[See regulations 21 (1)]

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

ECTION

This form has been issued VIJAYLAXMI KURREY
No. of the last of
(Name of student pharmacist)
son of /daughter of PARAG KURREY residing at
Vill-Budgahan Balada Taniprochampa 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 1006 the Pharmacy
Act, 1948.
Date: 250821, The Head of the Agademic
115 40
S.L.T. Institute of Pharm. Sciences
Guru Ghasidas Vishwavidyalaya ,
Bilaspur (C.G.)
Name of the Student Pharmacist)
Rapi V Kumaz Jakavor Store Keeper
Pharmae St.
(Name of the Apprentice Master) (Name of the
Institution) Chhalfis garl Institute up redical
Sciences (1295) Be (aspur (C.G.
(i-lospital 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

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. (Name & address of the Institution) Store Keeper (Pharmacist) CIMS, Bilaspur (C.G.) SECTION IV I certify that (Name of student pharmacists; has undergone. hours training spread-over months injaccordance with the details enumerated in SECTION III (Head of the Organisation or Medical Supelifitenden C.I.M.S., Bilaspur (C.G.) SECTION V I certify that . VITAVI AXM (Name of student pharmacists

completed in all respect his practical training under regulation 20 of the Education Regulations framed ur def

section 10 of the Pharmacy Act, 1948. He had his

practical training in an Institution approved the

Pharmacy Council of India.

Date:

(a) the manipulation of pharmaceutical apparatus in

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

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 Guru Ghasidas Vishwavidyalaya, Bilaspur (C.G.)



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 २००१ क्रमांक २५ के अंतर्गत स्थापित केन्द्रीय विश्वविद्यालय)

STATEMENT OF MARKS

SESSION: 2020-2021

Diploma in Pharmacy

NAME: Ms. VIJAY LAXMI KURREY F/H NAME: Mr. PARAG KURREY

M'S NAME : Mrs. SHANTI DEVI

SCHOOL OF STUDIES OF NATURAL RESOURCES SLT INSTT. OF PHARMACEUTICAL SCIENCES G.G.V.V, BILASPUR **MAY 2021**

YEAR-II

ROLL NO: 19008866

ENROLL NO: GGV/19/6377

REGULAR

	MARKS			OBTAINED				
COURSE NAME				MIN	1 11	TOTAL	SUB TOTAL	REMARK
PHARMACEUTICS II	TH 2	20 80	100	40	19 58	77	162	D
PHARMACEUTICS II (PR)	PR 2			40	18 67	85		
PHARMACEUTICAL CHEMISTRY -II	TH 2	20 80	100	40	16 61	77	156	D
PHARMACEUTICAL CHEMISTRY -II (PR)	PR 2	20 80	100	40	17 62	79		
PHARMACOLOGY AND TOXICOLOGY	TH 2	20 80	100	40	19 66	85	167	D
PHARMACOLOGY AND TOXICOLOGY (PR)	PR :	20 80	100	40	18 64			
PHARMACEUTICAL JURISPRUDENCE	TH :	20 80	100	40	17 49	66	66	
DRUG STORE AND BUSSINESS MANAGEMENT	TH :	20 80	100		18 64	82	82	D
HOSPITAL AND CLINICAL PHARMACY	TH :	20 80	100	40	17 54	71	144	
HOSPITAL AND CLINICAL PHARMACY (PR)	PR :	20 80	100	40	16 57	73		

777

YEAR:

MARKS:

PERCENTAGE:

825 / 1100

75.00

11

777 / 1000

77.70

RESULT: PASS FIRST CLASS

D': DISTINCTION

07/10/2021

8680 (mai) &

Controller of Examinations