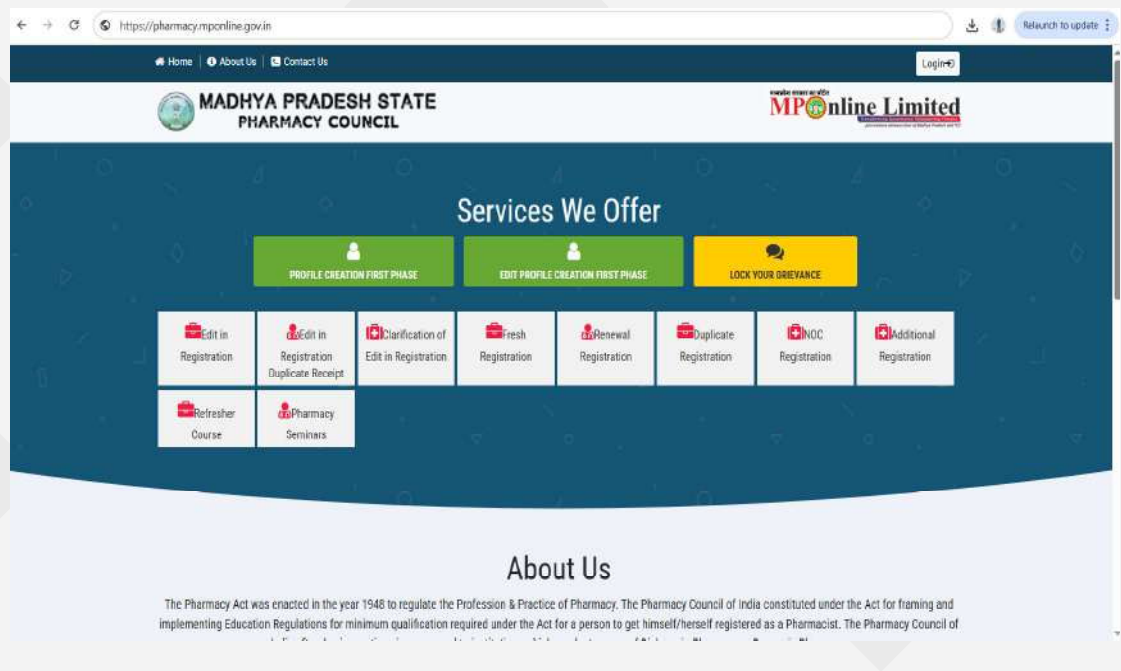


# User Manual of MP Pharmacy Council Services


Applicant visit URL: <https://pharmacy.mponline.gov.in>



## Samagra Profile Creation window

- Enter Your Samagra ID and OTP will be sent to mobile number linked with your samagra id.

Home Page Login

**MADHYA PRADESH STATE  
PHARMACY COUNCIL**


मध्य प्रदेश सरकार का पोर्टल  
**MPOnline Limited**  
Transforming Commerce, Empowering Citizens  
Joint venture between Govt of Madhya Pradesh and ICI

### Pharmacy Council Profile Creation

\* OTP will be sent to mobile number linked with your samagra id.  
\* In case mobile number is not linked to samagra id, please do e-KYC first.

**Note : \* Marked Fields are Mandatory**

Profile Creation by Samagra Verification

Enter Your Samagra ID (Member ID) : *	<input type="text" value="Enter samagra ID"/>
Captcha * 	<input type="text" value="Enter Captcha"/>

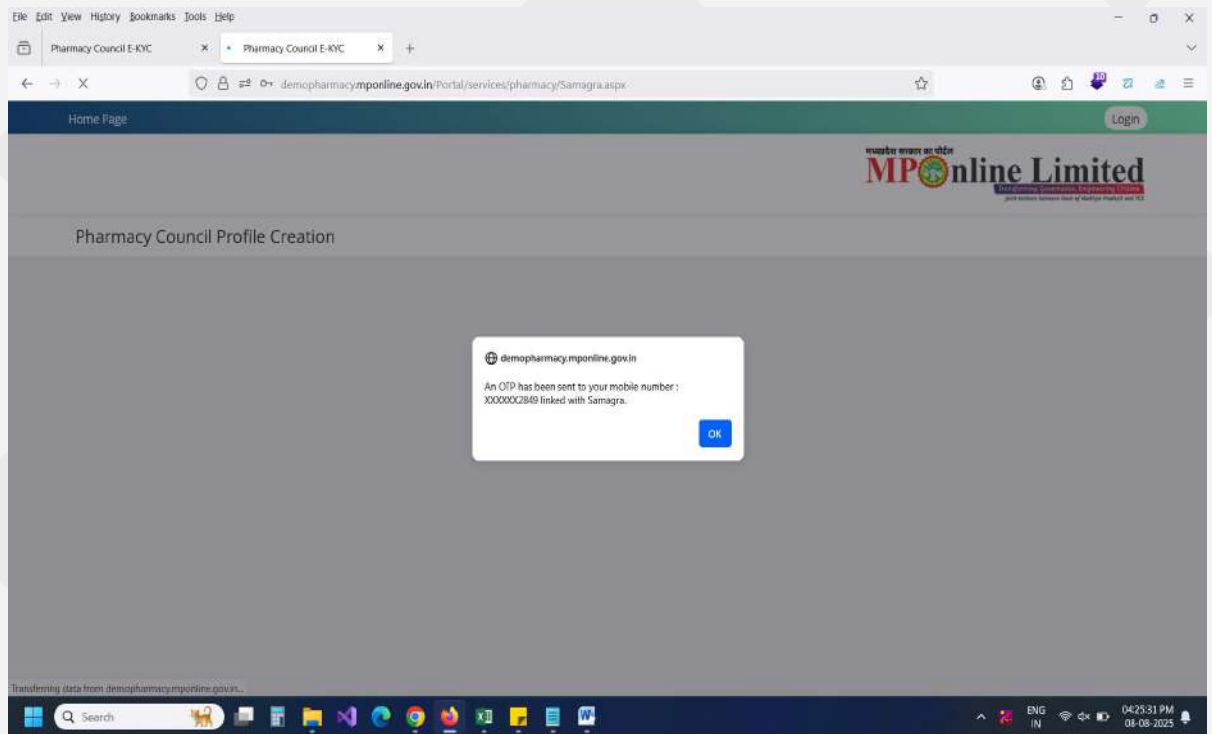
Declaration : \*

I, the holder of above Samagra ID, hereby give my consent to Pharmacy Council to obtain my Samagra details and OTP for authentication. Pharmacy Council has informed me that my identity information would only be used for verification.  
मैं उपरोक्त संख्या का कार्ड धारक, फार्मसी काउंसिल को अपनी सहमति देता/देती हूँ ताकि प्रमाणीकरण के लिए मेरा नंबर, नाम और OTP प्राप्त कर सके। फार्मसी काउंसिल ने मुझे सूचित किया है कि मेरी पहचान की जानकारी केवल प्रमाणीकरण के लिए उपयोग की जाएगी।

[GET OTP](#)


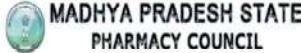
## Samagra OTP

- Samagra OTP sent on applicant's samagra linked mobile number.



## Samagra OTP verify

- Enter Samagra OTP and Click to Verify OTP Button.



Pharmacy Council Profile Creation

\* OTP will be sent to mobile number linked with your samagra id.  
\* In case mobile number is not linked to samagra id, please do e-KYC first.

**Note : \* Marked Fields are Mandatory**

Profile Creation by Samagra Verification

Enter Your Samagra ID (Member ID) : *	XXXXX7121	<a href="#">Edit</a>
OTP : *	<input type="password"/>	

Declaration : \*

I, the holder of above Samagra ID, hereby give my consent to Pharmacy Council to obtain my Samagra details and OTP for authentication. Pharmacy Council has informed me that my identity information would only be used for verification.  
मैं उपरोक्त संस्था का कार्ड धारक, फार्मसी काउंसिल को अपनी सहमति देता/देती हूँ ताकि प्रमाणीकरण के लिए मेरा नंबर, नाम और OTP प्राप्त कर सके। फार्मसी काउंसिल ने मुझे सूचित किया है कि मेरी पहचान की जानकारी केवल प्रमाणीकरण के लिए उपयोग की जाएगी।

[RESEND OTP](#) [VERIFY OTP](#)

## Verify Email

- Applicant's basic details fetched from samagra portal and get OTP to verify email

Home Page Login

**MADHYA PRADESH STATE PHARMACY COUNCIL** **MPOnline Limited**

Pharmacy Council Profile Creation

Applicant Name *	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father Name *	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Marital Status *	UNMARRIED	<input type="text"/>	<input type="text"/>
Date of Birth (DD/MM/YYYY) *	<input type="text"/>	Gender *	MALE
Address as per Aadhaar * <small>(This address will be printed on your certificate.)</small>	<input type="text"/>	Domicile Certificate No.	<input type="text"/>
Domicile Certificate Link:	<a href="#">Visit and Verify</a>	Domicile Certificate Issue Date	<input type="text"/>

Email Id * <small>(This Email will be used for sending OTP and other future important communications by MPFC. Hence fill carefully.)</small>	<input type="text" value="Testtttt@gmail.com"/>	Mobile Number *	<input type="text"/>
From where you have taken your Degree/Diploma *	<input checked="" type="radio"/> Madhya Pradesh <input type="radio"/> Other State		
Are You Already Registered in MP State Pharmacy Council *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Have you passed/completed your Degree/Diploma *	<input checked="" type="radio"/> Yes <input type="radio"/> No		

Declaration : \*

I hereby declare that the information provided by me is true, correct, and complete to the best of my knowledge and belief. I understand that any false information or misrepresentation may result in the rejection of my application or attract legal consequences. Furthermore, I confirm that I have personally visited and verified the link to my domicile certificate.

मैं एतद्वारा घोषणा करता/करती हूँ कि मेरे द्वारा प्रदान की गई सभी जानकारी मेरी सर्वोत्तम जानकारी और विश्वास के अनुसार सत्य, सही एवं पूर्ण है। मैं समझता/समझती हूँ कि किसी भी प्रकार की गलत जानकारी देना या सत्य बुझाना मेरे आवेदन को अस्वीकार किए जाने या मेरे विरुद्ध कानूनी कार्रवाई का कारण बन सकता है। साथ ही, मैंने अपने निवास प्रमाण पत्र की लिंक पर जाकर उसे देखा एवं सत्यापित किया है।

[GET OTP TO VERIFY EMAIL](#)

Powered By **MPOnline Limited** Served By: MPOnline

## Profile Creation

- Enter OTP to verify email

Home Page Login

**MADHYA PRADESH STATE PHARMACY COUNCIL** **MPOnline Limited**

Pharmacy Council Profile Creation

Applicant Name *	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father Name *	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Marital Status *	UNMARRIED	<input type="text"/>	<input type="text"/>
Date of Birth (DD/MM/YYYY) *	<input type="text"/>	Gender *	MALE
Address as per Aadhaar * <small>(This address will be printed on your certificate.)</small>	<input type="text"/>	Domicile Certificate No.	<input type="text"/>
Domicile Certificate Link	<a href="#">Visit and Verify</a>	Domicile Certificate Issue Date	<input type="text"/>

Email Id * <small>(This Email will be used for sending OTP and other future important communications by MPPC. Hence fill carefully.)</small>	<input type="text" value="Testtttt@gmail.com"/>	Mobile Number *	<input type="text"/>
From where you have taken your Degree/Diploma *	<input checked="" type="radio"/> Madhya Pradesh <input type="radio"/> Other State		
Are You Already Registered in MP State Pharmacy Council *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Have you passed/completed your Degree/Diploma *	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Email OTP : *	<input type="text" value="*****"/>		

Declaration : \*   
I hereby declare that the information provided by me is true, correct, and complete to the best of my knowledge and belief. I understand that any false information or misrepresentation may result in the rejection of my application or attract legal consequences. Furthermore, I confirm that I have personally visited and verified the link to my domicile certificate.  
मैं हस्तक्षर कर रहा/कर रही हूँ कि मैंने द्वारा प्रदान की गई सभी जानकारी मेरी सर्वोत्तम जानकारी और विश्वास के अनुसार सत्य, सही एवं पूर्ण है। मैं समझता/समझती हूँ कि किसी भी प्रकार की गलत जानकारी देना या तथ्य छुपाना मेरे आवेदन को अस्वीकार किए जाने या मेरे विरुद्ध कानूनी कार्रवाई का कारण बन सकता है। साथ ही, मैंने अपने निवास प्रमाण पत्र की लिंक पर जाकर उसे देखा एवं सत्यापित किया है।

[SEND OTP TO VERIFY EMAIL](#) [SUBMIT OTP TO VERIFY EMAIL](#)

Powered By **MPOnline Limited** Served By: MPOnline

## Sign Up

- After Verification of email, Sign Up Page shown.

Home Page Login

**MADHYA PRADESH STATE PHARMACY COUNCIL** **MPOnline Limited**

Pharmacy Council Profile Creation

Applicant Name *	<input type="text"/>		
Father Name *	<input type="text"/>		
Current Marital Status *	UNMARRIED		
Date of Birth (DD/MM/YYYY) *	<input type="text"/>	Gender *	MALE
Address as per Aadhaar * (This address will be printed on your certificate.)	<input type="text"/>	Domicile Certificate No.	<input type="text"/>
Domicile Certificate Link	<a href="#">Visit and Verify</a>	Domicile Certificate Issue Date	04/03/2024
Email Id * (This Email will be used for sending OTP and other future important communications by MPPL. Hence fill carefully.)	<input type="text" value="Testttttt@gmail.com"/>	Mobile Number *	<input type="text"/>
From where you have taken your Degree/Diploma *	<input checked="" type="radio"/> Madhya Pradesh <input type="radio"/> Other State		
Are You Already Registered in MP State Pharmacy Council *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Have you passed/completed your Degree/Diploma *	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Declaration : * <input checked="" type="checkbox"/> I hereby declare that the information provided by me is true, correct, and complete to the best of my knowledge and belief. I understand that any false information or misrepresentation may result in the rejection of my application or attract legal consequences. Furthermore, I confirm that I have personally visited and verified the link to my domicile certificate. मैं एतद्वारा घोषणा करता/करती हूँ कि मेरे द्वारा प्रदान की गई सभी जानकारी मेरी सर्वोत्तम जानकारी और विश्वास के अनुसार सत्य, सही एवं पूर्ण है। मैं समझता/समझती हूँ कि किसी भी प्रकार की गलत जानकारी देना या तथ्य छुपाना मेरे आवेदन को अस्वीकार किए जाने या मेरे विरुद्ध कानूनी कार्रवाई का कारण बन सकता है। साथ ही, मैंने अपने निवास प्रमाण पत्र की लिंक पर जाकर उसे देखा एवं सत्यापित किया है।			
<a href="#">SIGN UP</a>			

Powered By **MPOnline Limited** Served By: MPOnline

## Applicant Login

- After creating the profile the applicant will have to log in again.

The screenshot displays the user login interface for the Madhya Pradesh State Pharmacy Council. At the top, there is a navigation bar with a 'Home' link and a phone number '0755-6720200'. A 'Login' button is located in the top right corner. The main header features the council's logo and name, 'MADHYA PRADESH STATE PHARMACY COUNCIL', alongside the 'MPOnline Limited' logo and tagline 'सर्वसुविधापूर्वक सेवाएँ एवं विकल्प'.

The central content area is titled 'USER LOGIN' and contains the following elements:

- A 'User' dropdown menu.
- A password input field.
- A CAPTCHA image showing the alphanumeric string '8Hf6fD'.
- An input field for the CAPTCHA, containing the text '8Hf6D'.
- A 'Generate OTP >' button.
- A 'Forgot Password [Click Here](#)' link.

The footer of the page includes the text 'Powered By MPOnline Limited' and 'MPOnline'.

## OTP Login

- Enter Login OTP

The screenshot displays the user login interface for the Madhya Pradesh State Pharmacy Council. At the top, there is a navigation bar with a home icon, the phone number 0755-4720200, and a login button. The main header features the council's logo and name on the left, and the MPOnline Limited logo on the right. The central content area is titled "USER LOGIN" and includes a dropdown menu for "User", a "Forgot Password" link, a password field, a "Login" button, and a two-step OTP verification process. The first step shows a blurred OTP "6H74fe" and the second step shows the user entering "6H74fe". A "Forgot Password" link with the text "Click Here" is located below the login button. The footer contains the text "Powered By MPOnline Limited" and "MPOnline".

## Applicant Login

- Applicant Login Successfully Done

The screenshot displays the user interface of the Madhya Pradesh State Pharmacy Council's online portal. At the top, a dark blue navigation bar contains the text "Home | 0755-6720200" on the left, the URL "demopharmacy.mponline.gov.in says" in the center, and "Update Profile | Logoff" on the right. Below this, a white notification box with a blue border and a blue "OK" button displays the message "Successfully Logged In!". The main header area features the Madhya Pradesh State Pharmacy Council logo on the left and the "MPonline Limited" logo on the right, which includes the tagline "Trust, Ability, Excellence, Responsibility, Commitment" and the website "www.mponline.gov.in". Below the header, a light blue banner reads "Pharmacy Council Profile Details and Registration Links". The main content area is currently blank.

## Applicant Login Links

- Applicant window apply for fresh Registration option show

The screenshot displays the user interface of the Madhya Pradesh State Pharmacy Council's online portal. At the top, there is a navigation bar with a home icon, the phone number 0755-6720200, and links for 'Update Profile' and 'Logoff'. The main header features the council's logo and the 'MPOnline Limited' branding. Below this, a section titled 'Pharmacy Council Profile Details and Registration Links' contains an 'Applicant Details' table. The table lists personal information such as name, father's name, gender, date of birth, age, registration status, and email. Underneath, an 'Important Links' section provides buttons for 'Application Tracker' and 'Fresh Registration Form'. A 'Notification' sidebar is visible on the left. The footer includes the text 'Powered By MPOOnline Limited' and 'MPOnline'.

Applicant Details			
Applicant Name	Applicant Father Name	Gender	Male
Date Of Birth (DD/MM/YYYY)	Age	24	Reg. Mobile No
Registration No	Not Generated	Reg. Email ID	Testttttt@gmail.com

Important Links

- Application Tracker
- Fresh Registration Form

## Fresh Registration Form

- Applicant basic details fetched from samagra portal.

Home 0755-6720200 Update Profile Logoff

**MADHYA PRADESH STATE PHARMACY COUNCIL** **MPOnline Limited**

Pharmacy Council Fresh Registration Form

\* Marked Fields Are Mandatory

**Personal Details**

Applicant Name*	<input type="text"/>	Photo*	
Father/Husband Name *	<input type="text"/>		
Mother Name *	<input type="text" value="Test"/>		
Gender *	<input type="radio"/> Male <input type="radio"/> Female		
Date of Birth (DD/MM/YYYY) *	<input type="text"/>		
Mobile Number *	<input type="text"/>	Email Id *	<input type="text" value="Test1111@gmail.com"/>

**Residential Address (As per Aadhaar)**

Address *	<input type="text"/>	Pincode *	<input type="text"/>
State *	Madhya Pradesh	District *	<input type="text"/>

**Permanent Address (Check If Same As Residential Address)**

Address *	<input type="text"/>	Pincode *	<input type="text"/>
State *	Madhya Pradesh	District *	--Select--

Save & Next

Powered By **MPOnline Limited** MPOnline  
Powered By **MPOnline Limited** MPOnline

# Fresh Registration Qualification

- Applicant fill Qualification details.

Home | 0755 - 6720200 | Update Profile | Logoff

**MADHYA PRADESH STATE PHARMACY COUNCIL** **MPOnline Limited**

Pharmacy Council Registration Qualification Details

\* Marked Fields Are Mandatory

Application Number

**High-School Details**

Exam	Board	Roll Number	Year of Admission (YYYY)	Year of Passing (YYYY)
HIGHSCHOOL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Graduation Details**

Exam	Board/University	College/Institute	Roll/Enrollment Number	Year of Admission (YYYY)	Year of Passing (YYYY)
<input type="text"/>	BURHORA	D <input type="text"/> F	<input type="text"/>	<input type="text"/>	<input type="text"/>

Powered By **MPOnline Limited** MPOnline

## Verify From Digi Locker

- After filling the qualification details the applicant will click on the Verify Details button from Digi Locker.

Home 0755-6720209 Update Profile Exit Logout

**MADHYA PRADESH STATE PHARMACY COUNCIL** **MPOnline Limited**

Pharmacy Council Registration Qualification Verification

\*Marked Fields Are mandatory

Application Number

Qualification Details					
Exam	Board/University	College/Institute	Roll Number	Year Of Admission(YYYY)	Year Of Passing(YYYY)
B.Pharma	UL				
HIGH-SCHOOL					

**Declaration:**

I fully understand that I am required to submit my Class 10th marksheet and the final semester marksheet of my degree/diploma in Pharmacy for the purpose of pharmacist registration. I acknowledge that submission of any incorrect, invalid, or unverified marksheets, including those retrieved from DigiLocker, will lead to the rejection of my pharmacist registration application. Furthermore, I am aware that in such a case, resubmission of the application will incur a penalty of ₹2000/- (Rupees Two Thousand only), and the resubmitted application will only be considered after a period of 180 days from the date of resubmission.

**घोषणा पत्र**

मैं यह पूर्ण रूप से समझता/समझती हूँ कि मुझे फार्मासिस्ट के रूप में पंजीकरण हेतु अपनी कक्षा 10वीं की अंकसूची एवं डिग्री/डिप्लोमा (फार्मेसी) के अंतिम सेमेस्टर की अंकसूची प्रस्तुत करना अनिवार्य है। मैं यह स्वीकार करता/करती हूँ कि यदि मैं कोई भी गलत, अमान्य अथवा अनिर्धारित अंकसूची प्रस्तुत करता/करती हूँ, तो मेरी फार्मासिस्ट पंजीकरण हेतु दी गई आवेदन प्रक्रिया अस्वीकृत कर दी जाएगी। इसके अतिरिक्त, मुझे यह भी ज्ञात है कि आवेदन अस्वीकृत होने की स्थिति में, पुनः आवेदन प्रस्तुत करने पर ₹2000/- (दो हजार मात्र) का दंड मुझ पर लागू होगा तथा पुनः प्रस्तुत किया गया आवेदन पुनः संशोधन की तिथि से 180 दिनों के बाद ही विचार हेतु स्वीकार किया जाएगा।

Verify from Digi Locker

Powered By **MPOnline Limited** MPOnline

## Digi Locker Authentication

- The application redirects student to Digi Locker interface for Authentication

**Meri Pehchaan**  
SINGLE SIGN-ON SERVICE

Sign In to your account via **DigiLocker**

Mobile Username Others

.....

.....

[Forgot security PIN?](#)

PIN less authentication

I consent to terms of use.

**Sign In**

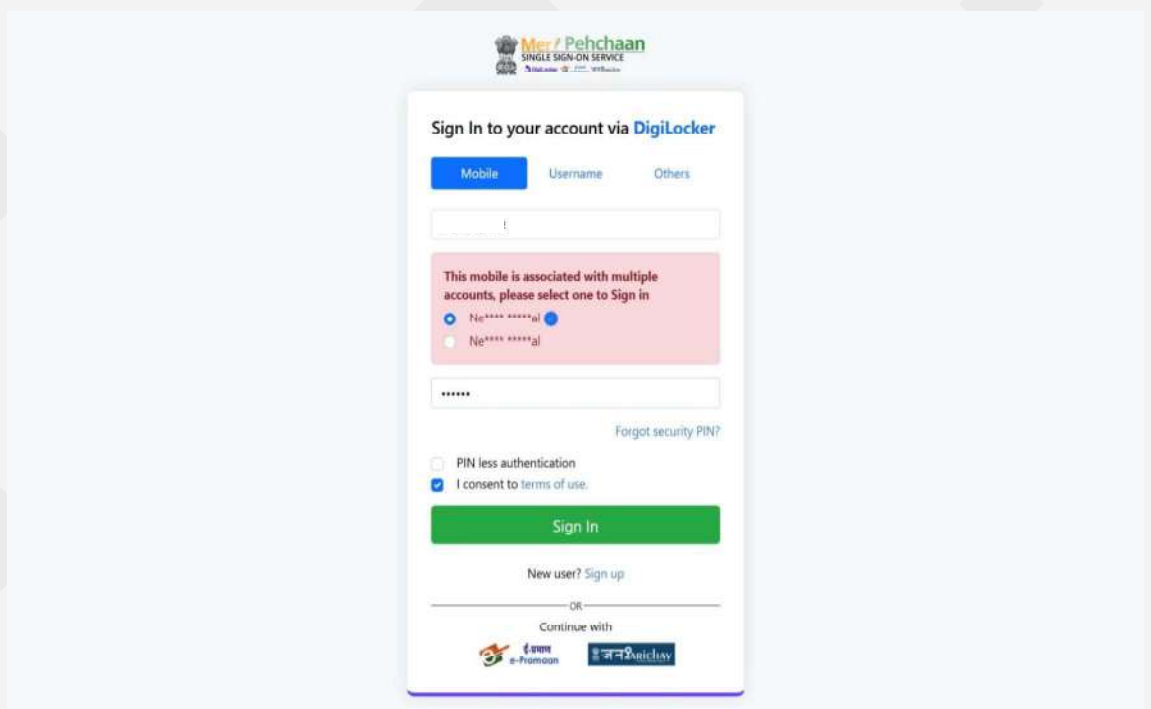
[New user? Sign up](#)

OR

Continue with

## Digi Locker Authentication

- Select Digi Locker Account and enter Mpin for digi locker OTP



## Digi Locker Authentication

- Digi Locker Authentication via OTP verification

**Meri Pehchaan**  
SINGLE SIGN-ON SERVICE  
DigiLocker

### Verify OTP

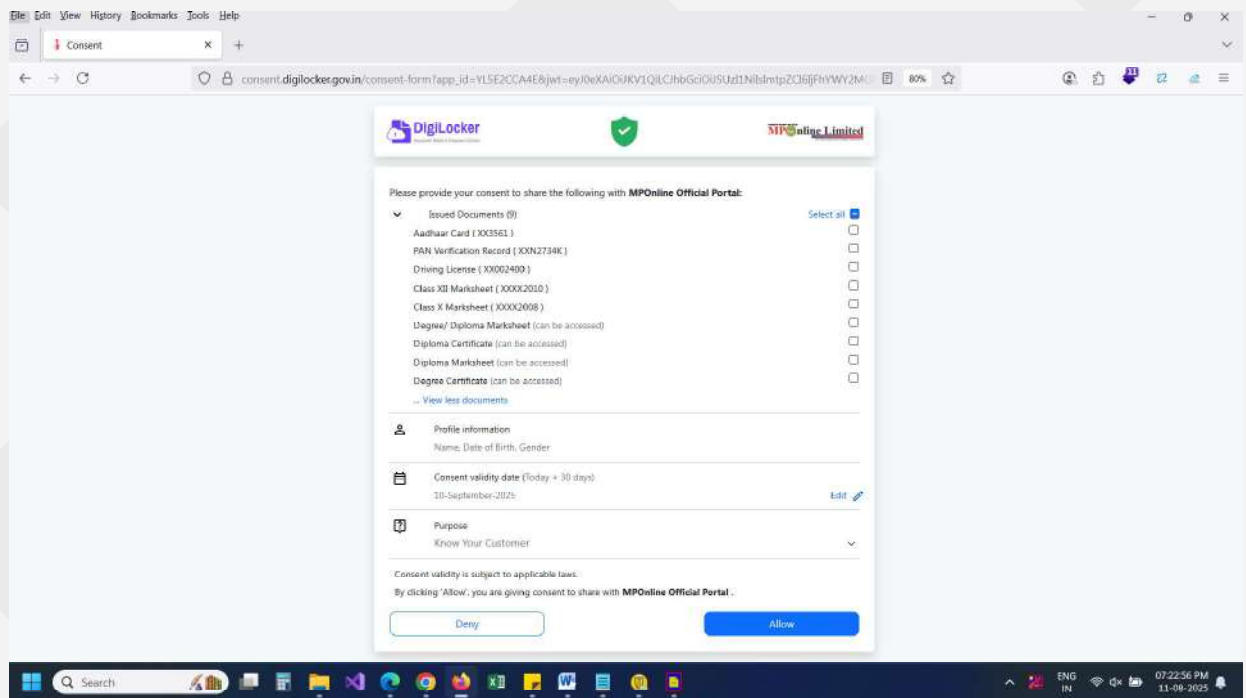
DigiLocker has sent you an OTP to your registered mobile (xxxxxx6352). OTP will be valid for 10 Minutes.

Resend OTP in 00:40

**Sign In**

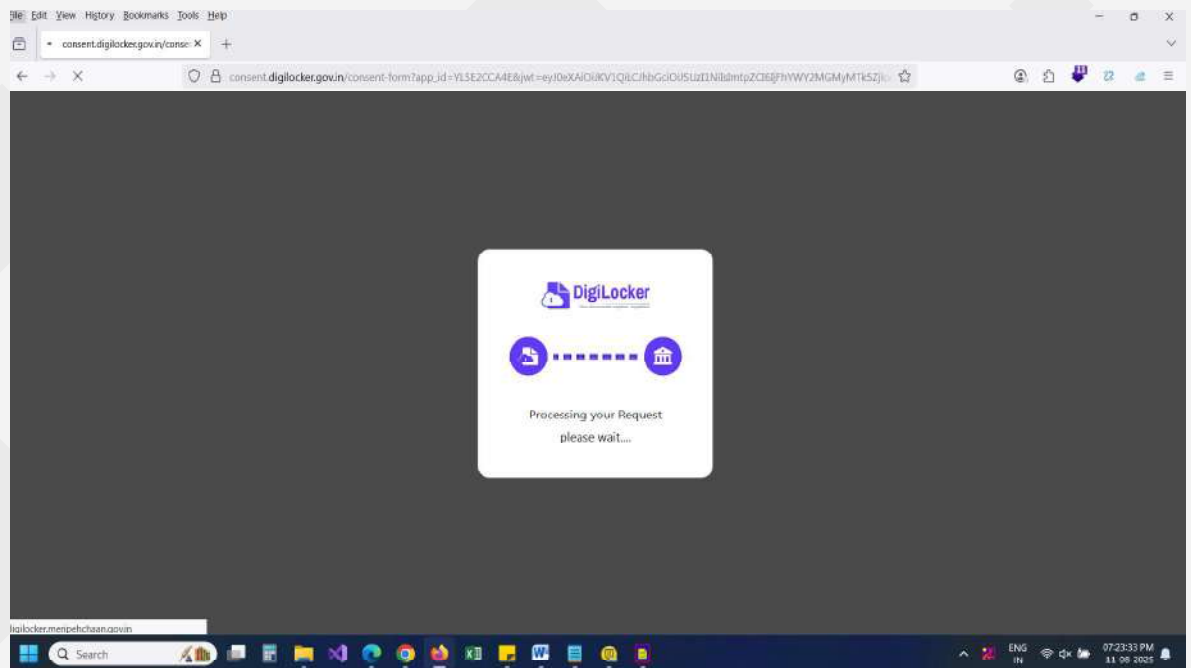
# Digi Locker Consent

- Digi Locker Consent to share details & documents



## Digi Locker Consent

- After Digi Locker Consent redirect control back to Pharmacy Portal



# Status details from DigiLocker

- Showing status details metadata & documents fetched

The screenshot shows a web browser window with the title "Pharmacy Council Registration Upload Documents". The browser address bar shows the URL "demopharmacy.mponline.gov.in/portal/services/Pharmacy/DocumentAndPayment.aspx". The page content includes a table for document uploads and a declaration section.

Registration documents (only.pdf) (Size:500KB)			
Application Id	<input type="text"/>		
High-School Marksheet			
Degree/Diploma Marksheet			
Provisional/ Final Degree	<input type="text" value="Browse..."/> No file selected.	<input type="button" value="Upload"/>	
Training Certificate	<input type="text" value="Browse..."/> No file selected.	<input type="button" value="Upload"/>	
Details Of Trainee Institution(Photo Copy Of Regn. & License)	<input type="text" value="Browse..."/> No file selected.	<input type="button" value="Upload"/>	
PCI approval Letter / Certificate	<input type="text" value="Browse..."/> No file selected.	<input type="button" value="Upload"/>	

**Declaration\*:**  
I \_\_\_\_\_, SO: \_\_\_\_\_, AL a student of I \_\_\_\_\_, L, aged 24 years, residing at I \_\_\_\_\_

# Payment Receipt

- After Payment showing details and documents fetched from Samagra & Digi Locker

Home | 0750 - 472026 | Update Profile (K Logout)

MADHYA PRADESH STATE PHARMACY COUNCIL | MPOnline Limited

Fresh Registration Payment Receipt

Madhya Pradesh State PHARMACY COUNCIL | *Receipt* | MPOnline Limited

Application Number: [REDACTED]

**Personal Details**

Applicant Name: [REDACTED]  
Father Name: [REDACTED]  
Mother Name: MOTHER  
Gender: Male  
Date Of Birth: (DDMMYYYY) [REDACTED]  
Mobile Number: [REDACTED] | Email ID: [REDACTED]

**Residential Address**

Address: [REDACTED] | Pincode: 484126  
State: Madhya Pradesh | District: Anuppur

**Permanent Address**

Address: [REDACTED] | Pincode: 484126  
State: Madhya Pradesh | District: Anuppur

**Qualification Details**

Exam	Board/University	College/Institute	Roll Number	Year Of Admission(YYYY)	Year Of Passing(YYYY)
B Pharme	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
HIGHSCHOOL	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

# Payment Receipt


- After Payment showing details and documents fetched from Samgra & DigiLocker

Verification Type	Samagra	Digi Locker High School	Digi Locker Degree/Diploma	MPBSE High School	RGPV Degree/Diploma
Name	Verified	Verified	Verified		
Father Name	Verified	Verified			
DOB	Verified	Verified			
Domicile	Verified				
Address	Verified				
Husband Name					

Documents	
10th Marksheet	<a href="#">View File</a>
Diploma/Degree Marksheet(Final Year Marksheet)	<a href="#">View File</a>
Provisional/Final Degree	<a href="#">View File</a>
Domicile Certificate	<a href="#">View File</a>

Fresh Registration Transaction Details			
Service Name	Pharmacy Council		
Application Number	.....		
Transaction Id	.....		
Transaction Date & Time	.....	Department Amount (₹) Including GST (18%)	4249/-
Portal Fee Inclusive GST (18%) (₹)	100/-	GST Number	.....
GST Fee (COST&SGST) (₹)	16.28/-	Total Fee (₹)	4349/-
Kiosk Id	Citizen	Kiosk Name	
Department GST Number	.....		

[Print](#)



**Thanks !**