacist. F fore the Regis	hed herewith a completely gen urthermore I shattar & Staff, PS	re approved from the nuine & true . If found all alone be responsible
6.That I am a domic	cile of Punjab be	ing permanen	t resident of	Vill.
	stt.			Tehsil
7. That I am not reginal Council. I have applied	_	•		•
8.I undertake that my re according to the Pharm agree that I will follow guidance of registered p	nacy Act,1948 as a the Rules of Punja	mended and S b Pharmacy Co	State Pharmacy	Council Rules,1951. I
<u>VERIFICATION</u>				DEPONENT
I the abo	-	orther declare t	hat the above gi	ven statement is true to
Dated: -				DEPONENT