

CHARACTER CERTIFICATE

This is to certify that I know Shri./Smt./Ku.
..... S/o./D/o. Shri./Smt
..... residing at (House)
..... (Place)(post)
.....(district) PIN: is personally known
to me for years, and Shri./Smt./Ku.
..... bears
a good moral character and to the best of my knowledge he/she has not involved in
any criminal or unlawful activities.

He/She is not my relative

This Certificate is issued to produce before the Kerala State Pharmacy Council.

(Signature)

(Office Seal)

Place:

Date:

*Name & Designation of
attesting officer*