# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

### SECTION I

This form has been issued farth singh	common use; (b) the reading, translation and copying of prescriptions
(Name of student pharmacist)	including the checking of doses;
son of /daughter of Porticep Singh residing at	(c) the dispensing of prescriptions illustrating the
N-TP-C SIPAT Woo has produced	commoner methods of administering medicaments:
the land and	and
evidence before me that he/she is entitled to receive the	<ul><li>(d) the storage of drugs and medicinal preparations.</li></ul>
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Regulations framed under section 10 of the Pharmucy	l also agree that a Registered Pharmacist shall be
Act, 1948.	assigned for his /her guidance.
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bilaspur (C.G.)	SECTION IV GH - HRB - 40866
SECTION II	SECTION 14. 631 -14KB - 40066
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I Gene i Singh scrept	parte single
(Name of the Student Pharmacist)	· lus
5.6. T. eastertate of phasmerfical	(Name of student pharmacists:
sciences, gwill glandas vislavorey.	has undergone 500 hours training spread core
(Name of the Apprentice Master).(Name of the	3 months in accordance with the details
Institution) ANUP Chowby.	enumerated in SECTION III
ASTHO 1960ZEAL CNKH HOSPZTM	- Johnst
(Hospital or Pharmacy) as my Apprentice Master for	· North
the above training and agree to obey and respect him	(Physiolog Organisation por
ther during the entire period of my training.	DEVAN BROKERS DIVERNO
tull	ke nefam Vilair, Krist andi
(Studont Pharmacist)	KU1.3A (C, G) (15 177 -
	SECTION V Reg. No TKORLS4_4
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SECTION III	I certify that
No Assessment and the Secretary of the	Barto sugti
1. Ansup choubuf accept	The state of the s
(Name of the Apprentice Master)	(Name of student pharmacists completed in all respect his practical training under
- Daget Single as a	regulation 20 of the Education Regulations framed ur der
<ul> <li>(Name of the student pharmacist)</li> </ul>	section 10 of the Pharmacy Act, 1948.He had his
trainee and I agree to give him /her training facilities in	practical training in an institution approved the
my organisation so that during his /her training he /she	Pharmacy Council of Ingra.
may acquire: —	
Note by the second second	Date: 9/2/21 (1)
<ol> <li>Working knowledge of keeping of records required</li> </ol>	( brows Man
by the various Acts affecting the profession of	- Hanton
pharmacy; and	Head of the Academic Incingator

S.L.T. Institute of Pharm, Sciences Guru Ghasidas Vishwavidyalaya, Bilaspur (C:G.)

### [See regulations 21 (1)]

# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS





THE BOTH has been issued ALVINA MINJ	(a) the manipulation of pharmaceutica
(Name of student pharmacist) son of /daughter of GREGORT PROSAD residing at	<ul> <li>(b) the reading, translation and copying of prescriptions including the checking of doses;</li> <li>(c) the dispensing of prescriptions illustrating the</li> </ul>
evidence before me that he/she is entitled to receive the	commoner methods of administering medicaments:
	<ul><li>(d) the storage of drugs and medicinal preparations.</li></ul>
Regulations framed under section to of the Pharmacy	I also agree that a Registered Pharmas Jabali to
Date OS-10-20 The Head Ton	Store Reeper (Pharmacist
The Head of Expademic	CIMS, Bilaspur (C.G.)
S.L.V. Institute of effect of Gund Ghastos Vishwavidyala	(Name & address of the Institute 2011)
SECTION II . Bilaspur (C.G.)	SECTION IV
1 Aluena Mest	To all a

	BISCITOR IV	
1 Alvena Menj	cept I certify that	
Olama -Ph. o	Z) 4	vina Minj
Rayiv kumae yadar of Store	Kupu phaemacost	Name of student pharmacist
Name of the Apprentice Martin Of	. nas undergone.	TAR HOUse training
Sciences (CVMS) Ollaspen (Hospital or Pharmacy) as my Apprentice Man	f medical enumerated in SEC	CTION III
(Hospital or Pharmacy) as my Apprentice Maste	(C·G·)	- Just
to above training and agree to obey and respect his	1	(Head of the Committee

sier during the entire period of my training

(Student Pharmacist)

ad of the Organisation of

Medical SuperIntendentision. C.I.M.S., Bilaspur (C.G.)

SECTION V

SECTION III (Name of the Apprentice Master) (Mame of the student pharmacist) trainee and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire: --

1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and 2. Practical experience in -

I certify that has

(Name of student pharmac, stcompleted in all respect his practical training once; regulation 20 of the Education Regulations framed u- desection 10 of the Pharmacy Act, 1948.He had his practical training in an Institution approved the Pharmacy Council of India

(Head of the Agree to Institut or

S.L.T. Institute of Pharm. Sciences Guru Ghasidas Vishwavidyalaya Bilaspur (C.G.)

# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

This form has been issued Ashufosh sing  (Name of student pharmacist) son of /daughter of Asving sing residing at  who has produced evidence before me that he/she is entitled to receive the Practical Training as set out in the Education Regulations framed under section 10 of the Pharmacy  Act, 1948.  Date: 05-10-20 The Heritage Academic S.L.T. Institute of Pharma	nts:
commoner methods of administering medicamen and (d) the storage of drugs and medicinal preparations.  Regulations framed under section 10 of the Pharmacy  Act, 1948.  Date: OS-10-20 The Heart Academic S.L.T. Institute of Pharmac Institute Institute of Pharmac Institute Institute In	nts:
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Silaspur (C.G.)	10.321. Ne: 6150
SECTION IV	
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S.L. T Tactifule of pharmacist)  Science (G.G. V Tillo CTI)  (Name of student pharmacist)  (Name of student pharmacist)	
(Name of the Annual Silas Pur) has undergone. Silas being training	
MEDICINE CENTER (NOT be (.G.)  (liospital or Pliarmaey) as my Apprentice Master for the above training and agreement the Master for	
	220
(Student Pharmacist) SECTION V. Date 30	
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(Name of the Apprentice Master)  as a  (Name of the Student pharmacist)  trained and I agree to give him a student pharmacist)  (Name of the Apprentice Master)  as a  completed in all respect his practical training under regulation 20 of the Education Regulations framed.	iists - de-
may acquire; — practical training in an Institution approved the Pharmacy Council of India.	
by the various Acts affecting the profession of  Date: 0110-121	<u>-</u>
2. Practical experience in -  S.L.Telastitute of charine Science Guru Ghasidas Vishwav. dyalaya	:03/
Bilaspur (C.G.)	i.

# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

(a) the manipulation of pharmaceutical apparatus in

common use;

1	 -1	W	IN I	١

This form has been issued BHAYNA STNGH

	(b) the reading, translation and copying of prescriptions
(Name of student pharmacist)	including the checking of doses;
son of /daughter of Abhay Rumay Singhesiding at	(c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments:
evidence before me that he/she is entitled to receive the	and Charles de distriction
Practical Training as set out in the Aducation	(d) the storage of drugs and medicinal preparations.
	La Company Contraction of the Co
Regulations framed under section of the Pharmacy	I also agree that a Registered Pharmack Statute
Act, 1948.	assigned for his /her guidanStore Keeper (Pharmaci CIMS, Bilaspur (C.G.)
Date: 6-10-20 The Head HEAD cademic	(Apprentice Master)
S.L.T. Institute of Pharm Sciences	(Name & address of the Institution)
Guru Ghasidas Vishwavidvalava.	00-00-0000
Bilaspur (C.G.)	Reg NO - C9-PC- 9290
SECTION II	SECTION IV
1 Bhavng Sinor accept	Legrify that,
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Name of the Student Pharmacist)	( has
Rayir Ruman Yadar or Stane beepen pha	(Name of student pharmacists
	has undergone 420 hours training spread ever
(Name of the Apprentice Master) (Name of the	03 months in accordance with the details
Institution) (Ahathogaun growthute af medical	enumerated in SECTION III
sciences (circs) Bilaspure (c/4)	0
(Hospital or Pharmacy) as my Apprentice Master for	Kull
the above training and agree to obey and respect him	(Head of the Organisation of
/her during the entire period of my training 09	Medical Superintendent
the daying and drinks period of my training party	Medical Superint (C.G.)
(Student Pharmacist)	C.I.M.S., Bilaspur (C.G.)
(Strocket harmacist)	SECTION V
<b>A</b>	necontraction at
SECTION III	I certify that
A management of	DHAMMA SINGM
1. Rayiv Kumau Yadauscept	has
Name of the Approprias Moster	(Name of student pharmac; st
Bhavna angen as a	completed in all respect his practical training under
- (Name of the student pharmacist)	regulation 20 of the Education Regulations framed u- t
trainee and I agree to give him /her training facilities in	section 10 of the Pharmacy Act, 1948 He hard his
my organisation so that during his /her training he /she	practical training in an Institution approved the
may acquire: —	Pharmacy Council of India.
STATE OF THE STATE	Date: 16 1084 Vongalin
1. Working knowledge of keeping of records required	Date: 16 ON 11 Congruen
by the various Acts affecting the profession of	HEAD
pharmacy; and	S.L.T. Institute of Pharm. Science
Practical experience in =	Gura Ghasher & Gidennia kiyahaya
ar a serious caparious up a	Bilaspur (C.G.)

## PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

occitor.	
This form has been issued Bhusesh Kumar	<ul> <li>(a) the manipulation of pharmaceutical apparatus in common use;</li> </ul>
- Stopesh Munici	(b) the reading, translation and copying of prescriptions
(Name of student pharmacist)	including the checking of doses;
son of /daughter of Laksman Dag residing at	(c) the dispensing of prescriptions illustrating the
will to a class III III who has residued	commoner methods of administering medicaments;
villet post - Charbhatha who has produced	and
evidence before me that he/she is entitled to receive the	(d) the storage of drugs and medicinal preparations.
Practical Training as set out in the Education	
Regulations framed under section on the Pharmacy	I also agree that a Registered Pharmacist shall be
Act, 1948.	assigned for his /her guidance.
Potes 1848.	Ry No - 7436 PHARMACHETTAGET
Late 17 / A fa a 4 Pa   The Head of the Academic	1 1 0 miles   1 0
S.L.T. Institute of Pharm. Sciences	(Name &STORE SECTION on)
S.L.T. Institute of Poarth, Sciences  Guru Ghasidas Vishwavidyalaya,	GMCH RAJNANDGAON (C. G.
Rilasmur (L. la.)	SECTION IV .
SECTION II	
1 · Ql	I certify that
1 Bhupesh Kuman accept	Bhupesh Kumar
(Name of the Student Pharmacist)	- has
of Mrs. Machinety	(Name of student pharmacists)
- Gerbry	has undergone 720 hours training spread ever
(Name of the Apprentice Master) (Name of the	months in accordance with the details
Institution) Orover Meeter Caflege Hangs, tol	enumerated in SECTION III
Regningaen (6.65)	1/60/2/20:2
(Hospital or Pharmacy) as my Apprentice Master for	1 4 25 (31-7)
the above training and agree to obey and respect him	(Head of the Organisation of
/her during the entire period of my training.	Pharmacentical Division
(DWa)	, शासुकीय मेडिक <b>ल कालेज</b>
(Student Pharmacist)	SECTION V संबद्ध विकित्सालय राजनांदगांव (छ. ग
	Source and an arrangement of the second seco
SECTION III	I certify that
	Bhupesh Kumar
1, mrs. Madhimita galju accept	has
(Name of the Apprentice Master)	(Name of student pharmac sts
Bhupesh Koman as a	completed in all respect his practical training and
<ul> <li>(Name of the student pharmacist)</li> </ul>	regulation 20 of the Education Regulations framed
trainee and I agree to give him /her training facilities in	section to of the Pharmacy Act. 1948 He had ble
my organisation so that during his /her training he /she	Pharmacy Council of India.
may acquire: — ·	marinacy Council of India.
TOTAL AND CONTRACTOR	Date: 12/07/21
<ol> <li>Working knowledge of keeping of records required</li> </ol>	- COMM
by the various Acts affecting the profession of	- Angery
pharmacy; and	Head of the Addentic Institution
2. Practical experience in -	
	HEAD
	S.L.T. Institute of Pharm, Science
2 मलभार पाद्य विद्या	Guru Ghasidaş Vishwavidyalaya
רובליי אות יויילייאר –	Bilaspur (C.G.)
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# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

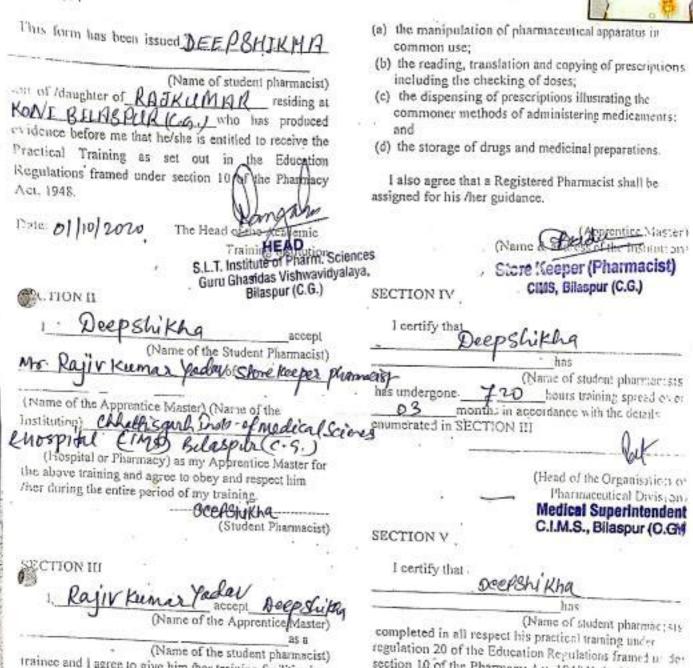
# SECTION 1

This form has been issued BRAJESH	(a) the manipulation of pharmaceutical apparatus in common use;
(Name of student pharmacist)  BildSpox  who has produced evidence before me that he/she is entitled to receive the Practical Training as set out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.  The Head of the Academic Training Sciences  S.L.T. Institute of Pharm. Sciences  S.L.T. Institute of Pharm.  Guru Ghasidas Vishwavioyalaya.  Bilaspur (C.G.)	(b) the reading, translation and copying of prescriptions including the checking of doses; (c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and (d) the storage of drugs and medicinal preparations.  I also agree that a Registered Pharmacist shall be assigned for his /her guidance.  (Name & address and enstitution)
LIBRAJESH SCHOOL	I certify that - BRATESH.
(Name of the Student Pharmacist)  ASHWANT GUPTA of STORE PHARMA	has
(Name of the Apprentice Master) (Name of the Institution) Day medical Store Blaspur (Car	has undergone. 120 hours training spread or as
(Fiospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training.	(Head of the reganisation of
(Student Pharmacist)	SECTION V
YASHWANT GUPTA accept_	I certify that .  BRAJESH.
LIRAJESM. (INAME OF the Apprentice Master)	(Name of student pharmac.sts
traince and I agree to give him /her training facilities in my organisation so that during his /her training he /she	completed in all respect his practical training under regulation 20 of the Education Regulations framed up des section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution approved the Pharmacy Council of India.
<ol> <li>Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and</li> </ol>	Date: 28/02/21 Jamash
pharmacy; and  2. Practical experience in -	GlafidinSthate of Sharole Sciences Guru Ghasidas Vishwavidyolaya.

[See regulations 21 (1)]

# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION 1



(Name of the student pharmacist) trainee and I agree to give him ther training facilities in my organisation so that during his /her training he /she may acquire: --

Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and

2. Practical experience in -

S.L.T. Institute of Pup m. Sciences (liguré Ghasidas Vishwavidyalaya. Bilaspur (C.G.)

section 10 of the Pharmacy Act. 1948 the had his

practical training in an institution a proved the

Pharmacy Council of India.

### PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

### SECTION I

This form has been issued DHANESHWAR SAHO	(a) the manipulation of pharmaceutical apparatus in common use;     (b) the reading, translation and copying of prescriptions
(Name of student pharmacist)	including the checking of doses;
son of /daughter of Mr. JETHURAM residing at MIRMITTI, KARTROHAM who has produced	<ul> <li>(c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments;</li> </ul>
evidence before me that he/she is entitled to receive the	and
Practical Training as set out in the Education	(d) the storage of drugs and medicinal preparations.
Regulations framed under section 10 of the Pharmacy Act, 1948.	I also agree that a Registered Pharmacist shall be
baloso Wardshill.	assigned for his /her guidance.
Date: 301011 The Head of the Adademic	(Apprentice Master)
S.L.T. Institution	(Name & address of the Institution)
Date: 30103102 The Head of the Cademic  S.L.T. Institute of Pharm. Science:  Guru Ghasdas Vishwavirhed.	, R.S. MEDICOSE
Guru Ghasidas Vishwavidyalaya,  Bilaspur (C.G.)	SECTION IV Rend. NO. 16450
1 DHANESHWAR SAHU	I certify that Dane - 25-01-2021
account	DHANESHWAR SAHU
(Name of the Student Pharmacist)	has
KALPANA GOSWAMI	(Name of student pharmacists:
(Name of the Apprentice Master) (Name of the Institution) R.S. MEDICOSE	has undergone 520 hours training spread ever 16.70 months in accordance with the details enumerated in SECTION III
(Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training.  (Student Pharmacist)	(Head of the Organisation of Publishbateutical Division of Talapara, Bilapur (C.G.,
(Student Friedmacist)	SECTION V . Revy Hb. 16450
<u></u>	
SECTION III	DHANBHWAR SAHU
I, KALPANA GOSWAME accept	has
(Name of the Apprentice Master)  OHANESHWAR SAHU  as a  (Name of the student pharmacist)  trainee and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire:	(Name of student pharmac sts completed in all respect his practical training under regulation 20 of the Education Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution approved the Pharmacy Council of India
Working knowledge of keeping of records required by the various Acts affecting the profession of	Date: 01/02/21 Langula
pharmacy; and  2. Practical experience in -	S.L.T. Historia of Pharity Selection of Guru Ghasidas Vishwavidyalaya.
	Bilaspur (C.G.)

# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

(a) the manipulation of pharmaceutical apparatus in

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commoner methods of administering medicaments; and the standard evidence before me that he/she is emitted to receive the Practical Training as set out in the Education Regulations framed under section for the Pharmacy Act, 1948.  Date: 12 10 126 The Head of Herbitanic Sciences Gurd Ghastias Vishwavidyalaya, Bilaspur (C.G.)  SECTION II  Difest kuman Cinha accept (Name of the Student Pharmacist) of the Thadrag of the above training and agree to obey and respect him there during the entire period of my training (Student Pharmacist) trainee and I agree to give him ther training facilities in my organisation so that during his ther training facilities in my organisation so that during his ther training facilities in my organisation so that during his ther training facilities in my organisation so that during his there training he fabe may acquire:  b. Working knowledge of keeping of records required by the varjous Acts affecting the profession of pharmacy; and  C. Practical experience in—  Commoner methods of administering medicaments; and (d) the storage of drugs and medicinal preparations.  Lalso agree that a Registered Pharmacist shall be assigned for his ther guidance.  (Name & address of the single of his ther guidance.  (Name & address of the single of his there was a completed in the carried of his there was a completed in SECTION III  Level from the details of the sudent pharmacist of trainee and I agree to give him ther training facilities in my organisation so that during his ther training he fabe may acquire:  b. Working knowledge of keeping of records required by the varjous Acts affecting the profession of pharmacy; and  C. Tractical experience in—  C. Tractical experience in—  C. Tractical experience in—  C. Tractical experience in—  C. Tractical experience in that it is a minimum section of the pharmacy and in a histitution appreved the pharmacy council of India.  Date: [VISTA]  C. Tractical experience in—  C. Tractical Training in an Institution appreved the pharmacy in a minimum section of the pharm	(Name of student pharmacist)	(b) the reading, translation and copying of prescriptions including the checking of doses; (c) the dispensing of prescriptions illustrating the
Practical Training as set out the Education Regulations framed under section to the Planmacy Act, 1948.  Date: 12 10 26 The Head of Head of Head of the Planmacy Act, 1948.  Date: 12 10 26 The Head of Head of Head of Head of the Student Pharmacist Vishwavidyalaya, Bilaspur (C.G.)  SECTION II  Diffest Kumar Cixtha scoopt (Name of the Student Pharmacist) of Mr. Madure to the above training and agree to obey and respect him /her during the entire period of my training (Student Pharmacist) trainee and I agree to give him /her training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training he /her warjous Acts affecting the profession of pharmacy; and  Practical Training as set out in the Education Registered Pharmacist (Name & address Gundent Pharmacist)  I also agree that a Registered Pharmacist Sciences (Name & address Gundent Pharmacist)  (Name of the Apprentice Master for the above training and agree to obey and respect him /her training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation so that during his fher training facilities in my organisation s		commoner methods of administering medicaments;
Regulations framed under section	evidence before me that he/she is entitled to receive the	
Date: 12/10/26 The Head of Hea	Regulations framed under section (Not the Plasmacy	
SECTION II    Dikesh   kumaa   Sinka   secept	and the second	
SECTION II  Dikesh kumar Sinha accept (Name of the Student Pharmacist) of the Apprentice Master) (Name of the Apprentice Master) (Name of the Institution of Dark Medical Others Hospital Pharmacist)  (Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training (Student Pharmacist)  (Student Pharmacist)  SECTION V  I certify that  I certify t	S.L.T. Institute of Pharity! Sciences	STORE SECTION
The sharmon   Sinka   accept	Bilaspur (C.G.)	
(Name of the Student Pharmacist) of Mo. Madurate  (Name of the Apprentice Master) (Name of the Institution) Cont. Medical College Hope of (Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training.  (Student Pharmacist)  SECTION III  1. Pro. Medical College Hope of (Student Pharmacist)  SECTION V  I certify that  Dikes howe of student pharmacist in SECTION III  1. Pro. Medical College Hope of the Student pharmacist in SECTION V  I certify that  Dikes howe of student pharmacist in SECTION V  I certify that  Dikes howe of student pharmacist in SECTION V  I certify that  Dikes howe of student pharmacist in SECTION V  I certify that  Dikes howe of student pharmacist in SECTION V  I certify that  Dikes howe of student pharmacist in SECTION V  I certify that  Dikes howe of student pharmacist in SECTION VIII  Pharmacy Council of the Education Regulations framed ursection 10 of the Pharmacy Act 1948 He had his practical training in an Institution appreved the Pharmacy Council of India.  Date: IN THE  S.L.T. Institute of Pharm. Scient Guru Ghasidas Vishwavidyalay Bilaspur (C.G.)	and it.	
(Name of the Apprentice Master) (Name of the Institution) Cord Medical College Head (Allege Head)  (Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training (Student Pharmacist)  SECTION III  1. M. Malburning Shu, accept (Name of the Apprentice Master)  2. Pharmacy and (Name of the Apprentice Master)  3. Sa (Name of the Student pharmacist)  Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and  2. Practical experience in —  has undergone 720 hours training spread comounts in accordance with the details enumerated in SECTION III  (Head of the Oreanisstical Pharmacy in the Completed in all respect his practical training under regulation 20 of the Education Regulations framed unsection 10 of the Pharmacy Act, 1948. He had his practical training in an Institution appreved the Pharmacy; and  (Head of the Academic Institute Pharmacy Council of India)  Output  (Head of the Academic Institute of Pharm. Scient Guru Ghasidas Vishwavidyala) Bilaspur (C.G.)	(Name of the Student Pharmacist)	has
(Head of the Organisation  (Name of the Education of the Indiana)  (Name of the Apprentice Master)  as a (Name of the Education Regulations framed to the Indiana)  (Name of the Apprentice Master)  as a (Name of the Education Regulations framed to the Indiana)  (Name of the Apprentice Indiana)  (Name of the Apprentice Indiana)  (Name of the Education Regulations framed to the Indiana)  (Name of the Education Regulations framed to the Indiana)  (Name of the Education Regulations framed to the Indiana)  (Name of the Apprentice Indiana)  (Name of the Education Regulations framed to the Indiana)  (Name of the Education Regulations framed to the Indiana)  (Name of th	_Seku	has undergone _ 720 hours training spread color
(Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training.  (Student Pharmacist)  SECTION V  I certify that  I certify that  I certify that  Diksh kunar  Iname of the Apprentice Master)  Trainee and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire:  Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and  Practical experience in —  (Head of the Organisation Pharmacy in the Pharmacy of the Student pharmacist)  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution appreved the Pharmacy Council of India.  Date: [VIII]  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution appreved the Pharmacy; and  (Head of the Aadomic Institution appreved the Pharmacy Council of India.  Date: [VIII]	Institution) Port Medical Callege Hospital	enumerated in SECTION III
(Student Pharmacist)  SECTION V  Legy Maddynida Subu, accept (Name of the Apprentice Master)  Dikesh kuman Simba as a (Name of the student pharmacist) trainee and I agree to give him ther training facilities in my organisation so that during his their training he the may acquire:  Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and  Practical experience in—  SECTION V  I certify that  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution appreved the Pharmacy Council of India.  Date: 1919  Section V  I certify that  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Council of India.  Date: 1919  Section V  I certify that  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Council of India.  Date: 1919  Section V  I certify that  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Council of India.  Date: 1919  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Council of India.  Date: 1919  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Council of India.  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Council of India.  Completed in all respect his practical training under regulation 20 of the Education Regulations framed us section 10 of the Pharmacy Council of the Pharmacy Council of India.	(Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him	(Head of the Organisation o
SECTION V  I certify that  I c	Tesiula	शासकीय यहिनाक राजा संस्कृतिक प्राचनाक है
(Name of the Apprentice Master)  Dikesh kumar Simba as a (Name of the student pharmacist) trainee and I agree to give him ther training facilities in my organisation so that during his their training he the may acquire:  Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and  Practical experience in —  Dikesh kumar (Name of student pharmacy (Name of student pharmacy: completed in all respect his practical training under regulation 20 of the Education Regulations framed under regulation 20 of the Pharmacy Act, 1948. He had his practical training in an Institution approved the Pharmacy Council of India.  Date: 1119111  (Head of the Atadomic Institution approved the St. I. Institute of Pharm. Scient Guru Ghasidas Vishwavidyala) Bilaspur (C.G.)	(Student Phannacist)	
(Name of the Apprentice Master)  as a (Name of the student pharmacist) trainee and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire:  1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and 2. Practical experience in —  (Name of the Apprentice Master)  as a (Name of the Apprentice Master)  as a (Name of the Apprentice Institute of Pharmacy Act, 1948. He had his practical training in an Institution appreved the Pharmacy Council of India.  Date: 1217.  (Head of the Academic Institute of Pharm. Scient Guru Ghasidas Vishwavidyala)  Bilaspur (C.G.)		Dikesh Kumar
Name of the student pharmacist) trainee and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire:  1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and 2. Practical experience in —  Date: 121711  (Head of the Aladomic Institute of Pharm, Scient Guru Ghasidas Vishwavidyala) Bilaspur (C.G.)	(Name of the Assessing Market	has (Name of student pharmac; ste
my organisation so that during his /her training he /she may acquire:    Working knowledge of keeping of records required   by the various Acts affecting the profession of pharmacy; and   Practical experience in     Pharmacy Council of India.     Date: 127421   Date: 127421     Charter of Pharm Scient Guru Ghasidas Vishwavidyalay Bilaspur (C.G.)	Di kesh kumar Sinka as a (Name of the student pharmacist)	regulation 20 of the Education Regulations framed up to
by the various Acts affecting the profession of pharmacy; and  2. Practical experience in —  (Head of the Anadomic Institute of Pharm. Scient Guru Ghasidas Vishwavidyalay Bilaspur (C.G.)	my organisation so that during his Aser training he /she	practical training in an Institution approved the
2. Practical experience in —  (Head of the Adadonic Institute  HEAD  S.L.T. Institute of Pharm. Scient  Guru Ghasidas Vishwavidyalay  Bilaspur (C.G.)	by the various Acts affecting the profession of	Date: 12107/21 Cangula
S.L.T. Institute of Pharm. Scient Guru Ghasidas Vishwavidyalay Bilaspur (C.G.)	2. Practical experience in -	
2 Herry Thomas	ATTEN PORT	Guru Ghasidas Vishwavidyalaya,
	2 Stell?" thesinly	
12/12/21	12/07/21	

# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

RECLION 1

This form has been issued FARHAN	(a) the manipulation of pharmaceutical apparatus in
A Local Issued FARHAM	common use;
AKHTAR	. (b) the reading, translation and copying of prescriptions
Name of student pharmacist)	including the checking of doses;
TOTAL OF TOTAL	(c) the dispensing of prescriptions illustrating the
KUSHINAGAR (U.P.) who has produced	commoner methods of administering medicaments;
evidence before me that ( ) who has produced	and
Practical Training	(d) the storage of drugs and medicinal preparations.
training as set out in the Education	
grantons trained under section (To of the Pharmacae	सुनील मेडिकल & जनरल स्टी
Act, 1948.	I also agree that a Registered Pharmage shall की हो, बोदरी रोट assigned for his /her guidance.
1 1 1 1	assigned for his ther guidance. चक्रप्रभाता, जिला-बिलासपुर (छ.ग.)
Date: 30 09 2020 The Head of Mary College	(400
Conta	(Name & address of the Institution)
HEAD Institution	
S.L.T. Institute of Phlum. Sciences	, Reg-No- 12634
Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)	SECTION IV
Farhau Atchtag	Linux, a
	I certify that fallon Akutal
(Name of the Student Pharmacist)	- Toward Afrancia
The Maria Andreas	has
(Name of the Apprentice Master) (Name of the	
(Name of the Apprentice Master) (Name of the	hours training spread et er
STATE OF THE PERSON OF THE PER	chumerated in SECTION III Gold The de de Grand to
Sunil Medical and General Store (Hospital or Pharmacy) as my Appendix	सब्जी मार्केट के पीछे, बोदरी रे.५,
(Hisspital or Pharmacu) and General Store	
(Ficspital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him	चकरभाठा, जिला-बिलासपुर (छ.ग.
ther during the entire period of my training.	(Head of the Gentles of of our
the period of my training.	Pharmaceutica Philision
6 AKINEUR	Reg-No- 12634
(Stildent Pharmacist)	SECTION V 20 64-021-35090
Secretary Control of the Control of	21 27 22 2 20 4 8
SHOTION III	1 certify that. 21 CM-821-35091
Val	- Fachan Akutaa
i. Synt   Kymar accept	Thank Hentag
Fash are Of the Apprentice Master)	has
Farhan Akhtas	completed in all respect his practical student pharmacists
(Name of the Apprentice Master)  as a  (Name of the student pharmacist)  trainee and I agree to give him ther training facilities in	regulation 20 of the Education Regulations framed up der section 10 of the Pharmacy Act, 1948 No. 1
trainee and I agree to give him ther training facilities in	
my organisation so that during his ther training beautiful in	section 10 of the Pharmacy Act, 1948.He had his
may acquire: —	Pharmacy Council of India.
W 200 200 In 19	W / W
1. Working knowledge of keeping of records required	Date: 8/01/2021
and the state of t	E   01   2001
Stranger and the second	- San Falle
Practical experience in =	tean
	(Head of the Academy Sciences S.L.T. Institute of Vishwayidyalaya.
3	T Institute of Fishwayldyalaya.
दी मुल प्राप्त प्रति प्र दी. Alcutar 08/01/2021	S.L.T. Institute of Pharma Science.  S.L.T. Institute of Pharma Science.  Suru Ghasidas Vishwavidyaloya.  Guru Ghasidas Vishwavidyaloya.  Bilaspur (C.G.)
	Guin Billashar A
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00/01/2000	

# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS



SECTIONA

C. 0.0	
CHATURVED I  (Name of student pharmacist)  PONDI URORA KORBA who has produced who has produced before me that he/she is entitled to receive the pharmacy of the Pharmacy of the Pharmacy Act. 1948.  The Head-of-thy Abademic Trainfle Ability ingliences S.L.T. Institute of Pharmacy Guru Ghasidas Vishwavidyalaya.  Guru Ghasidas Vishwavidyalaya.  (Name of the Student Pharmacist)  RAJIV KUMAR YADAV STORE of KEPPER PHARMAC COMMENT (CARH INCTITUTE OF MEDICAL COMMENTS)  CIENCE (CIMS) BILASPIR (C.G.)  (Student Pharmacist)  LOARDA de raining and agree to obey and respect him ther during the entire period of my training.  (Student Pharmacist)	I certify that  COARIMA CHATURVEDI  has  (Name of student pharmacists
NECTOR CONTRACTOR OF THE PROPERTY OF THE PROPE	SECTION V
STON III	I certify that.
RATIV KUMAR YADAV accept	GARIMA CHATORVEDI
(Name of the Apprentice Master) as a (Name of the student phannacist) trainer and I agree to give him ther training facilities in they organisation so that during his ther training he take they ocquire.  Working knowledge of keeping of records required by the various Acts affecting the profession of Practical experience in —	(Name of student pharmac, staregulation 20 of the Education Regulations framed up described training under section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution approved the Pharmacy Council of India.  Date: MIDIA  (Head of the Marmacy Council of India.  (Head of the Marmacy Council of India.
	Guru Ghashas pur (C.G.)

### PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

### SECTION I

This form has been issued Chansham	<ul> <li>(a) the manipulation of pharmaceutical apparatus in common use;</li> </ul>		
- Patel	<ul> <li>(b) the reading, translation and copying of prescription including the checking of doses;</li> </ul>		
(Name of student pharmacist) son of /daughter of Dhowircon Dote residing at  Villago Tilago Raigosh who has produced evidence before me that he/she is entitled to receive the Practical Training as set out in the Education Regulations framed under section in or the Pharmacy Act, 1948.  Date: 20/10/2020 The Head HEAD codemic	(c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and (d) the storage of drugs and medicinal preparations.  I also agree that a Registered Pharmacist shall be assigned for his /her guidance.		
S.L.T. Institute of Pharma Solution  Guru Ghasidas Vishwavidyalaya,	Store Keeper (Pharmacist		
Bilaspur (C.G.)	SECTION IV Pegno - CCIPC - 92.90		
1 Celranshyan Patel accept (Name of the Student Pharmacist)	Chansyan patel		
(Name of the Apprentice Master) (Name of the Institution) Chhattes Jark Institute of Medical Sciences (Coms) Beles pur (15) (Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training.	has undergone f 20 hours training spread ever months in accordance with the details enumerated in SECTION III  (Head of the Organisation or Pharmaceutical Division)		
(Student Hannacist)	SECTION V Medical Superintendent C.I.M.S., Bilaspur (C.G.)		
1. Lagiv Kumar Jalau  1. Lagiv Kumar Jalau  (Name of the Apprentice Master)  Ghahshyam Pafel as a  (Name of the student pharmacist)  trainee and I agree to give him ther training facilities in my organisation so that during his ther training he the may acquire:—	(Name of student pharmac:sts completed in all respect his practical training under regulation 20 of the Education Regulations framed u: de section 10 of the Pharmacy Act, 1948.He had his practical training in an Institution approved the Pharmacy Council of India.		
<ol> <li>Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and</li> <li>Practical experience in –</li> </ol>	Date:  OR 23. 86.21  HEAD  Stilled of the stilled o		
	Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)		

PRACTICAL TRAINING CONTRAC	CT FORM FOR PHARMACISTS
SECTION I	
This form has been issued GOVERDHAN	<ul> <li>(a) the manipulation of pharmaceutical apparatus in common use;</li> </ul>
OHHU	<ul> <li>(b) the reading, translation and copying of prescriptions including the checking of doses;</li> </ul>
(Name of student pharmacist) son of /daughter of RALRH ADRA SAHIJesiding at	(c) the dispensing of prescriptions illustrating the
MUNGELT C.G. who has produced	commoner methods of administering medicaments; and
evidence before me that he/she is entitled to receive the	(d) the storage of drugs and medicinal preparations.
Practical Training as set out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.	I also agree that a Registered Pharmacist shall be assigned for his ther guidance.
0///	(Apprentice Master)
Date: 26 (1720 The Head of Bademic Sciences	(Name & address of the Institution)
Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)	, Store Keeper (Pharmacie*)
SECTION II	SECTION IV
1. Goverdhen Sehr nocepi na	1 certify that Goverdhan Saher.
(Name of the Student Pharmacist)	has
- Rapv Kumar Yadav or Store Kreper Phan	(Name of student pharmae sts)
<u>U. J U</u>	has undergone - 120 hours training spread ever months in accordance with the details
(Name of the Apprentice Master). (Name of the Institution) Chalfisperh Invit of Medical	enumerated in SECTION III
Sciences (ans) Bilesper (64)	
(Hospital or Pharmacy) as my Apprentice Master for	(Head of the Organisation of
the above training and agree to obey and pespect him	
/her during the entire period of my training	Medical Superintendent
(Student Pharmacist)	C.I.M.S., Bliaspur (C.G.)
(Stock I hattacist)	SECTION V
SECTION III	1 certify that Cloverdhan Saha
1. Rajiv Kennez Jadav (Name of the Apprentice Master)	(Name of student pharmac sta
Govardhen Schu as a	completed in all respect his practical training under
<ul> <li>(Name of the student pharmacist)</li> </ul>	regulation 20 of the Education Regulations framed up de
trainee and I agree to give him /her training facilities in	practical training in an Institution approved the
my organisation so that during his /her training he /she may acquire: —	Pharmacy Council of India.

1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and

2. Practical experience in -

S.C.T. Institute of Rhadn. Sciences

CHELEBRANG AVISEMBY MARRIAGE BILLIANDER (C.G.)



### PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

(a) the manipulation of pharmaceutical apparatus in

(b) the reading, translation and copying of prescriptions

Scanned with Oken Scanner

common use;

SECTION I

This form has been issued Hennay Staha

Binha.

son of /daughter of Chandra Mand residing at	(c) the dispensing of prescriptions illustrating the
Linkant Part Charolaho has produced	commoner methods of administering medicaments;
evidence before me that he/she is entitled to receive the	and .
Practical Training as set out in the Edukation	(d) the storage of drugs and medicinal preparations.
Regulations framed under section look the Pharmacy	I also agree that a Registered Pharmacist shall be
Act, 1948.	assigned for his /her guidance.
M) offi	- H
Date: 12/16/20 The Head of the Academic	Pag. No. 7136 (APPISHIPPACIEST)
THEADystitution	(Name & adds TORE SECTION
, S L.T. Institute of Pharm. Sciences	GMCH RAJNANDGAON (C
The state of the s	(A)
Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)	SECTION IV
	I certify that
1 Hemral Sinha. accept	Hemrajsinha
(Name of the Student Pharmacist)	hits
of mas Machinity	(Name of student pharmae:sts:
Sahr _	has undergone 420 hours training spread ever
(Name of the Apprentice Master) (Name of the	
Institution) Crowd- medical college Hospital	chumerated in SECTION III
Roynomdigaen (City)	- Hazaro
(Hospital or Pharmacy) as my Apprentice Master for	Wand of the a 29
the above training and agree to obey and respect him	(Head of the Organisation or Pharmocentics Division)
/her during the entire period of my training.	शासकीय मेडिकल कालेज
(Student Phanmacist)	संग्रह भिक्तिसम्बद्धाः स्वयंत्रास्थाः (१४)
(crissin i milliotat)	SECTION V
	Landing to
SECTION III	I certify that
1, mg. Masthy mites Sale accept	Hemra Sinha
Hemra Sinka, as a	(Name of student pharmac; sta
temmal dinha, as a	completed in all respect his practical training under regulation 20 of the Education Regulations framed up de-
(Name of the student pharmacist)	section 10 of the Pharmacy Act, 1948.He had his
trainee and I agree to give him /her training facilities in my organisation so that during his /her training he /she	practical training in an Institution appropriet the
may acquire: —	Pharmacy Council of India
20 00	= manning (\)
<ol> <li>Working knowledge of keeping of records required</li> </ol>	Date: 12107/21
by the various Acts affecting the profession of	angun
pharmacy; and	01-1:01/1-11
Practical experience in —	(Head of the ADnic Institution
	S.L.T. Institute of Pharm. Sciences Guru Ghasidas Vishwavidyalaya.
	Guru Ghasidas Visitwasidyas Bilaspur (C.G.)
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# PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

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55	(a) the manipulation of pharmaceutical apparatus to
This form has been issued HIMANSHU	common use;
DEV KULDEEP	(b) the reading, translation and copying of prescriptions
(Name of student pharmacist)	including the checking of doses;
(Name of Student phartition at	(c) the dispensing of prescriptions illustrating the
son of /daughter of DEV DAS KULDEEPresiding at	commoner methods of administering medicaments;
SEMIRALI KORBA who has produced	and
evidence before me that he/she is entitled to receive the	(d) the storage of drugs and medicinal preparations.
Practical Training as set out to the Education	D. J. J. M. Warner let shall be
Regulations framed under section 10 of the Pharmacy	I also agree that a Registered Pharmacist shall be
	assigned for his /her guidance.
Act, 1948.	Take The Mile.
Date: 01 10 2020 The Head of Pharm Sciences S.LT. Institute of Pharm Sciences Guru Ghasidas Visiewasidyalaya.	2.00 - 17-07 (Apprentice distance)  (Name of the histitution)  SECTION IV
S.L.T. Institute of Priarry, Sciences	(Name States and a manual sur
Guru Ghasidas Visiewaeidyaleya.	THE WILL
Bilaspur (C.G.)	· V
()	SECTIONIV
SECTION II	
I . Himanshy Dev Kuldeep accept	Himanshy Dev Kuldeep
1 Minnowed Des reducers accept	Himanshy Dev Kulderp
(Name of the Student Pharmacist)	Name and the second sec
P.harmacy Depart ment of Crushy Chasi-	(Name of student pharmacists)
due university Bilespur CCs.	has undergone 750 hours training spread or or months in accordance with the details
(Name of the Apprentice Master) (Name of the	
Institution) Rahy Kothani	enumerated in SECTION III
Kothan medical	
(Hospital or Pharmacy) as my Apprentice Master for	my color and
the above training and agree to obey and respect him	(Head of the Organisated of
/her during the entire period of my training.	Pharmaceutical Division
15 Xolda V	क्षारा वार वार वार
(Student Pharmacist)	SECTION V
	SECTION V
	I certify that
SECTION III	recently that
	has
1, Rahul Kothani accept	The state of the s
(Name of the Apprentice Master)	(Name of student pharmac: sts completed in all respect his practical training under
Himonshy Dev Kuldrep asa	regulation 20 of the Education Paratterior 6
<ul> <li>(Name of the student pharmacist)</li> </ul>	regulation 20 of the Education Regulations framed up de
traince and I agree to give him /her training facilities in	section 10 of the Pharmacy Act, 1948.He had his
my organisation so that during his /her training he /she	practical training in an Institution approved the Pharmacy Council of India.
may acquire: —	rearriacy Council of India.
	Date: 1/
<ol> <li>Working knowledge of keeping of records required</li> </ol>	Date:
by the various Acts affecting the profession of	X
pharmacy; and	HEAD
2. Practical experience in -	S.L. XI keeth of and West Emile Till Mu-10
on the same of the control of the same of	Gura Chasidas Vishwavidyalaya.
	Bitaggur (G.G.)
Quit a	

[See regulations 21 (1)]

### PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION I

This form has been issued HITESH KUMAR

(Name of student pharmacist)

BANDHVARHATHA KORRA who has produced evidence before me that he/she is entitled to receive the Practical Training as set out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.

Date: 08/10/2020

The Head of the Agademic

S.L.T. Institute of Pharm. Sciences Gun Ghasidas Vishwavidyalaya. Bilaspur (C.G.)

SECTION II

I HITESH KUMAR

accept

(Name of the Student Pharmacist)

URMILA TIWARI
(Name of the Apprentice Master) (Name of the

Institution) CHHAYA MEDICAL STORE

(Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training

(Student Pharmacist)

SECTION III

. URMILATIWARI accept

(Name of the Apprentice Master)

HITESH KUMAR

85 B

(Name of the student pharmacist) trainee and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire: —

- Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- 2. Practical experience in -

 (a) the manipulation of pharmaceutical apparatus in common use;

 (b) the reading, translation and copying of prescriptions including the checking of doses;

(c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and

(d) the storage of drugs and medicinal preparations.

I also agree that a Registered Pharmacist shall be assigned for his /her guidance.

Reg. No. - 2128

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SECTION IV

I certify that HETESH KUMAR

· has

(Name of student pharmac; sts-

has undergone 520 hours training spread coor Three months in accordance with the details enumerated in SECTION III

Reg No - 21.28 **di. Bizii di Sapri** Reg No - 21.28 **di. Bizii di Sapri** Panisalio di

जिला - कोरसा कोम: 250571

SECTION V

I certify that

HITESH KUMAR

has

(Name of student pharmacists completed in all respect his practical training under regulation 20 of the Education Regulations framed up desceion 10 of the Pharmacy Act. 1948. He had his practical training in an Institution approved the Pharmacy Council of India.

Date: 01/02/21

S.t.H.dostitute et Bharm Sciences. Guru Ghasidas Vishwaw,dyalaya, Bilaspur (C.G.)

## [See regulations 21 (1)]

SECTION 1	RACT FORM FOR PHARMACISTS
(Name of student pharmacist) son of /daughter of D. 5. Manikows) residing at  Line bilasows who has produced evidence before me that he/she is entitled to receive the Practical Training as set out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.	<ul> <li>(a) the manipulation of pharmaceutical apparatus in common use;</li> <li>(b) the reading, translation and copying of prescriptions including the checking of doses;</li> <li>(c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and</li> <li>(d) the storage of drugs and medicinal preparations.</li> <li>I also agree that a Registered Pharmacist shall be assigned for his /her guidance.</li> </ul>
The Head of the Administration  The Head of the Administration  S.L.T. Institute of Pharm. Science Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)	Store !Gener (Pharmacit
Rajiv Kuman Jadav Store Keopon phone (Name of the Student Pharmacist)  (Name of the Student Pharmacist)  (Name of the Apprentice Master) (Name of the Institution) Chlash sand bruth of medical scie  (Chas) Bulas pur (CS)	has windergone 7 20 hours training spread of est
the above training and agree to obey and respect him ther during the entire period of my training.  (Student Pharmacist)	(Head of the Organisation of Pharmaceutical Division)  Medical Superintendent C.I.M.S., Bilaspur (C.G.)
I, Rajiv Ya Lav accept  [Name of the Apprentice Master)  Kaser Menuk Pune as a  (Name of the student pharmacist)  trainec and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire:	Name of student pharmacists completed in all respect his practical training under regulation 20 of the Education Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution approved the Pharmacy Council of India.

1. Working knowledge of keeping of records required by the various Acts affecting the profession of

pharmacy; and 2. Practical experience in - S.L.T. Institute of Pharm. Sciences SHna6hashtas visking oibyalayapi

Bilaspur (C.G.)

### PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

### SECTIONI

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 (a) the manipulation of pharmaceutical apparatus in common use;

 (b) the reading, translation and copying of prescriptions including the checking of doses;

 (c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments;
 and

(d) the storage of drugs and medicinal preparations.

I also agree that a Registered Pharmacist shall be assigned for his /her guidance.

(Name & address of the Institution)

SECTION IV

has undergone SOO hours training spread coor hours training spread coor hours training spread coor senumerated in SECTION III

HIC. Hiller District Ricespur (C. C. of Pharmaceutical Division)

SECTION V

l certify that them led has
(Name of student pharmacists

completed in all respect his practical training under regulation 20 of the Education Regulations framed ur der section 10 of the Pharmacy Act, 1948.He had his practical training in an Institution approved the Pharmacy Council of India.

Date: 23 621

(Head of dig Andemic Institution S.L.T. Institute of Pharm. Sciences Guru Ghasidas Vishwavidyalaya, Bliaspur (C.G.)

### PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION I	
This form has bee	m issued Klylesh
Kumar	San
	(Name of student pharmacist)
son of /daughter of	Arun Kumar San residing at
Badehardi, puron	Raigarh(tarho has produced that he/she is entitled to receive the
Practical Training	as set out in the Education
Regulations framed	under section to of the Pharmacy
Act, 1948.	[(1)]
Date: 29/09/2	The Head of the Academic
0	The property of the state of th
J (35)	S.L.T. Institute of Pharm. Science
SECTION II	Guru Ghasidas Vishwavidyalaya Bilaspur (C.G.)
1. Khiles	h Kuman Sea accept
	(Name of the Student Pharmacist)
Wyay Shar	okan Patelof Phannalist
(Name of the App	rentice Master) (Name of the
Institution) V/ja	y Medical Raignahles
(Hospital or Pl	narmacy) as my Apprentice Master for
the above training	and agree to obey and respect him
/her during the ent	ire-period of my training.
	00
(A)	(Student Phannacist)
-03	8 N 67%
SECTION III	# 10 mm
, Vijay S	shankan Patel
1. 0 /	accept

(Name of the student pharmacist) traince and I agree to give him ther training facilities in my organisation so that during his /her training he /she may acquire: - Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and 2. Practical experience in -दी मुल जत जाप

(a)	the manipulation of pharmaceutical apparatus in
	common use;
(b)	the reading, translation and copying of prescriptions
	including the checking of doses:

(c) the dispensing of prescriptions illustrating the commoner methods of administering medicaments;

(d) the storage of drugs and medicinal preparations.

I also agree that a Registered Pharmacist shall be assigned for his ther guidance.

propertie Institution

Vijay Medical Raigarh Regd.No.-11492

I certify that

(Name of student phannacists) has undergone 720 hours training spread coer months in accordance with the details enumerated in SECTION III

Raigarh

SECTION V

SECTION IV

Regd No.-11492

I certify that

(Name of student pharmac sts completed in all respect his practical training under regulation 20 of the Education Regulations framed up desection 10 of the Pharmacy Act, 1948.He had his practical training in an Institution approved the Pharmacy Council of India.

Date:

(Head of the Apmie Inches or S.L.T. Institute of Pharm, Sciences Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)