

[See regulations 21 (1)]

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION I

This form has been issued SHALINI SINGH MARKO
 (Name of student pharmacist)
 son of /daughter of SHATRUGHAN SINGH residing at Akallana Jangia-chumra 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: 28/08/21

[Signature]
 The Head of the Academic Sciences
 S.L.T. Institute of Pharm. Sciences
 Guru Ghasidas Vishwavidyalaya,
 Bilaspur (C.G.)

- (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.

[Signature]
 (Apprentice Master)
 (Name & address of the Institution)
Regn - 927

SECTION II

I, SHALINI SINGH MARKO accept
 (Name of the Student Pharmacist)
Sunil Singh Thakur of
 (Name of the Apprentice Master) (Name of the Institution) Guru Ghasidas Vishwavidyalaya
 (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.
[Signature]
 (Student Pharmacist)

SECTION IV

I certify that Shalini Singh Marko has
 (Name of student pharmacist)
 has undergone 500 hours training spread over 3 months in accordance with the details enumerated in SECTION III

[Signature]
 (Head of the Organisation or Pharmaceutical Division)
Civil Surgeon Cum Chief Hosp. Superintendent
 S.P. Hospital, Bilaspur (C.G.)

SECTION III

I, Sunil Kumar Singh accept
 (Name of the Apprentice Master)
Shalini Singh Marko 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 —

SECTION V

I certify that Shalini Singh Marko has
 (Name of student pharmacist)
 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.

Date:

[Signature]
 (Head of the Academic Institution)
HEAD
 S.L.T. Institute of Pharm. Sciences
 Guru Ghasidas Vishwavidyalaya,
 Bilaspur (C.G.)

दो मूल प्रति प्राप्त किया

[Signature]
 11/01/22



GURU GHASIDAS VISHWAVIDYALAYA, BILASPUR (C.G.) INDIA

(A Central University Established by the Central Universities Act, 2009 No. 25 of 2009)

गुरु घासीदास विश्वविद्यालय, बिलासपुर (छ.ग.) भारत

(केन्द्रीय विश्वविद्यालय अधिनियम २००९ क्रमांक २५ के अंतर्गत स्थापित केन्द्रीय विश्वविद्यालय)

STATEMENT OF MARKS

SESSION : 2020-2021

Diploma in Pharmacy

NAME : Ms. SHALINI SINGH MARKO

F/H NAME : Mr. SHATRUHAN SINGH MARKO

M'S NAME : Mrs. MITHILESH SINGH MARKO

SCHOOL OF STUDIES OF NATURAL RESOURCES

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

MAY 2021

YEAR-II

ROLL NO : 16008144

ENROLL NO : GGV/16/6174

REGULAR

COURSE NAME	SCHEME OF MARKS				MARKS OBTAINED			REMARK		
	I	II	MAX	MIN	I	II	TOTAL			
PHARMACEUTICS II	TH	20	80	100	40	18	62	80	164	D
PHARMACEUTICS II (PR)	PR	20	80	100	40	17	67	84		
PHARMACEUTICAL CHEMISTRY -II	TH	20	80	100	40	13	52	65	132	
PHARMACEUTICAL CHEMISTRY -II (PR)	PR	20	80	100	40	14	53	67		
PHARMACOLOGY AND TOXICOLOGY	TH	20	80	100	40	16	61	77	157	D
PHARMACOLOGY AND TOXICOLOGY (PR)	PR	20	80	100	40	17	63	80		
PHARMACEUTICAL JURISPRUDENCE	TH	20	80	100	40	16	64	80	80	D
DRUG STORE AND BUSSINESS MANAGEMENT	TH	20	80	100	40	17	61	78	78	D
HOSPITAL AND CLINICAL PHARMACY	TH	20	80	100	40	16	55	71	148	
HOSPITAL AND CLINICAL PHARMACY (PR)	PR	20	80	100	40	17	60	77		
								759		

YEAR:	I	II
MARKS:	562 / 1100	759 / 1000
PERCENTAGE:	51.1	75.90
RESULT: PASS FIRST CLASS		

D: DISTINCTION



07/10/2021

8610 *[Signature]*

[Signature]
Controller of Examinations

Date: