KARNATAKA STATE PHARMACY COUNCIL
514/E, I Main, II Stage, Vijayanagar, Bangalore – 560 104
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Web_KSPC: www.kspcdic.com Web_KSPCDIRC - http://karnatakadruginfo.com/

FRESH APPLICATION – KSPC-A

DEMO - https://youtu.be/6fUcMHL3bwc

Application Form - Print the copy of the auto generated Application Form sent to your mail, sign (in BLACK ink only) and send the original educational documents (mentioned in SL.No.3) to KSPC office through Post / Courier for verification within 7 working days.

1. General Instructions

a. The applicant should be a Citizen of India and should have completed 18 years of age.
b. Registerable Qualifications - D. Pharm, B. Pharm, Pharm D approved by Pharmacy Council of India
c. Institution / College should have been approved by Pharmacy Council of India at the time of admission to 1st year D. Pharm, B. Pharm, Pharm D.

2. Fees (Refer Notifications on www.kspcdic.com)

Payment – 1 (KSPC) – Registerable Qualification	Payment – 2 (KPCRPWT)*	Payment – 3* (Additional Qualification)
Amount: Rs.3,100.00/- +18% GST **Account Name:** "Karnataka State Pharmacy Council" **Account Type:** Savings Bank **Account No.:** 52117060304 **Bank Name:** State Bank of India **Branch:** Vijayanagar II Stage **IFSC Code:** SBIN0040231	**Amount:** Rs.4,200/- (=<35 years) **Amount:** Rs.10,000/- (36 to 60 years) **Account Name:** "Karnataka Pharmacy Council Registered Pharmacist Welfare Trust " **Account Type:** Savings Bank **Account No.:** 1052500100173701 **Bank Name:** Karnataka Bank Limited **Branch:** Vijayanagar **IFSC Code:** KARB0000105	**Amount:** Rs.1,000/- +18% GST per Qualification. **Account Name:** "Karnataka State Pharmacy Council" **Account Type:** Savings Bank **Account No.:** 52117060304 **Bank Name:** State Bank of India **Branch:** Vijayanagar II Stage **IFSC Code:** SBIN0040231
Delay in Registration		**Rs.200/- per year**

3. Marks Card issued by competent authority - Scan (both sides wherever applicable in pdf format) and keep ready the following original documents before filling the Online application form

1. SSLC / 10th marks card
2. PUC - 1st & 2nd marks cards

Registrable Qualification – Qualified Pharmacist / D.Pharm / B.Pharm / Pharm.D

3. Diploma - 1st & 2nd Year marks card + Diploma Certificate
4. B.Pharm – 1st to 4th year marks card + B.Pharm Convocation Certificate
5. PharmD* – 1st to 5th year marks card + 6th year internship + PharmD Convocation Certificate

Additional Qualification

6. M.Pharm - 1st & 2nd Year + M.Pharm Convocation Certificate
7. Ph.D – Certificate
8. PharmD (PB) – 1st & 2nd year marks card + PharmD (PB) Convocation Certificate

Note: Provisional Degree Certificate (PDC) is valid for a period of one year from the date of issue of PDC.

4. Practical Training Form / Certificate from Karnataka only - (Upload in original - scan both sides wherever applicable in pdf format)

✓ **D.Pharm, B.Pharm & B.Pharm (Practice) – Students studied in Karnataka must be trained in Medical Stores / Hospitals within Karnataka only**

1. Appendix-E
2. Form 20, 21, 21C and
3. KSPC Registered Pharmacist original E-Certificate (issued from 1st Jan 2017 if registered with KSPC)
4. Training undergone in Hospital - On a hospital letterhead with seal and signature you have undergone under a Pharmacist and Director / Superintendent from the hospital and countersigned by the principal with seal, signature and date.
5. Training undergone in Industry - On a Company letterhead with seal and signature by the HR Manager/Head of the Industry and countersigned by the principal with seal, signature and date.

Note:

1. **Appendix – E** - Section-I to V (All the sections must be filled, and the dates must be in chronological order only.
2. Renewal status of the apprentice master / pharmacist must be upto date.
3. College Principal seal, signature, name of the principal with date.
4. Student signature with date.
5. Medical stores / hospital seal, signature, date and name of the registered pharmacist with KSPC Reg.No.
6. Any corrections made should be countersigned by the respective authority.
7. **MERGE ALL THE DOCUMENTS AND UPLOAD UNDER TRAINNG CERTIFICATE**

✓ **Pharm D / Pharm D (Post Baccalaureate) – Internship – Training in Hospital - For format refer Sl.No.5(e) / click** https://bit.ly/3KPSAKv

1. A certificate of satisfactory completion of training on a **hospital letterhead** with seal and signature from the Director/ Superintendent of the hospital which shall be **countersigned by** the Principal or Dean of the Pharmacy College you studied.
2. Logbook with attendance of each department with seal and signature of the HOD.
3. **MERGE ALL THE DOCUMENTS AND UPLOAD UNDER TRAINNG CERTIFICATE**

5. Other documents to upload (Scan both sides wherever applicable in pdf format)

Sl.No.	Particulars	Details
a.	Proof for Date of Birth (issued by competent authority)	SSLC or 10th marks card / Cumulative Record / Birth Certificate / Pan Card / Passport with validity / Aadhar Card (**full DOB**).
b.	Address Proof of the Candidate (**both sides wherever applicable**)	Aadhar Card (**other state candidates should get Aadhar Card updated to Karnataka address from recognized Aadhar Center**)
c.	Aadhar Card (**both sides**)	Upload Original Aadhar card of Karnataka only issued by Government of India.
d.	PCI approval letter (**all the sheets**)	PCI approval letter for the year of admission (YOA) + previous year + next year along with approved college list.
e.	Student Study Certificate Letter from College (**original**)	Click here to download the format of the certificate https://bit.ly/studycert **(College Principal seal, signature, registration no, name of the principal with date and mobile number is mandatory.)**
f.	Pharm D / Pharm D (Post Baccalaureate) – **Internship Certificate with logbook**	Click here to download the format of Pharm D Internship Certificate with logbook https://bit.ly/3KPSAKv
g.	Professional Status	Letter for a Company / Institution / Hospital / Community Pharmacy on a letter head that you are currently working with date of joining till date + ID Card
h.	Self-Declaration – Pharmacy Ethics on plain white paper	Self-Declaration Pharmacy Ethics as per Regulation 3.1 of Pharmacy Practice Regulation (PPR), 2015. Click here to download https://bit.ly/pharmacy_ethics
i.	Affidavit on Karnataka Stamp Paper only **– upload all relevant marks card and certificates**	On Rs.100/- Non-Judicial Bond Paper (not less than 15 working days from the date of Notarization) attested by Notary as per format. Click here to download the https://bit.ly/f_affidavit

j.	Affidavit for Change of Name (**complete name changed**) on Karnataka Stamp Paper only	Affidavit from 1st Class Judicial Magistrate on Rs.100/- Non-Judicial Bond Paper with seal and signature along with marriage certificate & & Paper Advertisement / Court Order / Gazette Notification **along with** Marriage Certificate & Paper Advertisement authenticating change of name.
k.	Photo	Scan and upload the recent passport size colour photo which **white background only** (jpg, jpeg). **(Note: Profile photo will be rejected.)**
l.	Signature	Sign, Scan and upload your signature in BLACK ink only on white background. (**jpg only**).

KARNATAKA PHARMACY COUNCIL REGISTERED PHARMACIST WELFARE TRUST (KPCRPWT-A)

'Karnataka Pharmacy Council Registered Pharmacist Welfare Trust (KPCRPWT)' is a social welfare scheme for the benefit of the registered pharmacists and their families. It was established in the year 1998. For more information refer https://kspcdic.com/krpwt

1. Eligibility:

- The applicant should be a Citizen of India and should been between 18 to 60 years of age to enroll under KPCRPWT.
- The applicant must be a Registered Pharmacists in Karnataka State Pharmacy Council.

2. Benefits under this scheme:

- **Medical Claim –** Refer https://kspcdic.com/krpwt
- **Death Claim -** Refer https://kspcdic.com/krpwt

3. Uploads - Scan and keep ready all the following documents (Nominee should be blood relation only)

- ✓ Proof of Date of Birth of the Nominee - Birth Certificate / SSLC or 10th / Passport / Aadhar Card / PAN Card
- ✓ Address proof of the Nominee
- ✓ Aadhar Card of the Nominee
- ✓ Nominee Photo - Recent passport size colour photo which white background only (jpg, jpeg). **(Note: Profile photo will be rejected.)**
- ✓ Nominee Signature - Sign and Scan your signature in BLACK ink only on white background. (jpg, jpeg).

ADDITIONAL DOCUMENTS IN CASE OF MINOR

- ✓ Self-attested address proof of the Guardian.
- ✓ Aadhar Card of the Guardian
- ✓ Guardian Photo - Recent passport size colour photo which white background only (jpg, jpeg). **(Note: Profile photo will be rejected.)**

Guardian Signature - Sign and Scan your signature in BLACK ink only on white background. (jpg, jpeg).

Note:

1. Applications should be submitted by post / courier only.
2. Original Certificates submitted by the pharmacist will be returned along with the Council Certificates & Id card.
3. The Certificate issued by the Karnataka State Pharmacy Council will expire on 31st December of the subsequent year of date of registration.
4. Retention of Name in the register - Renew every year before 31st of March as per Sec.34 of the Pharmacy Act, 1948.
5. The council is nowhere responsible for any wrong information provided by the Candidate and deviations from the original certificates. Please ensure proper filling of the application before submission.

Updated on 20-09-2025