



**DOCUMENT CHECKLIST FOR REGISTRATION AS A PHARMACIST**

The checklist is one of the documents you will need to submit with your application.

Make sure that you print this document and attach it when completed to your application as **the cover page**.

Gather documents as listed. Check each  item on the checklist and attach the checklist to your documents (a paper clip will do).

Place all documents in a sealed envelope. Do not send originals unless otherwise stated.

**FORMS (TO BE COMPLETED AND SUBMITTED BY ALL APPLICANTS).**

	<b>APPLICATION FOR REGISTRATION AS A PHARMACIST</b>	<b>FORMAT</b>	
1	Application form.	<b>Original</b>	<input type="checkbox"/>
2	Certificate.	<b>Certified copy</b>	<input type="checkbox"/>
3	Transcript ( <b>Arrangements made for the transcript to be sent <u>directly</u> from the college or university to the Pharmacy Council</b> ).	<b>Original</b>	<input type="checkbox"/>
4	Proof of character.	<b>Original</b>	<input type="checkbox"/>
5	Police record.	<b>Original</b>	<input type="checkbox"/>
6	Letter of good standing ( <b>Arrangements made for No. 5 in the guidelines for registration as a pharmacist, to be sent from the Council or Board in the applicant's country <u>directly</u> to the Pharmacy Council</b> ).	<b>Original</b>	<input type="checkbox"/>
7	Medical certificate.	<b>Original</b>	<input type="checkbox"/>
8	Passport photo ( <b>See guidelines for registration as a pharmacist for specifications</b> ).	<b>Original</b>  <b>Paper</b>  <b>Digital</b>	<input type="checkbox"/>  <input type="checkbox"/>
9	A photocopy of valid photo identification.	<b>Copy</b>	<input type="checkbox"/>
10	Fees ( <b>See guidelines for registration as a pharmacist</b> ).	<b>Original</b>	<input type="checkbox"/>
11	Letter to prove your work experience from your previous or current employer.	<b>Original</b>	<input type="checkbox"/>
12	Deed Poll <b>and or</b> Marriage Certificate ( <b>To be submitted by applicants whose name on the application form is different to that on the certificate from the college or university</b> ).	<b>Certified copy</b>	<input type="checkbox"/>
13	TOEFL iBT ( <b>Arrangements made for the test results to be sent <u>directly</u> from ETS to the Pharmacy Council</b> ).	<b>Original</b>	<input type="checkbox"/>