## PUNJAB PHARMACY COUNCIL, LAHORE

(Established under Pharmacy Act, 1967)

Block No.7, LDA Flats, Huma Block, Allama Iqbal Town, Lahore. Ph. # 042-99260298-300

www.punjabpharmacycouncil.com



Attested
Photograph
to be Pasted
by the
Applicant

### Application Form for Registration as Pharmacy Technician in Register-B

Name (Block Letters)					
2. Father's Name:					
6. Roll No	Session	Held in			
7. From the Institute					
8. Date of Birth	Place of Birth				
9. National Identity Card No	Nationality				
10.e-mail address.	Phone No				
11.Mark of Identification					
		has been remitted by			
Bank Draft/Pay Order No		Dated:			
Receipt No	Dated:				
	Signature of Applicant				
red:	Fı	nglish			
	Li	nglish			
- allawina da aymanta myat i		rdu			

#### Following documents must be submitted/attached with the application form:

- 1. Six (6) Photographs Passport Size (blue background & clear photo) attested by the Principal/Director of the Institute concerned. (one photo front side & 5 from back side attested photographs).
- 2. Two (2) Colored photocopies of Diploma Certificate attested by the Principal / Director / Head of the Institute
- 3. Two (2) Specimen Signatures duly attested by the Principal / Director / Head of the Institute concerned.
- **4. Two (2)** Photocopies of National Identity Card attested by the Principal / Director / Head of the Institute concerned.
- **5. One (1)** Photocopy of 1<sup>st</sup> and 2<sup>nd</sup> Year Result Card attested by the Principal / Director / Head of the Institute concerned.
- **6.** Affidavit as per specimen given overleaf on Judicial paper of Rs. 100 duly attested by Oath Commissioner / Notary Public /Magistrate 1<sup>st</sup> Class.
- 7. Original Character Certificate by the Principal / Director / Head of the Institute concerned.
- 8. Admission letter / Enrollment card of the candidate attested by the Principal / Director / Head of the Institute concerned.
- **9. Four (4)** attested colored photocopies of Matric or equivalent certificates.
- 10. Pay Order / Demand Draft of **Registration Fee** in the name of Secretary, Punjab Pharmacy Council of Rs. 5000/- or Registration Fee may be submitted in the office of Punjab Pharmacy Council personally.
- **11.** Fee for Matric or equivalent certificate verification as prescribed / required by the Board concerned.
- 12. NOC from concerned Institute.

## **AFFIDAVIT**

		Resident of							
								do her	eby
soler	mnly affirm	and decla	are as under:	-					
1.	Ipassed	Diploma/	Pharmacy T	echnician	, Examination	in the	Year_		
	Roll No		Ses	ssion		to		fro	om th
	Institute_					my	enrol	lment	No.
	college	is		My	Diploma	Certificat	e	No.	is
	date is								
2.	That	the	Instit	tute			issued	m	y
	Diploma	Certificate	vide No		which is ge	enuine one.			
3.	That my N	lational Ide	entity Card No	0		is g	enuine		
4	That I hav	e never be	en granted F	Registratio	on Certificate by	v any of the	Provin	ncial	
•••			_	_	have applied fo				
5.	That I have	∕e never b	oon oonviote	- al las <i>i</i> - as-					
	Turpitude		een convicte	ed by any	Court of Law	for an offe	nce inv	volving	Moral
6.	·	<b>e</b> .			mind by any C			volving	Moral
	That I hav	e. e never be	een declared	unsound		ourt ofLaw			
7.	That I hav That in ca per law	e. e never be se of false	een declared information l	unsound Punjab Pl	mind by any C	ourt ofLaw cil may take			
7.	That I hav That in ca per law	e. e never be se of false	een declared information l	unsound Punjab Pl	mind by any C narmacy Cound	ourt ofLaw cil may take			
7. 8.	That I hav That in ca per law	e. e never be se of false	een declared information l	unsound Punjab Pl	mind by any C narmacy Cound	ourt ofLaw cil may take	action		
7. 8.	That I hav That in ca per law That as sta	e. e never be se of false	een declared information l	unsound Punjab Ph	mind by any C narmacy Cound	ourt of Law cil may take lief.	action		
7. 8.	That I hav That in ca per law That as sta	e never be se of false ted above is	een declared information I s true to the be	unsound Punjab Ph	mind by any C narmacy Cound	ourt of Law cil may take lief.	action		

Knowledge and belief and nothing have been concealed.

**DEPONENT** 



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# Punjab Pharmacy Council, Lahore Specialized Health Care & Medical Education Department **Government of the Punjab**



(Established under Pharmacy Act, 1967)

	Ref. No To						
	Name of Applicant			<u> </u>			
	Address						
	Callana						
	College	4 DDL 10 4 TL	0V 50D D5		0W 40		
	Subject: DOCUMENTRY DEFFICIENCY IN YOUR PHARMACY TECHNICIAN			GISTRATI	ON AS		
	Reference your application for Registration as <b>Pharmac</b> Council, Lahore, on preliminary scrutiny of your applicati were found deficient / not as per format:						
S#	Requirement as per Volume 1.1	Attached	Not Attached	As per format	Not as format	per	
1	<b>Six (6)</b> Photographs Passport Size (blue background & clear photo) attested by the Principal/Director of the Institute concerned. (one photo front side & 5 from back side attested photographs).						
2	Two (2) Colored photocopies of Diploma Certificate attested by the Principal / Director / Head of the Institute concerned. Two (2) Specimen Signatures duly attested by the Principal /						
	Director / Head of the Institute concerned.						
4	<b>Two (2)</b> Photocopies of National Identity Card attested by the Principal / Director / Head of the Institute concerned.						
5	One (1) Photocopy of 1st and 2nd Year Result Card attested by the Principal / Director / Head of the Institute concerned.						
6	Affidavit as per specimen given overleaf on Judicial paper of Rs. 100 duly attested by Oath Commissioner / Notary Public						
7	/Magistrate 1 <sup>st</sup> Class.  Original Character Certificate by the Principal / Director / Head of the Institute concerned.						
8	Admission letter / Enrollment card of the candidate attested by the Principal / Director / Head of the Institute concerned.						
9	Four (4) attested colored photocopies of Matric or equivalent certificates.						
10	Pay Order / Demand Draft of <b>Registration Fee</b> in the name of Secretary, Punjab Pharmacy Council of Rs. 5000/- or Registration Fee may be submitted in the office of Punjab Pharmacy Council personally.						
11	Fee for Matric or equivalent certificate verification as prescribed / required by the Board concerned.						
12	NOC from concerned Institute.						
*	✓ Tick the in the relevant box.						
**	The candidate may proceed for Registration fee submiss				41		
***	Fee as per Sr. No. 11 is the responsibility of applicant ar of registration.			-	·		
****	Candidate before submission of documents shall che usually are Session in the College & documents submit above.						
****		ents along v	with this le	tter at the	e earliest	to	
Sigi	nature & Thumb		PPC St	aff			
_	ndidate)	Counter No. 2					