



# The Council Of The Pharmaceutical Society Of Uganda



Our Ref: 075/PSU/2024

Your Ref:

Date: 8<sup>th</sup> April 2024

## Notice of the 2<sup>nd</sup> Pre-Internship/Eligibility Exam 2024

Notice is hereby given of the 2<sup>nd</sup> pre-internship/eligibility examination 2024 to be conducted by the Council of the Pharmaceutical Society of Uganda on Thursday the 27<sup>th</sup> of June 2024 from 9 am to 12 noon. The venue for the said examination will be communicated in the invitation letters.

All eligible candidates are hereby required to apply by 17:00hrs, Thursday 20<sup>th</sup> June 2024. Applications should be done both online and in hardcopy with necessary attachments (See attached). Online application should be done via [www.psucop.com](http://www.psucop.com) and the hardcopy of the application should be physically submitted to PSU Secretariat at Pharmacy House, Plot 1847 on East African Road, Banda-Kyambogo, Kampala.

Proof of payment of Examination fees 260,000/= for Uganda (Two hundred sixty thousand Shillings only), and non-Ugandans 200 Dollars. Banked on 9030005895331 Stanbic Bank. Use Stanbic bank branches and Stanbic bank agents only. **Please note;** Avoid Mobile Money payments at this stage

Only candidates who meet all the requirements (See Continuation sheet) will be invited to sit for this examination.

Thank you.

Per medicatum servium.

(With medicines We serve)



Dr. Lutoti Stephen

Secretary, Pharmaceutical Society of Uganda

**REQUIREMENTS TO SIT PRE-INTERNSHIP EXAMS**

**For new applicants**

- Written application letter addressed to the Secretary Pharmaceutical Society of Uganda
- Pre-internship/Eligibility application form (see attached)
- Pre-internship/Eligibility online application done through the PSU website [www.psupc.com](http://www.psupc.com)
- Curriculum vitae (C.V)
- University Admission letter
- Certified academic transcript or its equivalent
- Certified degree certificate its equivalent

For those trained in Uganda, evidence of completion of program by a communication from pharmacy school dean or head of pharmacy to Secretary PSU is sufficient for grant conditional approval to sit the exams. Provided you have no retake, but only awaiting graduation.

- An equivalent of your degree from the National Council for Higher Education (Applies to persons who attained their Degrees from Universities abroad)
- Work/resident permit (for non-Ugandans)
- Copy of A 'level Certificate or its equivalent
- Copy of O 'level Certificate or its equivalent
- Copy of Birth Certificate
- Copy of National ID
- One colored passport photo.

**Applicants re-siting the exam should submit:**

- Written application letter addressed to the Secretary Pharmaceutical Society of Uganda
- Pre-internship/Eligibility online application done through the PSU website [www.psupc.com](http://www.psupc.com)
- Copy of previous pre-internship results.

**Per medicatum servium.  
(With medicines We serve)**



**Dr. Lutoti Stephen  
Secretary, Pharmaceutical Society of Uganda**





## 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 \_\_\_\_\_
2. Sex Male  Female
3. Nationality Ugandan  Non-Ugandan  Specify \_\_\_\_\_ (attach details of immigration status)
4. Age (attach copy of birth certificate) \_\_\_\_\_
5. Date and place of birth \_\_\_\_\_
6. Home District \_\_\_\_\_
7. Educational Background

(i) Primary Education (Attach copies of qualification documents)

School	Period	Qualification
_____	_____	_____
_____	_____	_____
_____	_____	_____

(ii) Secondary education ( O-level, attach copies of qualification documents)

School	Period	Qualification
_____	_____	_____
_____	_____	_____
_____	_____	_____

(iii) Advanced level education (A-level, attach copies of qualification documents)

School	Period	Qualification
_____	_____	_____
_____	_____	_____

(iv) University and Tertiary Education

Institution	Period	Course	Qualification
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



**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.*

8. Online internship application Print out attached

Yes  No  , if no explain \_\_\_\_\_

9. Has the applicant's application been rejected before?

Yes  No

10. Application fees paid(Applicable to persons studying from Universities outside Uganda-attach receipt)

Yes  No

**Declaration**

I, \_\_\_\_\_ do hereby solemnly and sincerely declare, that the information  
contain herein and attached are true to the best of my knowledge and belief.

Signature & date: \_\_\_\_\_

**For official use only**

- i. Information verified to be true Yes  No   
ii. All documentation attached Yes  No   
iii. Approved Yes  No

If no, reason given \_\_\_\_\_

Signed: \_\_\_\_\_

**Secretary, Council of the Pharmaceutical Society of Uganda**