

प्रिय उम्मीदवार,

आपसे अनुरोध है कि नीचे दिए गए निर्देशों का पालन करके अपना आवेदन जमा करें:

Dear Candidate,

You are requested to complete the submission of your application by following the instructions below:

चरण 1: व्यक्तिगत विवरण भरना ।

Step 1: Filling up of personal details



HLL Lifecare Limited  
(A Government of India Enterprise)

HOMEABOUTNOTICES

RECRUITMENT FOR THE POSTS OF PHARMACIST (GRADE IV – I ) & ASSISTANT PHARMACIST



APPLICATION ID : 100668

APPLICATION FORM  
RECRUITMENT FOR THE POSTS OF PHARMACIST (GRADE IV – I ) & ASSISTANT PHARMACIST

ALL \* FIELDS ARE MANDATORY

HLL LIFECARE

NOTE: THE DETAILS BELOW SHOULD BE ENTERED AS IT APPEARS IN THE MATRICULATE CERTIFICATE (CLASS 10TH CERTIFICATE) OR EQUIVALENT CERTIFICATE AWARDED TO YOU. THERE SHOULD NOT BE ANY VARIATION IN FORM OR SPELLING.

\*NAME (IN BLOCK LETTERS)

VIPINRAJ R

\*DATE OF BIRTH


31-05-1986 ( 39 -YEARS 2 -MONTHS 1 -DAYS )  
(AGE: AUTO CALCULATED VALUE AS ON 01ST AUG 2025)

\*NAME & OCCUPATION OF FATHER/HUSBAND

Mr. FATHER / GUARDIAN NAME

चरण :2 शैक्षिक योग्यता और अनुभव भरना ।

## Step :2 Filling up of Educational qualification and Experience



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APPLICATION ID : 100668 POSTNAME: PHARMACIST GRADE I

EDUCATION FORM  
RECRUITMENT FOR THE POSTS OF PHARMACIST (GRADE IV - I) & ASSISTANT PHARMACIST

EXAMINATION	BOARD/UNIVERSITY/ INSTITUTE	YEAR OF PASSING	STREAM / SUBJECT	PERCENTAGE
10TH / MATRIC / EQUIVALENT		--SELECT--	--SELECT--	
10 + 2 / EQUIVALENT		--SELECT--	--SELECT--	
12TH / INTERMEDIATE/ EQUIVALENT		--SELECT--	--SELECT--	
D.PHARM		--SELECT--	--SELECT--	
DIPLOMA / ITI / CERTIFICATE		--SELECT--	--SELECT--	
B.PHARM		--SELECT--	--SELECT--	
GRADUATION		--SELECT--	--SELECT--	

ADD MORE QUALIFICATION DETAILS...

ADD ANY OTHER QUALIFICATION 1


☐ D.PHARM/B.PHARM WITH MINIMUM 8 YEARS POST QUALIFICATION EXPERIENCE IN RETAIL PHARMACY

Sr. No.	NAME OF EMPLOYER	DESIGNATION	ADDRESS OF EMPLOYER	START DATE	END DATE	NATURE OF DUTIES	REASON FOR LEAVE
1				DD-MM-YYYY	DD-MM-YYYY		

Add New

चरण 3: सभी अनिवार्य दस्तावेजों को अपलोड करना ।


Step 3 : Uploading of all the mandatory documents.



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LOGIN ID : 100668

UPLOAD DOCUMENTS  
RECRUITMENT FOR THE POSTS OF PHARMACIST (GRADE IV - I ) & ASSISTANT PHARMACIST

ALL \* FIELDS ARE MANDATORY


\*RECENT PASSPORT SIZE COLORED PHOTOGRAPH

Choose file | 6399a4d277...lash-1.jpeg  
(.JPG UPTO 100KB)



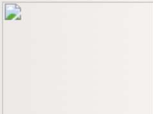
\* CANDIDATE SIGNATURE

Choose file | No file chosen  
(.JPG UPTO 100KB)



\*10TH OR EQUIVALENT CERTIFICATE

Choose file | No file chosen  
(.JPG OR .PDF UPTO 200KB)



चरण : 4 आवेदन जमा करें।

## Step : 4 Submit the application

REFERENCE-1	TTTTTT	DDDDDD	5	9876098888	SSSSSS@GMAIL.COM
REFERENCE-2	AAAASS	DDDDDD	5	9876098888	SSSSSS@GMAIL.COM

**UPLOADED DOCUMENTS:**

SCANNED COPY OF CANDIDATE 10TH/SSC MARKS SHEET/CERTIFICATE	UPLOADED
SCANNED COPY OF CANDIDATE 12TH/HSC MARKS SHEET/CERTIFICATE	UPLOADED
SCANNED COPY OF CANDIDATE DIPLOMA CERTIFICATE	UPLOADED
SCANNED COPY OF CANDIDATE GRADUATION CERTIFICATE	
SCANNED COPY OF CANDIDATE EXPERIENCE CERTIFICATES	UPLOADED
SCANNED COPY OF THE CANDIDATE'S PROOF OF DATE OF BIRTH AND A COPY OF AADHAR CARD OR ELECTION ID.	UPLOADED
SCANNED COPY OF CANDIDATE CASTE CERTIFICATE	
SCANNED COPY OF CANDIDATE UPDATED BIODATA / CV	UPLOADED
SCANNED COPY OF CANDIDATE CREAMY LAYER/ COMMUNITY / PHYSICAL DISABILITY CERTIFICATE (LATEST WITHIN 6 MONTHS)	UPLOADED
SCANNED COPY OF CANDIDATE OTHER RELEVANT CERTIFICATES (DIPLOMA'S, TRAININGS, ACHIEVEMENTS ETC.)	
SCANNED COPY OF CANDIDATE STATE PHARMACY COUNCIL REGISTRATION CERTIFICATE	

**DECLARATION:**

I HEREBY DECLARE THAT THE INFORMATION FURNISHED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND I FULLY UNDERSTAND THAT IF ANY INFORMATION GIVEN ABOVE IS FOUND FALSE, MY SERVICES ARE LIABLE TO BE TERMINATED AT ANY TIME WITHOUT ANY NOTICE BY THE MANAGEMENT.

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