THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HEALTH



PHARMACY COUNCIL

NOTIFICE FOR CHANGE OF MANAGEMENT OR PHARMACEUTICAL PERSONNEL OF A **PHARMACY**

(Regulation 17(1) of The Pharmacy (Pharmacy Practice and the Conduct of Business of Pharmacy) GN No. 267)

| | The state of Educations of Pharmacy) GN No. 267) |
|----|--|
| | Changes to be Made: Superintendent Other Pharmaceutical Personnel |
| | A. TO BE COMPLETED BY THE SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL AND OWNER OF THE PHARMACY. A.1. DETAILS OF THE PHARMACY Name of the Pharmacy PARAMEDICS PHARMACEUTICAL Facility Identification Number (FIN). 0200245 Physical address: Street. KIFURUKWE Ward KIBADA District/Municipal KIGAMBONI Region DAR ES SALAAM |
| | Full Name ZIZI M. NTEBA PHARMACEUTICAL PERSONNEL Address PC-Box 36009, KIGAMBONI Email Zizimalanga 200 amail com |
| | A.S. REASON(S) FOR CHANGE Kampuni Kutokufikia Maridhiana ya Kimaslahi, Kulingtana na Majukumu ya Kikazi |
| | Time frame of notification (As per Contract) |
| | Full Name CASON A MKUM BA Remarks Phone Number 0764 652507 Signature Date 04 ci/2025 |
| | B. TO BE COMPLETED BY THE OWNER ONLY B.1. NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL Full Name Physical address: Physical address: Street MIDIZINI ANACONA SION SION SION SION SION SION SION SION |
| | Street. MIDI ZINI Ward. MAGOGOM FERRY District/Municipal. KICAM BONI Region DAR EL LALAAM Name of Pharmacy: Name of Pharmacy. B.2. QUALIFICATION DOCUMENTS. |
| | B.2. QUALIFICATION DOCUMENTS OF THE NEW SUPERINTENDENT / OTHER PHARMACEUTICAL (i) Copies of registration certificate and valid license to practice (ii) Contract Agreement/MOU (iii) Commitment Letter |
| C. | FOR OFFICIAL USE ONLY |
| | INSPECTION/REGISTRATION OR ZONAL OFFICE |
| | Recommendations Full Name |
| D. | NOTE; Failure to acquire the services of another superintendent/ Other Pharmaceutical Personnel within the mentioned time frame, shall lead to immediate closure of the premises as per Section 43 of the Pharmacy Act Cap 311. |
| | NB: Other pharmaceutical personnel mean any pharmaceutical personnel apart from superintendent. |

WIZARA YA AFYA, MAENDELEO YA JAMII, JINSIA, WAZEE NA WATOTO



BARAZA LA FAMASI



FOMU YA KUKIRI KUTEKELEZA MAJUKUMU YA MWANATAALUMA WA DAWA KWENYE MAJENGO YA KUTOLEA HUDUMA YA DAWA

(kutoka katika Kifungu No. 44 (1) (a) cha Sheria ya Famasi)

| SEHEMU YA KWANZA: - TAARIFA ZA MWANATAALUMA | | |
|--|--|--|
| MFAMASIA FUNDI DAWA SANIFU FUNDI DAWA MSAIDIZI PHARM. DISP | | |
| 1. Jina la mwanataaluma LOYCE · A· NYEJI PIN 0409030 2. Namba ya simu. 0748417969 barua pepe alixandur loyu 823@onrail · Com | | |
| 2. Namba ya simu | | |
| Namba ya simu | | |
| 4. Je, umehuisha taarifa zako kwenye mfumo kupitia tovuti ya baraza la famasi? | | |
| (http://196.45.42.57/pcmis.data/view/modules/registration/pharmacist- | | |
| signup.php) VNDIYO, Stakabadhi NaEcio2393796819001 P HAPANA | | |
| | | |
| SEHEMU YA PILI: - KUKIRI KWA MWANATAALUMA: MWANATAALUMA: mwenye | | |
| Mimi | | |
| taaluma ya dawa ngazi yaDIPLDM A nakiri kwamba nitafanya | | |
| kazi yangu ya kitaaluma katika jengo la kutolea huduma ya dawa liitwalo | | |
| DARAMEDICS DHARMACEUTICALS LTD FIN lililopo katika | | |
| Wilaya ya KIGAMBOM Mkoani DAR-EL-SALAAM | | |
| Sahihi Tarehe 6101202 4 | | |
| Uthibitisho wa Mfamasia wa Halmashauri | | |
| Nadhibitisha kwamba mwanataaluma tajwa ni miongon i/ si miongoni mwa | | |
| wanataaluma waliopo katika halmashauri ninayosimamia Muhuri KNY: DMO | | |
| Jina na Sahihi VIUORIA SHAGEMBE Tag Tarehe 07 01 20 CANCA MEONI | | |
| Jina na Sahihi VIUOKIA CHAULIIBL TRO Tarehe. | | |
| W. MG. VAKIGAN | | |
| Jina na Sahihi VIQORIA SHAQEMBE Tarehe 07 01 20 MIGANGAMBONI SEHEMU YA TATU: - UTHIBITISHO WA MAKAZI: Ithibitishwe na: Afisa Mtendaji KIZEGAKata ya | | |
| Ithibitishwe na: Afisa Mtendaji | | |
| Jina la mtendaji (Kata) (NDL) (NLL / NLL) (NLL / NLL) (NLL / NLL) | | |
| Nathibitisha kwamba Ndugu.LCYCEA:A: | | |
| langu mtaa/kijiji FERRY kuanzia mwaka 2024 Mtendaji | | |
| Sahihi Afisamtendaji Tarehe/ KICAMBOM | | |
| 6/1/2024 | | |



THE UNITED REPUBLIC OF TANZANIA PHARMACY COUNCIL





LICENSE TO PRACTICE

The Pharmacy Act
(Made under Sect. 26 of The Pharmacy Act No. 1 of 2011)

I Hereby Certify that

LOYCE A NYEJI

PIN NO: 0409030

Having complied with the provision of Section 26 of The Pharmacy Act, Cap 311

is entitled to practice as a **Pharmaceutical Technicians** upon the

terms and subject to the conditions set forth in the

aforesaid Act and its Regulations thereto.

Issued:24 December 2024

Expires on:31 December 2025

Registrar Pharmacy Council





12. TERMINATION CONDITIONS

The Employee will be entitled to the following benefits upon termination by the employer on

reasons other than misconduct:

Salary for the month of termination until the day of termination.
Salary in lieu of notices when the termination is without notice.
Payment in lieu of all outstanding leave days.
Payment of severance allowance in accordance with the law in force, unless

termination is on disciplinary ground. Repatriation to the place of recruitment if applicable. Any other agreed entitlement in case of operational requirement

A certificate of Service

The Employer shall not incur liability in respect of clauses b and d where termination is due to reasons of misconduct.

The employee shall also not be entitled to severance payment if the employment is terminated on grounds of incapacity, incompatibility or operational requirements and the employee unreasonably refuses to accept alternative work or employment.

13. MISCELLANEOUS PROVISIONS

13.1 Training

The company policy is to train staff and equip them with the knowledge and skills that are appropriate and necessary for them to achieve the standards of performance required by the position. The training needs will be mutually assessed and identified continually during performance appraisals. At all times, the Employer will use available training resources to assist the employee to better perform his/her responsibilities.

13.2Confidentiality

• The Employee is aware that in the course of employment under this Agreement, he/she

may have access to and be entrusted with information in respect of the business. This information includes, but is not limited to, trade secrets, operating criteria, client lists, strategies, Employer information and documents, company policies and employee salaries and benefits. This information must be treated as confidential and shall not be discussed outside either during or even after termination of this contract of employment.

- All written, audiovisual or digital material produced under this work contract period is
 property of PARAMEDICS PHARMACEUTICALS CO.LTD Dar es salaam, Its distribution or use
 outside of the property is strictly forbidden unless previously authorized by the Managing
 Director and the Management Company. An infraction of this rule will be considered serious
 misconduct and may result to legal action.
- Any dealings with the press or media shall be limited to the chosen Company spokesman, and in any event, any other staff member may not interact with the press or media on any issue regarding company business and operations without prior permission which must be obtained, in writing, from the Managing Director.

Any breach of the terms of confidentiality herein above stated by the Employer, will constitute grounds for termination of services and can result into legal proceedings against the Employee for any claim, liability, action, loss or damage suffered by the Employer as a result of that breach.

5. REMUNERATION

The employer shall pay the employee a basic salary of Tzs 1,200,000 for the agreed period which will be paid to you at a rate of Tzs.3500,00 as an advance in arrears the rest amount shall be paid once the work is complete. The employee agrees that their salary will be subject to statutory deductions including PAYE, Social Security Fund contribution, and any other statutory deduction required under the law of the United Republic of Tanzania.

1. 5.1 Payment

The wage period is monthly, payable on or about the 25^{th} of each month or any other date as may be agreed. The Employee, shall submit the bank account to the employer so that monthly salary will be directly paid to the account so submitted.

5.2 Social Security (NSSF)

Your contribution to the National Social Service fund will be deducted from your salary as established by the NSSF Act and an equal amount will be contributed by the employer.

3. 5.3 Other Deductions

You hereby authorize PARAMEDICS PHARMACEUTICALS CO.LTD to deduct from your salary, all amounts that you may owe the company for goods bought on credit granted by the company or money borrowed from the company which has been previously authorized in writing and signed by the Managing Director.

5.4 Salary Review

The Employee's salary, though not automatically increased, will be reviewed during an annual salary review based on performance.

6. PROBATION

You will have a probationary period of six (6) days of the first month starting from the commencement date of employment. The purpose of thus probationary period is to assess your capacity or compatibility required for the job.

After successful and satisfactory completion of this period, the you will be confirmed in this position. During the probation period, your performance will be assessed by your manager, who will give you reasonable instruction, training, guidance. If you are not able to perform satisfactorily during the probationary period, this agreement can be terminated with notice as may be provided under the existing law governing termination of Probatory employee.

- 1. (a) Seven days if notice is given in the first month of employement;
- 2. (b) After that;
 - (i) Four days if the employee is employed on a weekly or daily basis; Or (ii) Twenty-Eight days, if the employee is employed on a monthly basis

7. HOURS OF WORK

The established hours of work according to local legislation shall be 18hours per week and 3 hours in a day, 6 days in any week, never surpassing more than 5hours in any given day.

The working hours will be flexible and in keeping with the nature of the hospitality industry. It is accepted that public holidays, Saturdays and Sundays will be considered normal work days and that you will be required to work different shifts according to a shift Rota which may be amended from time to tome at the employer's discretion.

Overtime may be part of the requirement of the job as well as working Sundays when required. The employee agrees with the employer that extra working days in any week including weekly rest days and public holidays may be compensated during scheduled cycles of off days or through overtime payment as per Tanzanian Labor Law.



P.o BOX 296, Kibada, Kigamboni. Dar es salaam - Tanzania T: +255 764 652 507/ +255 753 116 360 W: www.paramedics.co.tz E: paramedics@info.co.tz

SHORT TERM CONTRACT OF EMPLOYMENT

An agreement made this January 1, 2025

BETWEEN

PARAMEDICS PHARMACEUTICALS COMPANY LTD. of P.O. Box 296, Kibada Road, Kigamboni, Dar es salaam, Tanzania (hereinafter referred to as "the Employer") of the one part,

LOYCE ALEXANDER NYEJI of Dar es salaam (Hereinafter referred to as "the Employee") of the other part.

Whereas it is agreed that, subject to the terms and conditions set forth in this contract, the Employer shall employ the Employee and the Employee shall work for the Employer in the capacity of PHARMACEUTICAL TECHNICIAN

This contract shall come into force effective from January 8, 2025 and continue for three Month until April 21th, 2025 or until lawfully terminated under circumstances set forth hereunder.

For avoidance of doubt, it is hereby expressly declared that unless the contract is expressly renewed, no new term of contract may automatically arise and the Employee's continuing to work with the Employer without express renewal shall not constitute reasonable expectation of renewal.

PLACE OF RECRUITMENT

For the purpose of this contract, the place of recruitment for the employee will be **Dar es** salaam.

PLACE OF WORK

The Employee will work at PARAMEDICS PHARMACEUTICALS CO.LTD that is owned by PARAMEDICS PHARMACEUTICALS CO.LTD and managed by GASTON HORESTES MKUMBA & JACKLINE BALTAZARY KIRANGO with headquarters in Dar es salaam or in such place or places as shall from time to time be appointed or directed by the employer. Where the Employer deems it necessary to change the duty station of the Employee, the Employee will have to comply with the change.

Your job title is PHARMACEUTICAL TECHNICIAN, and you will be reporting to the PHARMACIST, duties will be outlined in the job description which will be explained to you during the first week of this employment.



In the event where the Employee becomes unable to attend to his/her duties on account of ill health, he/she must notify the Reporting Manager on the first day of such absence

The employee is entitled to a maximum of two (2) days of paid sick leave

Where sickness causes an extended absence period, and the Employee has produced a medical certificate issued by a recognized hospital or doctor, paid sick leave will be granted as follows:

10. TERMINATION OF EMPLOYMENT

This contract may be terminated by either party giving the other party a one (1) months' notice and the Employer reserves the right to pay outstanding salary in lieu of notice. Notice shall be given in writing within the specificized minimum period stating the reasons for termination and the date on which the notice is given and the last day of notice.

Either party have the right to terminate the work contract within the probationary period and according to Tanzanian Labor Law see above clause 6 of this contract.

Termination by the Employer on reasons of misconduct, poor performance, incompatibility, incapacity or operational requirements will be in accordance with agreed standard procedures, which will be explained to the Employee as part of the company regulations.

11. GROUNDS UNDER WHICH EMPLOYMENT CAN BE TERMINATED ON MISCONDUCT Subject to the labour laws in force for the time being, or any other law, the Employer may terminate

the employment of the Employee on the following grounds:

- 11.1 Negligence of duty resulting in loss of business or damage to property. Further, negligence of duties so as to endanger others or property by failure to observe safety or welfare instructions.
 - 2. 11.2 Misappropriation or loss of property, or funds, belonging to the Employer, guests or
 - 3. 11.3 Immoral act at the place of, or in the course of, work.
 - 4. 11.4 Insubordination and persistent refusal to implement policies or to observe rules and

regulations of the company and/or to undertake assignments.

- 11.5 Without due authority, disclose any confidential information to the prejudice of the Employer.
- 11.6 Is convicted by any court for any criminal offence involving fraud or dishonesty or for which he or she was sentenced to imprisonment, unless the Employee successfully appeals such sentence.
- 11.7 Is convicted by any court for any unlawful act at the place of, or in the course of work, or any place.
- 11.8 Any other offence which in the opinion of the disciplinary authority is grave enough to attract termination.

Note: The above list is not exhaustive and may be added to.

The Employee shall observe and be bound by the Company Policies and Procedures Regulations and Hand Book guidelines as informed by their line manager and the Human Resources department.

13.4 Disclosure of Information This contract will be immediately terminated if it is later discovered that there was any misrepresentation, falsification or material omission of information by the Employee during application and/or interview.

13.5 Use of Employee pictures/videos It is company's tradition to share birthdays of our employees (excluding the year), as well as pictures and videos from different Company events on noticeboards, marketing collateral and social media. By signing to this agreement you authorize Company to share your birthday with other employees and authourize Company to use your picture/video for the Paramedics's marketing purpose. Should you have any hesitations please raise this with the HR Manager.

This contract may be amended, modified or supplemented by way of executing a written instrument

signed by both parties.

This agreement shall be interpreted and applied in accordance with the Employment and Labour Relations Act 2004 and that where any conflict arise between the Agreement and the provision of the Act, the later shall apply as if it is the term of this Agreement.

Parties hereby agree that they shall be bound by the terms and conditions stated herein and not otherwise.

13.7 Employee's Commitment

| I, LOYCE ALEXENDER NYEJI, hereby certify that I have read the terms of this contract, and that I |
|--|
| fully understand and agree to all that is stated herein. I therefore promise to comply and agree |
| all the rules and regulations of the company as per this contract. |

Signed on this ______ day of _____ Tonuary _____ 2025. For and on behalf of PARAMEDICS PHARMACEUTICALS COMPANY LTD:

Eng. Gaston Horestes Mkumba

Managing Director PARAMEDICS PHARMACEUTICALS COMPANY LTD.

Signature G. Mkumba

Eng. Jackline Baltazry Kirango

FINANCE DIRECTOR & ADMIN.

Signature J. Kirango



Employee Full Name LOYCE ALEXANDER NYEJI

Employee Signature.

Employee Address KIGA MBONI

Before Me: