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 Rebeca. M. Marge. PIN 0500544 2. Namba ya simu 07659533.11	
signup.php) MDIYO, Stakabadhi Na HAPANA	
SEHEMU YA PILI: - KUKIRI KWA MWANATAALUMA:	
Mimi Rebeca M Marge mwenye	
taaluma ya dawa ngazi ya Funchi Dawa Marchanakiri kwamba nitafanya	
kazi yangu ya kitaaluma katika jengo la kutolea huduma ya dawa liitwalo	
HILISIDEPHORM ACY FIN 0100698 lililopo katika	
Wilaya ya ARENHO MJINI Mkoani ARUSHO	
Sahihi Phage Tarehe 12/8/2025	
Uthibitisho wa Mfamasia wa Halmashauri	
Nadhibitisha kwamba mwanataaluma tajwa ni miongon i/ si miongoni mwa	
wanataaluma waliopo katika halmashauri ninayosimamia	UW
Jina na Sahihi Siprosa Elisha Tarehe 11/08/2026	A TON
SEHEMU YA TATU: - UTHIBITISHO WA MAKAZI:	IST .
Ithibitishwe na: Afisa Mtendaji	man and and and and and and and and and a
Jina la mtendaji (Kata). TATU MAGOMBA Kata ya KALOLENI Nathibitisha kwamba Ndugu REBECA M MAJGE anaishi Muhuri	
Nathibitisha kwamba Ndugu KEBECA M MAIGE anaishi Muhuri	
langu mtaa /kijiji M174 260 kuanzia mwaka 35 2025 Mtendaji	
Sahihi Afisamtendaji Tarehe 11 08 200 ASH AURI YA ONTE EA AR AFISA MTENDAJI KATA KATA YA KALOLENI	USHA
KAIA 14 H 08 202	5



THE UNITED REPUBLIC OF TANZANIA PHARMACY COUNCIL





LICENSE TO PRACTICE

The Pharmacy Act

(Made under Sect.30 of The Pharmacy Act No. 1 of 2011)

I Hereby Certify that

RABECA M. MAIGE

PIN NO: 0500544

Having complied with the provision of Section 30 of The Pharmacy Act, Cap 311 is entitled to practice as a **Pharmaceutical Assistants** upon the terms and subject to the conditions set forth in the aforesaid Act and its Regulations thereto.

Issued:18 August 2016

Expires on:31 December 2025

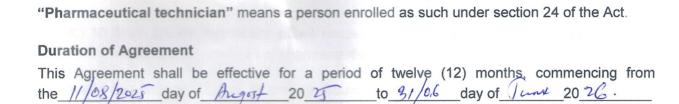
Registrar Pharmacy Council





AGREEMENT FOR EMPLOYMENT TO PHARMACETICAL TECHNICIAN TO PROVIDE PHARMACEUTICAL SERVICES

	This Agreement is made on this // day of Augost 20 25
	RETWEEN
	(Name) of P.O.BOX 1/337 Region Awstm. (hereinafter referred to as the PROPRIETOR) the expression which includes his assignees agents or his legal representative of his business.
	AND
	REBECA (WALLE MIBALL) an enrolled pharmaceutical technician who provides pharmaceutical services
	WHEREAS the Proprietor wishes to establish and operate a business of a pharmacist which is a regulated business under the Act
	WHEREAS the pharmaceutical technician is willing to offer professional services to the proprietor in lieu of remuneration for such services or such other terms and conditions as stipulated hereunder;
	WHEREAS the proprietor and a pharmaceutical technician are desirous to enter into an agreement, for a pharmaceutical technician to provide pharmaceutical services at the terms and conditions as hereinafter appearing;
	WHEREAS the Parties agree that the pharmaceutical technician will be providing pharmaceutical services to a business of a pharmacist styled as Hill Side Harmacy Pharmacy.
	AND NOW WHEREFORE THIS AGREEMENT WITNESSETH AS FOLLOWS;
1.	Interpretation: "Act" means the Pharmacy Act, Cap 311.
	"Agreement" means the Agreement between the parties to establish and operate a business of Pharmacist.
	"Business of pharmacy or pharmacist" includes professional pharmacy practice and any activity carried on by a person in relation to medicines, medical devices or herbal medicines;
	"Pharmacy" means any approved premises wherein or from which any services pertaining to the practice of a pharmacist is provided, and shall include a community Pharmacy, consultant Pharmacy, institutional Pharmacy or wholesale Pharmacy.
	"Proprietor" means an owner of Pharmacy and includes his assignees, agents or his legal representative



2. Commencement of Services

- 3. Obligation of the Parties:
- 4. The Proprietor:

The proprietor shall have the following duties and responsibilities; -

- 4.1.1 The **PROPRIETOR** shall pay Monthly salary/emoluments of TZS. 260 600 payable monthly to the **Pharmaceutical technician** upon discharging his duties and functions as per this Agreement and at any event the salary **shall not be paid in advance**.
- 4.1.2 The salary/emoluments shall be net of any applicable taxes and/or deductible employment benefits and shall be paid monthly and no later than the 1stday of the following month.
- 4.1.3 Comply with the Laws, Regulations, Guidelines and standards prescribed by the Pharmacy Council and other relevant authorities.
- 4.1.4 Implement and ensure that standards required for pharmacy and pharmaceutical properties are maintained in high level at all times.
- 4.1.5 Apply the adequate funds necessary to rehabilitating or modifying the present premises and maintaining the modern pharmacy practice.
- 4.1.6 Shall ensure pharmaceutical services are provided with due care.
- 4.1.7 Shall ensure all proper records are maintained and managed well.

- 4.1.10 Shall ensure availability of all necessary reference and other relevant materials necessary for provision of pharmaceutical services and operations.
- 4.1.11 Shall report to the Pharmacy Council on poor attendance, service provided or malpractices done by the pharmaceutical technician.
- 4.1.12 Shall purchase and ensure availability of all necessary tools for pharmacy operations are in place, i.e PC logo, dispensing register, ledgers etc.
- 4.1.13 Shall not interfere with the performance of professional matters in the premises or cause non-performance of professional services in the pharmacy.
- 4.1.14 Shall ensure all purchases or procurement and deliverables of pharmacy items is signed by a superintendent.
- 4.1.15 Perform any other duty as the Council may determine from time to time.

4.2 The Superintendent;

At a salary or emolument stipulated in clause 4.1.1 of this Agreement, the pharmaceutical technician shall, with all commitment and professional diligence, take the necessary steps to provide pharmaceutical care and services to clients of the said pharmacy

The pharmaceutical technician shall have the following duties and obligations: -

- 4.2.1 Shall provide pharmaceutical service with due care.
- 4.2.2 Maintain proper records and manage them in accordance to good pharmacy practice.
- 4.2.3 Shall keep medicines, medical supplies and other pharmacy items are properly in compliance with good pharmacy practice
- 4.2.4 Shall perform any other duty as the Council may determine.

5. Termination

Unless otherwise terminated by either party, this Agreement may be terminated upon expiry of the contract.

This agreement may be terminated by either party upon issuing a written notice of three (3) months to the other party of his intention to terminate this contract

The written notice shall be addressed to the other part and copy shall be submitted to the Registrar, Pharmacy Council for notification.

Notification of termination of the contract to the Registrar shall be accompanied with reasons of termination.

The Parties agree that the Council shall not be obligated to issue another notice of termination but a closure order as per the Act.

6. Dispute Settlement

- 6.1 In the event of dispute in connection with this agreement both parties will make every effort to resolve the matter amicably. If amicable settlement becomes impossible, then, an aggrieved party may seek legal remedy.
 - 6.2 Nothing in clause 6 (6.1) and (6.2) shall prevent the Proprietor or pharmaceutical technician from initiating or proceeding to The Commission for the Mediation and Arbitration (CMA).

7. Costs

The Proprietor shall meet the cost of drawing up this Agreement.

- 8. The laws of Tanzania hereto shall govern the validity, construction and interpretation of this agreement and the rights and duties of the parties.
- 9. The Pharmacy Council will accept additional clauses but this Agreement is a generic contract for guidance only.

IN WITNESS WHEREOF the parties hereto have duly signed and sealed this presents on the date and in the manner herein after appearing.

	and in the manner herein after appearing.
	Signed and delivered by the parties at Dar es salaam this
	SIGNED and DELIVERED Bythe. Said JAC'S JOSHAR Juni Who is known to me personally/
	In the presence of: This day of AV101
	Name John, Michofans Menigue
	Designation.
	Signature DX ZoZs
	SIGNED and DELIVERED By the said REBECO MALUE MBALL Control Notary Public Residence of the N
1	By the said REBE CA MALUE MBALL Control Notary Public Notary Publisher for Oakle Notary Publisher for
-	ntroduced to me by.
ŗ	personally the latter known to me
7	This day of the 20 75
	This day of true 20 25 PHARMACEUTICAL TECHNICIAN
	n the presence of: Name: 10 un