

ROLL No. _____

PUNJAB PHARMACY COUNCIL, LAHORE

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

ADMISSION FORM FOR EXAMINATION OF **PHARMACY TECHNICIAN** (DIPLOMA COURSE) Year of Examination _____



**Attested
Photograph to
be Pasted by
the Applicant**

THE REGISTRAR
PUNJAB PHARMACY COUNCIL
LAHORE

Sir,

Request for permission to appear in the Examination of the Punjab Pharmacy Council for Registration under Section 25(b) of the Pharmacy Act, 1976. Necessary particulars:-

1. Full Name _____
2. Father's Name _____
3. Date of Birth _____ Religion _____
4. Caste _____ Qualification _____
5. Must attach the following:-
 - i) Colored photocopies Matric Certificate (4 Nos.)
 - ii) Four Photographs
 - iii) Institute Admission Letter
 - iv). Character Certificate.
 - v) I.D. Card No. _____
(Attach attested copies of all certificates)
6. Permanent Address _____

7. Name of Institution _____

8. Address (Institute) _____ Phone No. _____
9. E-Mail:- _____ Cell No. _____

Signature of Applicant

English _____

Urdu _____

I verified the particulars mentioned in this form are correct.

Signature of Principal/Director of Institute with stamp _____

For Office Use only

Admission form has been received and required documents have been checked
Admission Fee has also been received. May be admitted please.

Prepared by (Exam. Clerk) _____ Checked by (Assistant) _____

Cash Receipt No. _____ Accountant _____

- I) The Examination Fee is **Rs. 4,500/-**, after the expiry of due date double fee amounting to **Rs. 9,000/-** has to be remitted.
- II) Incomplete Form shall not be accepted.

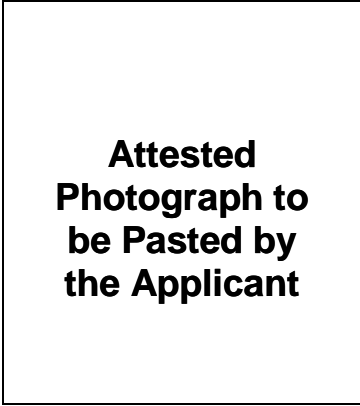
ROLL NO. SLIP

ROLL No. _____

Candidate will be admitted in the Examination Hall on production and delivery of this Roll Number Slip. Please bring your National Identity Card during Theory and Practical Examination.

PUNJAB PHARMACY COUNCIL, LAHORE

Admit Mr./Miss./Mrs. _____ S/o, D/o, W/o _____
in the Examination being held on _____
at Center _____ at the _____



**MOBILE PHONE, BAG, BOOKS
AND NOTES NOT ALLOWED IN
THE EXAMINATION HALL.**

Signature of Candidate _____

REGISTRAR
Punjab Pharmacy Council

Verified by Principal _____

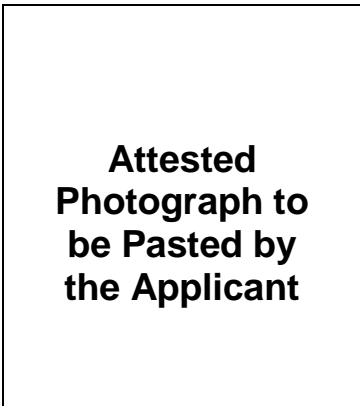
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AND NOTES NOT ALLOWED IN
THE EXAMINATION HALL.**

Signature of Candidate _____

REGISTRAR
Punjab Pharmacy Council

Verified by Principal _____

CHECK LIST / UNDERTAKING
(PHARMACY TECHNICIAN ADMISSION)

I Principal / Director of _____ undertake that the said student fulfills the admission criteria of Pharmacy Technician Program. His / Her admission form and documents are thoroughly checked and verified as per detail mentioned below. All the documents are attached according to the sequence given in this checklist.

Student's Name: _____ **List Sr. No.** _____ **Session:** _____

SR. NO.	PARTICULAR	YES / NO
1.	Admission form is completely filled in capital letters as per Matric Certificate .	
2.	Colored Photocopies of Matric Certificate (04) attested by the Principal /Director of institute. (Only Science Group) i.e., Physics, Chemistry and Biology/Computer Science/Electric Wiring/ Poultry Forming. *Note: Matric with arts/general science group and online certificate is not accepted in any case	
3.	Recent Passport Size Photographs (04) with blue back ground attested from back by the Principal / Director of the institute.	
4.	Colored Photocopies of CNIC (02) attested by the Principal /Director of institute.	
5.	Latest Character Certificate issued by Institute/College on Letter Head	
6.	Original Admission Letter issued by Institute/College on Letter Head	
7.	Form is signed & stamped by the Principal/Director of this Institute.	

I, _____ hereby further declare that the details furnished above are true and correct to the best of my knowledge. In case of any discrepancy/short coming **Punjab Pharmacy Council, Lahore** have right to cancel the admission. I also understand that in case bogus/counterfeit/forged/tampered documents the Punjab Pharmacy Council, Lahore is fully authorized to cancelled the Enrollment/Registration of the student at any stage of the said course, even after passing the exams and getting the registration in register B.

Signature & Thumb
(Student)

Signature & Stamp
(Stamp of the College Principal)

Signature & Stamp
(Stamp of the College
CEO/Director)

Date: _____

ADMISSION LETTER

It is certified that _____ has been enrolled/admitted in the Part-I of Diploma in Pharmacy/Pharmacy Technician course as regular student for the session of _____.

His / Her conduct and character as recorded by the college discipline committee during his / her stay in the college has been satisfactory.

Chief Executive/Principal
(College/Institution Name)

Date: _____

CHARACTER CERTIFICATE

It is certified that _____ has been a bonafied student of this college. He / She attended Pharmacy Technician classes during the session _____.

His / Her conduct and character as recorded by the college discipline committee during his / her stay in the college has been satisfactory.

Chief Executive/Principal
(College/Institution Name)