



**FORMAT OF AFFIDAVIT FOR STUDY GAP ON Rs.20/- NON-JUDICIAL
BOND PAPER OF KARNATAKA ATTESTED BY NOTARY**

(Declare in the affidavit whichever is applicable)

I Sri/Smt/.....S/o/D/o Sri..... aged.....years residing at (Karnataka Address) do hereby solemnly affirm and state as under:

1. That I have completed my Pharmacy Course.
2. The period of my studies is as under:

Courses	Period of study		Month & Year of passing
	From	To	
SSLC			
PUC			
D. Pharm			
B.Pharm			
M. Pharm			
Ph.D			
Pharm D			
Pharm D (PB)			

3. There is a gap of years between the completion of my SSLC to 12th /PUC / higher secondary.
4. There is a gap of years between the completion of my 12th /PUC / higher secondary to my D.Pharm (I year / II year).
5. There is a gap of years between the completion of my D.Pharm to B.Pharm (I year / II year) / III year / IV year).
6. There is a gap of years between the completion of my B.Pharm to M.Pharm (I year / II year).
7. There is a gap of years between the completion of my M.Pharm to Ph.D.
8. There is a gap of years between the completion of my D.Pharm to Pharm.D.
9. There is a gap of years between the completion of my B.Pharm to PharmD (PB).
10. That during the gap period I was working with(name of the organization) as(Dsgn.) from to **OR**
11. That during the gap period I was preparing for examination.
12. Any other reasons apart from Sl.No. 10 & 11
13. That I was not involved in any criminal offence whatsoever and I was not punished for any offence by any Court of law during this gap period.

I swear that the information furnished above are true and correct.

Witness:

Date:
Name:
Address:

Signature of the Deponent

Deponent signed before me
Seal of the Notary