

UTTAR PRADESH PHARMACY COUNCIL

Flat No. 204, Arif Ashiyana Complex
Chowk, Lucknow U.P. (INDIA)



Registration No. _____

Date of Registration: _____

This is to certify that _____

is a _____



Name: _____

Address: _____

Registration No. _____

has been duly registered u/s 32 (2) of the Pharmacy Act as a
Registered Pharmacist

and is entitled to all the privileges granted under the
Pharmacy Act 1948 (24 of 1948). In witness whereof are
herewith affixed the seal of the Uttar Pradesh Pharmacy
Council and the signature of the Registrar of the said
Pharmacy Council.

D.O. _____

Qualification _____

Registrar
U.P. Pharmacy Council
Lucknow

NOTICE

1. Every Registered Pharmacist should send to the Registrar, Lucknow, copies of any certificate or document which may be issued by a competent authority for use in the Pharmacy in regard to the practice of the profession of pharmacy.
2. Applications for registration should be submitted to the Registrar, Lucknow.
3. Every Registered Pharmacist should send to the Registrar, Lucknow, a copy of his name and address to the Registrar, Lucknow, for the purpose of maintaining the records of the Council.

Form No. 10
 0027602

REGULATIONS 2011

माध्यमिक शिक्षा परिषद् उत्तर प्रदेश

Board of High School and Intermediate Education, U.P.



हईसकुल परीक्षा-२०११

High School Examination-2011

विद्यार्थी-के अंक (CERTIFICATE-CUM-MARKS SHEET)

विद्यार्थी अंक	विद्यार्थी का नाम Roll Number/Name	विद्यार्थी का पता Home Address	विद्यार्थी का जन्म तिथि Date of Birth	विद्यार्थी का लिंग Sex
011550	2810080003	REGULAR	FULL GRAM	MALE

विद्यार्थी का नाम: RAJESH KUMAR
 विद्यार्थी का पता: GURDEEP
 विद्यार्थी का जन्म तिथि: 10/08/1990
 विद्यार्थी का लिंग: MALE

10TH AUGUST NINETEEN HUNDRED NINETY SIX (10-08-1996)

U. Q. HINDU INTER COLLEGE MORADABAD

विषय Subject	अंक Max. Marks	अंक Obtained	ग्रेड Grade	स्थिति Status
HINDI	100	004	C1	
ENGLISH	100	043	C2	
MATHEMATICS	100	003	D	FAILED
SCIENCE	100	708	C1	WITH GRADE
SOCIAL SCIENCE	100	363	B2	
DRAWING	100	055	C1	

दिनांक: 10/08/2011
 10th August 2011

Handwritten signature and stamp of the official.

Official stamp and signature of the official.

श्री गुरुभ्यो नमः

भारत सरकार

INCOME TAX DEPARTMENT

GOVT. OF INDIA



सूची / Details

GURDEEP SINGH

सूची / Details
Payment/Account Number card

JURPS0758F



सूची / Details / Father's Name
PATRAM SINGH

सूची / Details / Name of signatory
Gurdeep Singh

10/06/1990

सूची / Details / Signature

