



KARNATAKA STATE PHARMACY COUNCIL
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RE-REGISTRATION APPLICATION

1. General Instructions

- The applicant should be a Citizen of India and should have completed 18 years of age.
- Registerable Qualifications - D. Pharm, B. Pharm, Pharm D approved by Pharmacy Council of India.
- Those who have already registered in other State Pharmacy Councils.

2. Fees (Refer Notifications on www.kspcdic.com)

Fee can be directly remitted to the following account by NEFT / NetBanking (Credit & Debit Card)

Payment – 1 (KSPC)	Payment – 2 (KPCRPT)	Payment – 3 (Additional Qualification)
Amount: Rs.3,700.00/- Bank Name: State Bank of India Branch: Vijayanagar II Stage IFSC Code: SBIN0040231 Account Name: "Karnataka State Pharmacy Council" Account Type: Savings Bank Account No. : 52117060304	Amount: Rs.4,200/- Bank Name: Karnataka Bank Limited Branch: Vijayanagar IFSC Code: KARB0000105 Account Name: "Karnataka Pharmacy Council Registered Pharmacist Welfare Trust" Account Type: Savings Bank Account No. : 1052500100173701	Amount: Rs.1000/- per Qualification. Bank Name: State Bank of India Branch: Vijayanagar II Stage IFSC Code: SBIN0040231 Account Name: "Karnataka State Pharmacy Council" Account Type: Savings Bank Account No. : 52117060304

Note: Payment – 3 – Those pharmacists who wants to upgrade their qualification along with the Registerable Qualification

3. Scan the original documents mentioned below before filling the application form:

- Proof for Date of Birth** - SSLC or 10th marks card / Cumulative Record / 10th School Leaving Certificate / 10th Transfer Certificate / Birth Certificate / Pan Card / Passport (issued by competent authority)/Aadhar Card.
- Resident of Karnataka** - Address Proof of the Candidate – Those who are resident of Karnataka should compulsorily produce any of these - Voter ID / Ration Card / Aadhar Card / Driving License / Bank Passbook with photo and seal (all issued by competent authority) **(both sides wherever relevant)**.
- Non-Resident - Address Proof of the Candidate**
 - If you are staying in a rented house, you have to produce rental agreement along with the ID proof of the Owner.
 - If you are working in a hospital and staying in the hospital hostel you have to submit original letter (on the hospital letterhead) with seal and signature from hospital that you are working

in the hospital and staying in the hospital hostel.

- If you are a student and staying in college hostel, you have to submit original letter (on the college letterhead) from the college warden that you are studying and staying in the college hostel.
 - If you are working in a Company and staying in the company guest house, you have to submit original letter (on the company letterhead) with seal and signature from company head that you are working in the company and staying in the company quarters.
- d) Marks card – SSLC or 10th marks card issued by competent authority.
- e) Marks Card – P.U.C. marks card issued by competent authority.
- f) Marks card - First Year & Final Year Marks Card of Diploma in Pharmacy issued by competent authority and college approved by Pharmacy Council of India.
- g) Marks card – All the marks cards of B.Pharm / Pharm D issued by competent authority and college approved by Pharmacy Council of India.
- h) Pharm D / Pharm D (Post Baccalaureate) Internship - A certificate of satisfactory completion of training shall be obtained from the relevant administrative authorities from the hospital which shall be countersigned by the Principal or Dean of the Pharmacy College you studied.
- i) Diploma Certificate issued by Board of Examining Authority / Competent authority recognized.
- j) Provisional Degree Certificate of issued by University / Competent authority. **(Accepted within one year from the date of issue of certificate).**
- k) Convocation Degree Certificate of the qualification you intend to register issued by University / Competent authority.
- l) For Additional Qualification –**
- Marks card - First Year to Final Year Marks Degree marks card issued by competent authority approved by Pharmacy Council of India.
 - Provisional Degree Certificate of issued by University / Competent authority. **(Accepted within one year from the date of issue of certificate).**
 - Convocation Degree Certificate of the qualification you intend to register issued by University / Competent authority. (All previous Convocation Degree Certificate)
- m) The Counter foil of the payment remitted to KSPC account.

4. Profile - Name of the Candidate, Father's Name as in SSLC Marks Card / qualifying Certificate.

5. Mother Name - should be filled as in SSLC or 10th marks card / Cumulative Record / 10th Transfer Certificate / Birth Certificate / Passport (issued by competent authority).

6. Date of Birth - should be filled as in SSLC or 10th marks card / Cumulative Record / 10th School Leaving Certificate / 10th Transfer Certificate / Birth Certificate / Pan Card / Passport (issued by competent authority).

7. E-mail - Candidate personal mail ID (for validation and further communication).

8. Mobile No - Candidate mobile number (for validation and further communication).

9. Blood Group - Report issued by a pathology laboratory / hospital.

10. Registration Certificate - of the state pharmacy council you last registered.

11. PCI approval letter (both sides) - for the year of admission under Sub-Section 1 of Section 12 of the Pharmacy Act, 1948 of the qualification you propose to register.

12. Student Study Certificate Letter from College (Copy) Click Here to download the letter <http://kspcdic.com/sites/Bonafide%20college%20Letter.pdf>

12. Photo - Scan the recent passport size colour photo which white background only (jpg, jpeg, png). Profile Photo will be rejected.

14. Signature - Sign and Scan your signature in BLACK ink only on white background. (jpg, jpeg, png).

15. Aadhar Card

16. Change of Name - 1st Class Judicial Magistrate (Court Order), Gazette Notification, Marriage Certificate & Paper Advertisement authenticating change of name.

16. Submission of Originals - As mentioned in Sl. No. 3 (d, e, f, g, h, i, j, k).

KARNATAKA PHARMACY COUNCIL REGISTERED PHARMACIST WELFARE TRUST (KPCRPT-A)

1. Eligibility:

- The applicant should be a Citizen of India and should be between 18 to 60 years of age to enroll under KPCRPT.
- The applicant must be a Registered Pharmacist in Karnataka State Pharmacy Council.

2. Benefits under this scheme:

1. IN CASE OF MEDICAL CLAIM:

- ✓ A partial disbursement up to 1/3 of the minimum amount for the medical treatment in case of serious illness such as cancer, cardiac surgery, kidney transplantation etc. to be decided by Trust Executive Committee on Merits.
- ✓ A discharge certificate from the Hospital / Nursing Home indicates the brief report of illness and the treatment given should be produced in original or a certified copy.

2. IN CASE OF DEATH:

- ✓ The quantum of amount of Rs.1,00,000/- to be given in case of death which will be reviewed every year depending upon the trust resources.
- ✓ Any partial amounts paid under medical claim will be deducted from final settlement to the nominee.
- ✓ Death Certificate issued by a competent authority in original shall be produced along with claim.
- ✓ The claim shall be made in writing by the nominee who is registered in the trust.
- ✓ In case the Registered nominee is not alive at the time of claim, only the legal heir approved by the court of law can make the claim producing the proof of their legal heir rights. The claim should be made within 3 months or 90 days from the date of death.

3. Scan and keep ready all the following documents of Nominee (Nominee should be blood relation only)

- Address proof of the Nominee
- Aadhar Card of the Nominee
- Nominee Photo - Recent passport size colour photo which white background only (jpg, jpeg, png). **(Note: Profile photo will be rejected.)**
- Nominee Signature - Sign your signature in BLACK ink only on white background. (jpg, jpeg, png).
- **In case of Nominee is Minor –**
 1. Proof of Date of Birth of the Nominee - Birth Certificate / School Certificate / Passport / Aadhar Card etc., (issued by competent authority).
 2. Address proof of the Nominee
 3. Aadhar Card of the Nominee
 4. Nominee Photo - Recent passport size colour photo which white background only (jpg, jpeg, png). **(Note: Profile photo will be rejected.)**
 5. Nominee Signature - Sign your signature in BLACK ink only on white background. (jpg, jpeg, png).
 6. Self-attested address proof of the Guardian
 7. Aadhar Card of the Guardian
 8. Guardian Photo - Recent passport size colour photo which white background only (jpg, jpeg, png). Profile Photo will be rejected. **(Note: Profile photo will be rejected.)**
 9. Guardian Signature - Sign your signature in BLACK ink only on white background. (jpg, jpeg, png).

4. If payment is made by NEFT, the Counter foil of the payment remitted to **KPCR PWT** account should be uploaded.

Application Form - Print the copy of the auto generated Application Form sent to your mail, sign (in BLACK ink only) and send all the original documents with 15" * 11" size self-addressed (Capital letters only) non-terable cloth lined cover to KSPC office for verification within 7 working days.

ALSO MENTION ON COVER "ONLINE APPLICATION FOR FRESH APPLICATION"

Note:

1. Original Certificates submitted by the pharmacist will be returned along with the KSPC, KPCR PWT Certificate and ID Card issued by the Council.
2. The Certificate issued by the Karnataka State Pharmacy Council will expire on 31st December of the subsequent year of date of registration.
3. Retention of Name in the register - Renew every year before 31st of March as per Sec.34 of the Pharmacy Act, 1948.
4. The council is nowhere responsible for any wrong information provided by the Candidate and deviations from the original certificates. Please ensure proper filling of the application before submission.