



# The Council Of The Pharmaceutical Society Of Uganda

Our Ref:

**0143/PSU/2020**

Your Ref:

Date:

**5<sup>th</sup> October 2020**

Plot no: 1847 Banda - Kyambogo  
P.O. Box 3774, Kampala - Uganda  
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Fax: +256 414 340 385  
Email: psupc@psu.or.ug  
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## **NOTICE OF 2<sup>ND</sup> 2020 QUALIFYING EXAMINATIONS FOR MEMBERSHIP**

Notice is hereby given that the 2<sup>nd</sup> 2020 Qualifying Examinations for membership to The Pharmaceutical Society of Uganda will take place on Thursday, October 29<sup>th</sup>, 2020 at Makerere University Pharmacy School, Kampala.

All eligible candidates are therefore required to apply online at: [www.psupc.com](http://www.psupc.com), pre-registration application, print the submitted application and bring hard copy with all requirements [ see attached] to The Secretariat of The Pharmaceutical Society of Uganda located at Plot 1847 Banda/Kyambogo, Kampala before the closing date.

The deadline for receiving applications is Monday October 19<sup>th</sup>, 2020 at 4.30pm.

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

Yours Faithfully,

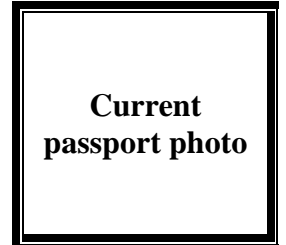
**Dr. Opio Samuel Acuti**  
**Secretary, The Pharmaceutical Society of Uganda**





**COUNCIL OF THE PHARMACEUTICAL SOCIETY OF UGANDA  
PRE-REGISTRATION EXAM APPLICATION FORM  
(QUALIFYING EXAMINATIONS FOR MEMBERSHIP)**

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



1. Name \_\_\_\_\_
2. Date of birth \_\_\_\_\_
3. Sex \_\_\_\_\_
4. Nationality \_\_\_\_\_  
  
If Non-Ugandan, attach copy of passport
5. Internship Centre \_\_\_\_\_
6. Date of commencement of internship \_\_\_\_\_ Completion date \_\_\_\_\_
7. University education (Attach certified Academic transcript and certified Degree Certificate)
  - Country of study \_\_\_\_\_
  - Course of study \_\_\_\_\_
  - Period of study \_\_\_\_\_
  - Date of graduation \_\_\_\_\_

8. Additional attachments

**A) First time sitting**

- Self-hand written/typed application letter addressed to the secretary, PSU.
- Online Application [www.psucop.com](http://www.psucop.com) (Must)
- Evidence of completion of internship.
- Evidence for payment of Pre-registration fees (For Ugandans 350,000/=, Three hundred fifty thousand shillings only) and non-Ugandan 200 Dollars
- Copy of Pre-internship examination results
- Copy of Provisional certificate of practice



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**B) Re-siting**

- Self-hand written/typed application letter addressed to the secretary, PSU.
- Online Application [www.psucop.com](http://www.psucop.com) (Must)
- Evidence for payment of Pre-registration fees as applicable.
- Copy of Previous Pre-registration Examination results

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

Date \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ WhatsApp \_\_\_\_\_

Email \_\_\_\_\_

**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**