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

FOR OFFICE USE		FOR OFFICE USE	
Remark-		Inward No-	
Date-	Amt-	Date-	
Receipt No-	Sign-	Forwarded to -	
то,			
The Registrar-MSPC			
would like to furnish tl	ne details as- Registration number _	date	
Full name (old name) at	the time of registration		
Desired full Name (nev	v name)		
Reason for change of na	nme		
Present communication	address (new)		
Professional address (if	applicable)		
Telephone number (Res	idence)	Mobile	
E mail id			
•		d request you to change my name and issue and submitting requisite documents and rer	
Yours truly,	← (Signature)		Recent photo
	I <u>DEN</u> T	<u> FITY SLIP</u>	front pose 3.5cmx4.5cm
(To be attested) This is to certify that I know Shri./Smt			Affix here
esiding at (Address)			-
or the last	Years and he/she bears good	moral character. I Further certify that the	
adjunct photo & Specim	en signatures in duplicate of Shri /	Smtar	e recent.
Signature & SEAL of the Prin	ncipal/		
Gazetted officer			