APPLICATION FORM FOR THE GOODSTANDING LETTER

To The Registrar, Maharashtra State Pharmacy Council E.S.I.S. Hospital Compound L.B.S. Marg, Mulund (West) Mumbai - 400 080

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 :-

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1	Name and address (in India) of the Applicant	
2	TeNo./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 FOR EIGN Board/Authority/Council	
	to whom the letter is to be addressed	
8	Email ID of the concerned FOREIGN	
	Board/Authority/Council	
9	EE No., if any (Identification No. given by the foreign	
10	Board/Authority/Council)	
10	Applicant's address in foreign country	

I am submitting herewith FRONT AND BACK SIDE xerox copies of Registration Certificate for attestation alongwith Letter of Goodstanding.

Thanking you,

Yours faithfully,

For office use only	
Collection Date	:
Collection time	:
Collection time	:

(_____)