

# **APPLICATION FORM FOR THE GOODSTANDING LETTER**

To  
The Registrar,  
Maharashtra State Pharmacy Council  
R-Square, 4th Floor, Opp.E.S.I.S. Hospital,  
Lal Bahadur Shastri Marg,  
Mulund (W), Mumbai – 400 080

For office use only

Collection Date : \_\_\_\_\_

Collection time : \_\_\_\_\_

**Sub :- Issue of Letter of Goodstanding.**

Sir,

I request you to kindly issue a Letter of Goodstanding which is to be submitted to the foreign Board/University Council to enable me to appear for the examination. I give below my registration particulars and other details :-

1	Name and address <b>(in India)</b> of the Applicant	
2	Te..No./Mobile No.	
3	Email ID	
4	Registration No. & Date	
5	Qualification	
6	Name of the College/University	
7	Name and address in full of the <b>FOREIGN Board</b> /Authority/Council to whom the letter is to be addressed	
8	EE No., if any (Identification No. given by the foreign Board/Authority/Council)	
9	Applicant's <b>address in foreign</b> country	

I hereby surrender my original registration certificate (alongwith two photocopies) and also original Pharmacist's Professional Profile(if issued) and copy of college leaving certificate. I am also remitting Rs.1500/-for issue of Letter of Goodstanding.

Thanking you,

Yours faithfully,

(\_\_\_\_\_)