

The Council Of The Pharmaceutical

Society Of Uganda

Our Ref:

0172/PSU/2020

Your Ref:

Date:

24th November 2020

Plot no: 1847 Banda - Kyambogo P.O. Box 3774,Kampala - Uganda Tel no: +256 414 348 796, 0392 174 280

Fax: +256 414 340 385 Email: psupc@psu.or.ug Website:www..psu.or.ug

Notice of the 3rd Pre-Internship/Eligibility Exam 2020

Notice is hereby given that the Council of The Pharmaceutical Society of Uganda 3rd pre-internship/eligibility examination 2020 will be conducted on Thursday,10th of December 2020 from 9am to 12 noon at Department of Pharmacy, Makerere University, Kampala. Only written exam shall be administered.

All eligible candidates are hereby required to apply by Friday 4th of December 2020. Please fill online application on www.psucop.com with necessary attachments. Print and bring a hardcopy of the application to PSU Secretariat at Plot 1847 Banda/Kyambogo, Kampala with proof of payment of examination fee of Shs. 250,000 (Ugandans) and US\$ 200 (Non-Ugandans).

Only candidates who meet the requirements will be invited to sit for this examination.

Please note that this examination will be conducted in accordance with MOH SOPs to prevent the spread of COVID-19. Therefore, there will be no oral exams.

SELLAN.

Secretary,
Council of The Pharmaceutical Society of Uganda.

REOUIREMENTS TO SIT PRE-INTERNSHIP EXAMS

For new applicants

- Written/Typed application letter addressed to the Secretary Pharmaceutical Society of Uganda
- 2. Pre-internship/Eligibility application form (see attached)
- 3. Pre-internship/Eligibility online application done through the PSU website www.psucop.com
- 4. Curriculum vitae (C.V)
- 5. Admission letter
- 6. Certified academic transcript or its equivalent
- 7. Certified degree certificate
- 8. Copy of A 'level Certificate or its equivalent
- 9. Copy of O 'level Certificate or its equivalent
- 10. Copy of Birth Certificate
- 11. Copy of National ID
- 12.PSU branded Plastic Spring file 10,000/= (Ten thousand shillings only). Should be banked with Examination fees.
- 13. One colored passport photo.

Applicants re-siting the exam should submit: -

- Written/Typed application letter addressed to the Secretary Pharmaceutical Society of Uganda
- 2. Pre-internship/Eligibility online application done through the PSU website www.psucop.com
- 3. Copy of previous pre-internship results.
- 4. Copy of National ID
- 5. Proof of payment of Examination fees. For Ugandans 250,000/= (Two hundred fifty thousand Shillings only) and non-Ugandan 200 Dollars.

PSU Management



PHARMACEUTICAL SOCIETY OF UGANDA ELIGIBILITY EXAM/INTERNSHIP APPLICATION FORM

Attach Passport Photo Here

This form is to be filled and submitted to PSU with necessary accompanying documents including A Self handwritten application letter addressed to the Secretary of PSU.

1.	Name	N N									
2.	Sex	Male Female									
3.			ttach details of immigration								
	status										
		ttach copy of birth certi									
		Date and place of birth									
	Home District										
7.	Educational Background										
	(i)	Primary Education (Attach copies of qualification documents)									
		School	Period	Qualification							
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	(ii)	ments)									
		School	Period	Qualification							
			<u> </u>	/							
	(iii)	Advanced level educati			locuments)						
		School	Period	Qualification							
				·							
	(iv)	University and Tertiary									
		Institution	Period	Course	Qualification						
					- 43						



PHARMACEUTICAL SOCIETY OF UGANDA ELIGIBILITY EXAM/INTERNSHIP APPLICATION FORM

NB: Attach copies of admission letters/degree transcripts/letter of completion of course and CV. Incase of non-attachment of any documents a letter detailing the reasons should be provided. Persons with qualifications obtained outside Uganda must attach a statutory declaration and must have copies of their academic documents notarized in their country of study and certified by their university. A copy of the notarized syllabus should also be availed.

0.	Online internsing application Fr	int out atta	ached					
	Yes No , if no explain							
9.	Has the applicant's application b							
	Yes No No 1. 10. Application fees paid(Applicable to persons studying from Universities outside Uganda-attach receipt)							
10								
	Yes No D							
	Declaration							
	I,	do he	reby solemn	y and sincerely	declare, that th	ne information		
	contain herein and attached are tr	ue to the be	est of my kno	wledge and belie	ef.			
	Signature & date:							
			 ;			7		
For o	fficial use only							

i.	Information verified to be true	Yes 🗌	No 🗆					
ii.	All documentation attached	Yes 🗌	No 🗆					
iii.	Approved	Yes 🗌	No 🗌					
	If no, reason given							
	ii iio, reason given							
	Claus de							
	Signed:							
	Secretary, Council of the	Pharmace	utical Society	of Uganda				