

**SSR COLLEGE OF PHARMACY**  
Sayli, Silvassa, U.T. of Dadra & Nagar Haveli-396230

**Registration form**

**TWO DAYS**  
**(27<sup>th</sup> & 28<sup>th</sup> OCTOBER 2018; Saturday & Sunday)**  
**REFRESHER COURSE FOR REGISTERED PHARMACIST**  
**SPONSORED BY**  
**GUJARAT STATE PHARMACY COUNCIL (GSPC)**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Qualification: \_\_\_\_\_ Designation: \_\_\_\_\_

GSPC Regn. No.: \_\_\_\_\_ Date of Last Renewal: \_\_\_\_\_

Name and Address of Present Organization: \_\_\_\_\_

\_\_\_\_\_

Address of Communication: \_\_\_\_\_

\_\_\_\_\_

Contact No.: (M) \_\_\_\_\_ (O) \_\_\_\_\_

Email ID: \_\_\_\_\_

**Registration Payment by Demand Draft / Cash**

Cheque / D.D. Number: \_\_\_\_\_ of Date: \_\_\_\_\_

Name of Issuing Bank: \_\_\_\_\_

Date:

Sign. of Applicant:

**Last date of Registration is 13<sup>th</sup> October 2018, Saturday. Photocopy of this form can be used.**

**ENCLOSURES:**

[1]. Self Attested Photocopy of 'Pharmacist Registration Certificate.

[2]. Self Attested Photocopy of 'Receipt of Last Renewal'.

[3]. Cheque / D.D. of Registration fees Rs. 300/- in favor of 'SSR COLLEGE OF PHARMACY'  
Payable at SILVASSA (If applicable)

**Receipt**

Sr. NO: \_\_\_\_\_

GSPC Reg. No: \_\_\_\_\_

Received with thanks from Mr./Ms./Mrs. \_\_\_\_\_ an  
amount of Rs 300/- against registration fees for "Refresher course for the registered pharmacist"  
by Cheque/Demand Draft/Cash

**Sign of Receiver**