



The Council Of The Pharmaceutical Society Of Uganda

Our Ref: 0253/PSU/2019

Your Ref:

Date: 25th September 2019

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NOTICE OF SECOND 2019 QUALIFYING EXAMINATIONS FOR MEMBERSHIP

Notice is hereby given that the SECOND 2019 Qualifying Examinations for membership to The Pharmaceutical Society of Uganda will take place on Friday, October 25th, 2019 at Makerere University department of Pharmacy, Kampala.

The deadline for receiving applications is Thursday October 17th, 2019 at 4:30pm.

All eligible candidates are therefore required to apply on line at www.psucop.com, print the application and bring hard copy with all requirements [attached] to The Secretariat of The Pharmaceutical Society of Uganda located at Plot 1847 Banda/Kyambogo, Kampala before the closing date.

Note: Only candidates who meet the requirements will be invited to sit for this Qualifying Examinations for membership to the Society.

Yours Faithfully

Dr. Opio Samuel Acuti
Secretary, The Pharmaceutical Society of Uganda



Requirements for applying for the qualifying examinations for membership (Pre-registration Exam)

- ❖ Written/Typed application letter addressed to the Secretary Pharmaceutical Society of Uganda
- ❖ Pre-registration application form (See attachment).
- ❖ Pre-registration online application done through the PSU website www.psucop.com then a printout handed in at PSU.
- ❖ Updated Curriculum vitae (C.V)
- ❖ Letter of completion of internship from the respective internship centres and placements in the various rotational sites
- ❖ A copy of provisional certificate of practice
- ❖ Certified academic transcript (*applies to applicants who never submitted theirs during pre-internship application*)
- ❖ Certified degree certificate (*applies to applicants who never submitted theirs during pre-internship application*)
- ❖ Proof of payment of examination fees (For Ugandans 350,000/=, Three hundred fifty thousand shillings only) and non-Ugandan 200 Dollars
- ❖ Membership File 10,000/= (for applicants who never paid at a time of application for pre-internship exams). Banked with examination fees
- ❖ One coloured passport photo.

Applicants re-siting the exam should submit:-

- ❖ Written/Typed application letter addressed to the Secretary Pharmaceutical Society of Uganda
- ❖ Pre-registration online application done through the PSU website www.psucop.com then a printout handed in.
- ❖ Copy of previous Pre-registration results
- ❖ Proof of payment of examination fees (For Ugandans 350,000/=, Three hundred fifty thousand shillings only) and non-Ugandan 200 Dollars



COUNCIL OF THE PHARMACEUTICAL SOCIETY OF UGANDA PRE-REGISTRATION EXAM APPLICATION FORM

(FILL IN BLOCK LETTERS, ONLINE APPLICATIONS SHOULD
ALSO BE FILLED IN ADDITION TO THE HARDCOPY)

**Current
passport photo**

1. Name _____
2. Date of birth (Attach copy of Birth certificate) _____
3. Sex _____
4. Nationality _____
If Non-Ugandan, attach copy of passport
5. Internship Centre _____
6. Date of commencement of internship _____ Completion date _____
7. Primary education (Attach copy of PLE certificate or its equivalent)

Name of Schools studied	Year(s) of study
_____	_____
_____	_____
_____	_____
8. Secondary education (O level) (Attach copy of O level certificate or its equivalent)

Name of Schools studied	Year(s) of study
_____	_____
_____	_____
_____	_____
9. Secondary education (A level) (Attach copy of A level certificate or its equivalent)

Name of Schools studied	Year(s) of study
_____	_____
_____	_____
_____	_____
10. University education (Attach certified Academic transcript and certified Degree Certificate)
 - Country of study _____
 - Course of study _____
 - Period of study _____
 - Date of graduation _____
11. Additional attachments
 - Evidence of completion of internship.
 - Updated curriculum vitae (Note more than 3 pages).
 - Evidence for payment of Pre-registration fees as applicable.



COUNCIL OF THE PHARMACEUTICAL SOCIETY OF UGANDA PRE-REGISTRATION EXAM APPLICATION FORM

(FILL IN BLOCK LETTERS, ONLINE APPLICATIONS SHOULD
ALSO BE FILLED IN ADDITION TO THE HARDCOPY)

- Self-hand written/typed application letter addressed to the secretary, PSU.
- Copy of Pre-internship examination results.

This is to certify that the information provided is true and correct.

Signature and date_____

For official use

All attachments provided. Yes ☐ No ☐

Information verified and found to be accurate Yes ☐ No ☐

Approval given Yes ☐ No ☐

If no reason_____

Signed: _____

Secretary, Council of the Pharmaceutical Society of Uganda