

Procedure for change of name

For female registered pharmacists (submission in person is must)

1. Original Marriage Certificate & one photocopy.(Mandatory)
2. Document showing changed name-Photo Identity Card (driving license, passport,pan card copy , etc.)
3. Change of name form duly filled in.(given below)
4. Four 3.5X 4.5 cm size, identical, front pose ,recent photographs.
5. Identity slip duly attested by gazetted officer / Principal of school or college(Identity slip is given below-in change of name form)
6. Surrender original Registration Certificate.
7. Address slip duly filled in.
8. Remit Rs . 220/- (Provided registration is renewed up to date)
9. Proof of date of birth.
- 10.Documents supporting change of name -(optional)

(A) Affidavit

(B)Gazette notification

For Male registered pharmacists (submission in person is must)

1. Affidavit on Rs 100 stamp paper duly notarized for changed name
2. Gazette notification
3. Document showing changed name- Photo Identity Card (driving license, passport,pan card copy , etc.)
4. Change of name form duly filled in.(given below)
5. Four 3.5 X 4.5 cm size, identical, front pose, recent photographs.
6. Identity slip duly attested by gazetted officer / Principal of school or college(Identity slip is given below in change of name form)
7. Surrender original Registration Certificate.
8. Address slip duly filled in.
9. Remit Rs 220/- (Provided registration is renewed up to date)
- 10.Proof of date of birth.

Application for change of name of Registered Pharmacist

| <u>FOR OFFICE USE</u> | | <u>FOR OFFICE USE</u> | |
|-----------------------|-------|-----------------------|--|
| Remark- | | Inward No- | |
| Date- | Amt- | Date- | |
| Receipt No- | Sign- | Forwarded to - | |

TO,

The Registrar-MSPC

I would like to furnish the details as- **Registration number** _____ **date** _____

Full name (**old name**) at the time of registration _____

Desired full Name (**new name**) _____

Reason for change of name _____

Present communication address (new) _____

Professional address (if applicable) _____

Telephone number (Residence) _____ Mobile _____

E mail id _____

I hereby assure that information furnished above is true and request you to change my name and issue me **Certificate with new name** .Surrendering here with my old certificate and submitting requisite documents and remitting necessary charges for same

Yours truly, _____ ← (**Signature**)

IDENTITY SLIP
(To be attested)

This is to certify that I know Shri./Smt. _____

residing at (Address) _____

for the last _____ Years and he/she bears good moral character. I Further certify that the

adjunct photo & Specimen signatures in duplicate of Shri / Smt. _____ are recent.

Recent photo
front pose
3.5cmx4.5cm
Affix here

Signature & SEAL of the Principal/

Gazetted officer

Applicant's Signatures