

Specimen Copy

Self-Declaration Letter

Complete name and address of pharmacist

Date: _____

To,
Registrar,
Gujarat State Pharmacy Council
Old Nursing College Building,
Block No. - 4/A, 3rd Floor,
Opp. Cancer Hospital, Gate No. - 6, Asarwa, Ahmedabad - 380016.

Subject: About not doing job / business / studies

Respected Sir,

I hereby declare that I _____ (full name) _____ have got admission on the basis of 12th in D.Pharm / B.Pharm / Pharm D course from _____ (name of college) _____, and completed my study of D.Pharm / B.Pharm / Pharm D. After that, I have not done any job, business or studies anywhere. I assure for the same. Also, in future, if I am doing any job, business or studies, then I will inform to Gujarat state pharmacy council and submit relevant documents for the needful. I assure that the pharmacist registration certificate issued will not be misused by me or any other person. I hereby submit declaration for the same. If any violation is observed while following above declaration, it shall be my own personal responsibility.

Yours Faithfully,

(Name & Sign of Pharmacist)