



NAME REGISTRATION UP-TO-DATE APPLICATION FORM

Relation to Rule 7.4

The Registrar
Nepal Pharmacy Council
Kathmandu

Recent
passport size
photograph of
the applicant
showing both
ears

I hereby submit this application form with details required to be made available to maintain up-to-date record of name in accordance with Rule 7.4 of the Nepal Pharmacy Council Regulation, 2002.

1. **Registration Certificate Number:** -
2. **Date of Issuance of Registration Certificate:** -
3. **नाम थर (देवनागरीमा):** -

FULL NAME: -
(IN BLOCK LETTER)

4. **Permanent Address:** -

Zone: - District:

Municipality/VDC: - Ward No.: -

Tole: - Village: -

Telephone: - Fax: -

E-mail: -

5. Temporary Address: -

Zone: - District:

Municipality/VDC: - Ward No.: -

Tole: - Village: -

Telephone: - Fax: -

E-mail: -

6. Details relating to educational qualification: -

a. Professional

S. No.	Educational Qualification	University / Board	Year	Division	Remarks
1.					
2.					
3.					

7. Details relation to Professional Activities: -

S. No.	Name of Pharmacy/Hospital/Institution	Post	Year	Duration	Remarks
1.					
2.					
3.					

The details as mentioned above is true and correct in case it is proved false, I shall pay and bear as per law.

Signature of Applicant: -

Full Name: -

Date: -

Note: - The applicant shall be required to enclose herewith the up-to-date application one copy of recent passport size photograph showing both ears and two copies of attested certificate of the professional educational qualification and training as mentioned in the application form which are not submitted during name registration. Name Registration Up-to-date fee Rs. Five hundred for Pharmacist / Rs. Three hundred for Pharmacy assistant can be paid to the Nepal Pharmacy Council A/C no. 17301017500573 in NABIL Bank, Bijulibazar, Kathmandu.