

**AFFIDAVIT**

To  
The Registrar,  
Punjab Pharmacy Council,  
Sec. 69, S.A.S.Nagar (Mohali)

I, \_\_\_\_\_, a student of \_\_\_\_\_,  
aged \_\_\_\_\_, residing at \_\_\_\_\_,

do hereby solemnly affirm and declare as follows:

1. I affirm that I was admitted to \_\_\_\_\_  
for the Diploma in Pharmacy (D. Pharm) course in the 2022-2023 academic session and  
successfully completed the course in the 2023-2024 academic session.
2. I acknowledge that the exit examination has not yet been conducted, and I have not appeared for  
the same. Therefore, I request that the registration certificate be issued, which shall remain valid  
for a period of one (1) year, or until the exit examination is conducted and completed,  
whichever is sooner.
3. I undertake that the registration certificate shall not be renewed unless I have successfully  
cleared the exit examination. The Punjab Pharmacy Council will issue a renewal certificate only  
upon submission of proof of passing the exit examination.
4. I further affirm that, should I fail to clear the exit examination within the validity period of the  
registration certificate, I shall not be eligible for any further renewal or continuation of my  
registration unless I submit proof of clearing the exit examination.

DEPONENT

\_\_\_\_\_  
(Signature of the Student)

\_\_\_\_\_  
(Full Name of the Student)

\_\_\_\_\_  
(Name of the Institution )

(Residence Address)\_\_\_\_\_

\_\_\_\_\_  
Date:\_\_\_\_\_

Place:\_\_\_\_\_

Mobile:\_\_\_\_\_

Email:\_\_\_\_\_