

Form “H”
(See rule 100-101)

**APPLICATION FOR RE-ENTRY IN THE REGISTER OF PHARMACISTS OF HIS
NAME REMOVED UNDER SECTION 34(2)**

To

The Registrar,

.....

.....

Sir,

I, the undersigned (a)holding the qualifications of (b) do solemnly declare the following:-

In the year (c) my name was duly registered in the Register in respect of the following qualification viz, (d) and on the date of erasure of my name I was registered in respect of the following additional qualifications viz (e).....

The Registrar removed my name from the Register on (f)..... for default in payment of renewal fee.

Since the removal of my name from the Register, I have been resident at (g).....and my occupation has been (h).....

It is my intention if my name is restored in the Register to (i).....

(j) Registered in any of the Council in India.

(k) Further I hereby declared that I have never been convicted in any Civil or Criminal Case during my removal period.

Declared aton.....

Your's faithfully,

Signature,

(Witness (i)

Signature

Address.....

Registration No.....

Self Attested
