

**Pharmacist's Professional Profile (PPP) Application form**  
**TO BE SUBMITTED IN PERSON IN THE OFFICE**  
**FOR OFFICE USE ONLY**

Affix your  
recent front  
pose photo

Issued PPP No- <b>O/</b>	Date- Amt-
Amt- Rs 200/- Receipt No-	Sign-

<b>Remark-</b>	Inward No- Date-
<b>Remark by Registrar-</b> Verified old PPP form (As applicable)-	Forwarded to -

**To,**  
**The Registrar-Maharashtra State Pharmacy Council, Mumbai**  
 I the undersigned would like to apply for Pharmacist's Professional Profile (PPP) because (Please tick in appropriate box given below)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have never applied for PPP in past	My old PPP NO _____ is lost	My old PPP NO _____ is spoiled and here with surrendering it to MSPC	I want to change my name and surrendering here with old PPP NO _____

I would like to furnish details as under -

**Name-** \_\_\_\_\_

**Present Communication Address-**

\_\_\_\_\_

\_\_\_\_\_

**Taluka- District- Pin code-**

\_\_\_\_\_

**Present Professional Address-**

\_\_\_\_\_

<b>Registration number-</b>	<b>Date of Registration-</b>
<b>Registration Renewed Up to-</b>	<b>Qualification-</b>
<b>Phone no(Residence)-</b>	<b>Mobile no-</b>
<b>E mail -</b>	<b>Date of birth -</b>

**Submitting here with-**

<b>1) Original registration certificate</b> (for verification ) and its photocopy	<b>2)Proof of Date of birth</b> (if not recorded in <b>registration certificate</b> )	<b>3)Two</b> front pose recent <b>photos</b> of size 3.5cmx4.5cm	4)Remitting cash of <b>Rs 200</b> /- for issue of PPP
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Please issue me Pharmacist Professional Profile.	Find below my signatures in duplicate
<b>Sign -</b>	<b>Sign-</b>