APPENDIX -E

[See regulations 21 (1)]

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION I			
			(a) th

(Name of student pharmacist) son of Idaughter of Nhoon 1 Ram residing at Vill-Gochhiga, Kacleandharho 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 of the Pharmacy Act, 1948.

This form has been issued Koshulall

Date: 24/08/21

The Head of the Academic

Training Institution

S.L.T. Institute of Pharm. Sciences S.L.I. Institute of Filaday idyalaya SECTION IV Bilaspur (C.G.)

SECTION II

1 KESHWAR

Name of the Student Pharmacist) DR. DEEPAK AGRAWAL OF PHARMACY

(Name of the Apprentice Master). (Name of the Institution) PRARHA MOSPITAL BSP

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

(Student Pharmacist)

SECTION III

I, DR. DEEPAK AGIRAWAL accept KESHINAKI (Name of the Apprentice Master)

(Name of the student pharmacist)

traince 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 -

e 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 /her guidance.

> PRADphenice Masterle (Nanole States of the Bretten Pro. C.)
>
> Dr. Deepak Acrawal
>
> M.B.B.S., D.Onno.

I certify that KESHWARZ

(Name of student pharmacists)

has undergone . 240 hours training spread or or months in accordance with the details THREE enumerated in SECTION III

> (Head of the Organisares of Pharmaceurical Division) Old Sarkanda, Bilasour (C.O.) Or Deepak Agrawal M.B.B.S., D. Ortho.

SECTION V

I certify that

(Name of student pharmacists "

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

Date: 29-11-21

Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)

हो मूलपरती प्राप्त किया।

kesheeaee

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GURU GHASIDAS VISHWAVIDYALAYA, BILASPUR (C.G.) INDIA (A Central University Established by the Central Universities Act. 2009 No. 25 of 2009) गुरू घासीदास विश्वविद्यालय, बिलासपुर (छ.ग.) भारत

(केन्द्रीय विश्वविद्यालय अधिनियम २००१ क्रमांक २५ के अंतर्गत स्थापित केन्द्रीय विश्वविद्यालय)

STATEMENT OF MARKS

SESSION: 2020-2021

MAY 2021

Diploma in Pharmacy

YEAR-II

NAME: Ms. KESHWARI

ROLL NO: 19008820

F/H NAME: Mr. DHOONI RAM

ENROLL NO: GGV/19/6273

M'S NAME: Mrs. GIRIJA

REGULAR

SCHOOL OF STUDIES OF NATURAL RESOURCES

SLT INSTT. OF PHARMACEUTICAL SCIENCES G.G.V.V, BILASPUR

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