

والمانية المانية الما

During the period of her/his internship program with us , she/he had been Exposed to different processes and was found hardworking and diligent.

We wish her / him every success in her/his life and career.

Authorised Signature

71 4 acres

Stamp

Jaswal frout Pish ramm

V.P.O. Shanen, Teh. Joginder Nagar

Diett. Mandi (H.P.)

Ph. 01908-222659 Mob. 94:3000000

TO WHOM IT MAY CONCERN

CERTIFIED THAT (MS. /MR. /MRS.). Denial D/O St. Hork Kuras. STUDKINT OF St. (trus). Specialities HAS SUCCESSFULLY COMPLETED TEN DAYS AGRO INDUSTRIAL TRAINING IN THE FIELD OF Mustragent FROM Lift. TO LOLL UNDER GUIDANCE OF 19100 LA MIC

DURING THE PERIOD OF HER HIS INTERNISHIP PROGRAM WITH US, SHE THE HAD BEEN EXPOSED TO DIFFERENT PROCESSES AND WAS FOUND HARDWORKING AND DILIGENT

WE WISH HER / HIM EVERY SUCCESS IN HER/HIS LIFE AND CAREER.

AUTHORISED. SIGNATURE

Paron front

ABHILASHI UNIVERSITY

School of Agriculture RAWE Program

l.	Village: Kotli Po	Prakash Biz		ghnoth	Age: 47 year
	No of family members:	Male	female	children 2	
	Phone: 9418+25692				

2. Land holding

SI No	Type of land	Area(acres)				
531 1102		Irrigated	Un-irrigated	Total	Source of irrigation	
- 1	Owned	-		~	- In the second	
2	Leased in			-	-	
3	Leased out	-	-	_		
4	Area under field crop	-	-	_	_	
5	Area under fruit crops		-	-	-	
6	Area under vegetable crops	9 कारनाल	7 60	o do	नाम किर्दर्भ	
7	Other	1 12 16	-	-	5300	
	Total	-		-	-	

3. Farm machineries and equipment

Sr.No	Item	No's	Purchase value (Rs)	Year of purchase	Remaining life
1	Bullock cart	-	The second second		-
2	Cultivator	1	75000 1-	15/9/2020	
3	Disc plough	_	-	111111111111	-
4	Harrow	-	-		-
5	Plough	-	-	-	
6	Iron plough	-	-		
7	MB plough		-	-	_
8	Rotavator	-	-	_	
9	Seed drill	1		-	
10	Thresher	-	-	-	-
11	Tractor	1 2	-	-	
12	Trolley	-	72	-	_
13	Leveler	-	_	-	-
14	duster	-		and the second	
15	Sprayer		3000 1-	5/15/2000	
16	Others			2110/2000	

4. Cropping pattern

Name of Crop	Irrigated area/ Method of irrigation	Un-irrigated area	Total area	Yield	Price per quantal
Kharif					2010/1/2510
1 Pea	8 biswa / Handfield	-		Yoka	70-80/
2 Brinjal	10 bisua Drift Tarrentina	*-			25-30
3 Cahsicum	10 mbay Hard Hold	-		2013	Contract Con
4	SPIDNES			10 Kg	60-70
5					
Rabi					
1 Cabbase	5 Biswa / Dip	-		15 a ka	20-40
2 Cauliflower	5 bismo/Doip	-		200 kg	30-40
3 Orion	1 Hardheld	-		- 0	-
4 Potato	1/2 bismol Spankler	_		1 qua	60/Kg
5 Broccoli	Sbawa / Drip	_		1quas	20/Kg
Area under fruit Orchard	O DOWN I DANT			looks.	30/K
1					
2				-	
3					
4					

5. Which crop rotations do you follow Brinjal + Cayliflower

6. Rabi season

Potato Sm. length Production: A. Crop Variety:

Sr.no.		Quantity	Value in rupees	Time of application			
1.	Sowing	Area: 5m. long.	-	Time of sowing			
2.	Seed (Kg)			Method of sowing			
3.	Manure						
	a.) FYM(qtl)	loka.		At the finned sou			
	b.) Castor cake			- 11 100 100 20			
	c.) Vermicompost	_	-	-			
	d.) poultry manure	-	-	-			
	e.) Green manure	-		2-			
4.	Fertilizer nutrients						
	Urea	2-3 ks	50Kg116818	Swing time			
	DAP	0	2012 Juna to	The rink			
	Zinc sulphate	1		_			
	Sulphur	-	*	_			
	Gypsum	-		-			
	Other Nutrient	-	-	-			
_							
5.	Bio Fertilizer		-	-			
		8-	-	60			
6.	Total Ferti.Invest						
- 000	C1-52-5-2-2-0-W05-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0						
7.	Irrigation	No of irrigation Thouga week		Time of irrigation			
8.	Harvesting	Yield-	Gross return Net return	Time of harvesting Method of harvesting			
9.	Labour	-	Total labour charges	***			
10.	Machine charges Tillage charges Harvesting charges	-	•	-			
11.	Other Chemical Charges Pesticide Insecticide	carbendazim t mancozep	-	before sowing of			

B. Crop Cabbase Tom length Variety: Bio Someof Area: 2 m. Wight-Production:

r.no.	The State Of Contract of Contr	Quantity	Value in rupees	Time of application			
1)	Sowing	Area: 16 m · L ·	-	Time of sowing No			
2)	Seed (Kg)	4.11		Method of sowing \			
3)							
	a.) FYM(qtl)	25 KS		Lachbert 8			
	b.) Castor cake	-0	-	transplanting 8			
	c.) Vermicompost	-	-	_			
	d.) poultry manure	-	_				
	e.) Green manure	-	-				
4)	Fertilizer nutrients	and operation and					
	Urea	3 kg		Transplanting +			
	DAP	- 0	5015	Tank Fight (n)			
	Zinc sulphate	_	-				
	Sulphur	2					
	Gypsum	-	-				
	Other Nutrient	=	-				
5)	Bio Fertilizer	_					
80	- The same of the	-		_			
~	The state of the						
6)	Total Ferti,Invest						
7)	Irrigation	No of irrigation	Source of irrigation	Time of irrigation			
8)	Harvesting	Yield- T	Gross return Net return	Time of harvesting Method of harvesting			
9)	Labour	*	Total labour charges	_			
10)	Machine charges Tillage charges Harvesting charges	-	, -	-			
11)	Other Chemical Charges Pesticide Insecticide	Baistin	_	before soing h			

REPORT

On

RURAL AGRICULTURAL WORK EXPERIENCE (RAWE)PROGRAM

8

AGRO-INDUSTRIAL ATTACHMENT(AIA)

December 2021







ABHILASHI UNIVERSITY

CHAIL CHOWK, TEH. CHACHOYT, DISTT. MANDI (H.P)



Guided by:

RAWE Committee

Prepared by:

Damini

18RSABSA040

B.Sc.(Hons.)Agriculture

ACKNOWLEDGEMENT

It is my proud privilege to release the feelings of my gratitude to several persons who helped me directly or indirectly to conduct this RAWE work. I express my heartful and deep sense of gratitude to my teachers and my coordinator Dr. Kailash Sati, Mr. Khub Ram (Farm Manager), Mr. Vijay Kumar and Mr. Yograj (Co-in charge) RAWE for their guidance and inspiration in completing this work. I would also like to thank Dr. D.R. Thakur (Dean School of agriculture), Dr. A.K. Gautam (H.O.D. School of Agriculture) and all the professors for giving me support in each possible way throughout my course.

Lastly, I would like to express my special thanks to my family who have been a great inspiration in my whole life and give me endless moral support and lots of care throughout my life.

Chail Chowk Mandi December 2021

Damini

DECLARATION

We, the undersigned members of the RAWE Advisory Committee hereby declare that this report is a bonafide record of Rural Agricultural Work Experience and Agro—Industrial Attachment Programme [RAWE Component—1] completed by Damini, Student of B.Sc. (Hons.) Agriculture 7th semester, Registration No. 18RSABSA040, School of Agriculture, Abhilashi University, Chail Chowk, Mandi Himachal Pradesh, India. She has successfully completed the Project work and may be considered for final presentation of RAWE & AIA [RAWE Component—1]. Verified By RAWE.

Verified by RAWE Committee

Name	Designation	Signature	
On Ritika Singl	Assistant Professor	(Dearl)	
Dr. Rarindes	Assistant Prefessor	This	
Mx. Shirani koundal		areal.	
Er S. Tailward	Arristant Buferson	1.	

List of Symbol and Abbreviation

& and Cm centimetre m meter gm gram kg kilogram % percent DAS Day After Sowing HYV High yielding Variety

CONTENT

Sr.No.	Title	Duration	
1	General Orientation	1 week	
2	Unit attachment in Abhilashi University	5 weeks	
3	Plant Clinic	2 weeks	
4	Village Attachment (with farmer)	8 weeks	
5	Agro-Industrial Attachment	3 weeks	

RURAL AGRICULTURAL WORK EXPERIENCE

INTRODUCTION

The RAWE (Rural Agricultural Work Experience) is conducted in 7th sem 4th year. The main aim of the program is to acquaint the student with the villagers and the farming situation. So that we have practical - knowledge about agriculture. All the student are divided into 3 different groups. These group are assigned to carry out different activities under the proper guidance of Dr. Kailash Sati (RAWE In charge), Mr. Khub Ram (Farm manager), Mr. Yograj and Mr. Vijay Kumar (Coin charge of RAWE)

Objective of RAWE:

- To make student understand the rural community life and the prevailing situation.
- > To familiarize with the rural socio-economic conditions.
- To provide an opportunity to have practical training in crop production.
- To improve communication skills among the students using extension teaching methods in transfer of technology.
- To explore the high-tech agricultural technology and the factors affecting the adoption of modern methods of agriculture.
- Preparing agricultural graduates for better career in agriculture.
- Preparing Agricultural graduate oriented education to face the challenges by acquiring knowledge and skill though hands on experience.

GEOGRAPHIC DESCRIPTION OF HIMACHAL PRADESH

The state of Himachal Pradesh is spread over an area 55,637 km2 and is bordered by Jammu and Kashmir on the north, Punjab on the southwest, Haryana on the south, Uttrakhand on the southeast and Tibet on the east. Himachal is a mountainous region, rich in it's natural resources. Himachal Pradesh also known as apple state of India for large scale production of fruits. Himachal is well known for its rich flora. Forests cover about 38% of the state's area. It has a variety of wildlife too.



Agro- Climatically zone of Himanchal Pradesh divided into 4 zones

	Agro-climatic zones	Areas	Major Crops
1	Shiwalik Hill Zones (Sub Tropical Mountain and Low Hills)	Chamba, ,Kangra, Hamirpur, Solan, Sirmour and Bilaspur districts	Wheat, maize, paddy, black gram, sugarcane, mustard, potato, vegetable, pulses, barley
2	Mid Hill Zones (Sub –Humid Mid –Hills)	Chamba, Kangra, Mandi, Solan, Shimla, Sirmour, distt.	Wheat, maize, paddy, black gram, barley, beans, pulses, forages.
3	High Hill Zone (Wet Temperature, High Hill)	Chamba, Kangra, Mandi, Shimla, Sirmour and Kullu distt.	Wheat barley lesser millets,maize,rice,potato.
4	Cold Dry Zone(Dry Temperate High Hills)	Chamba, Kinnaur, entire Lahaul spiti and northern parts of Kullu distt.	Wheat, barley, rajmash.

MANDI District Map



Mandi is almost at the geographical centre of Himachal, lying along the left bank of the river Beas in the foothills of Shivalik ranges. The town has an altitude of 760 metres (2,495 ft) from the sea level. Mandi features a subtropical highland climate under the koppen climate classification. The climate of mandi is composite having hot summers and cold winters. Mandi generally experiences rainfalls during end of summer season. Mandi city falls into lower most climatic zone of the Himalayas. Soil type of mandi is non-Brown Calcic. The fruit tree cover in Mandi is about 15 percent of the total area under fruit tree cover in Himachal Pradesh. Mandi raw silk has acquired wide fame and the rock salt mines at Drang and Guma are special features of the district economy. With abundant deposit of rock salt and limestone, possibilities are being investigated for the existence of magnasite coal and china clay.

ORIENTATION PROGRAMME

Final year BSc agriculture students of the Abhilashi university (AU) participated in an orientation programme on 'rural agricultural work experience (RAWE)', organized by the AU agriculture department. During the programme, Dean of agriculture department offered suggestions to the students on farming systems, and said that the students have to work in different villages and agroindustries. Other staff also delivered their presentation on respective topics. This program lasted for a week.

1 Topic: Brief introduction about RAWE component

Faculty: Dr. D.R. Thakur

Dr. D.R. thakur (Dean of agriculture) addressed our class and gave brief description about RAWE program. He explain us about the main purpose of RAWE program and Agro industrial attachment. He gave us some idea about how to gain knowledge from the farmer, how to interact with farmer and how practical knowledge help us. Dean sir lecture was very helpful for us.



Field Visit

Faculty: Dr. Kailash Sati

We visit the field around the Abhilashi Campus, we identified some crops and discussed with sir. We visited the field of - Soybean (Glycine max), Black gram (Vigna mungo), Maize (Zea mays). 2 Topic: Watershed Management Techniques for Hill Agriculture

Faculty: Er. Shatruhan Jaiswal

Water is a basis of Agriculture and agriculture basis of life. Nature has two eyes i.e; environment and biodiversity. Five elements (panch bhootas)water, air, soil, atmosphere, fire. Global water scenario about 71% of water in Earth crust, 29% land, Water truth-wherever water is there development is certain. Rain water harvesting in hilly areas (traditional methods) kuhl (running water storage), zabo, cri, Swale, sbamboo drip irrigation.

3 Topic: Soil Health and its Indicators

Faculty: Dr. Ravinder

Soil health refers to the ability of the soil to achieve its full potential and be productive under the intended land use. Soil Physical Properties: Sand, Silt, Clay

The concept of soil quality or health imply how well soil performs its multiple functions: To serve as a medium for plant growth ît To regulate flow of water in the environment ît To act as an environmental filter ît To maintain human and animal health.

4 Topic: Hybrid seed production

Faculty: Dr. Ritika Singh

Hybrid seed production is predominant in modern agriculture. Hybrids are chosen to improve the characteristics of the resulting plants, such as better yield, greater uniformity, improved color, disease resistance. Mam also told us about some important question related breeding Topics assigned to Dr. Ritika Singh was "Hybrid Seed Production". Along with topic presentation she also taught us some important multiple choice question related to the subject. Hybrids are produced by crossing two genetically dissimilar parents. Cytoplasmic — genetic male sterility, Cytoplasmic male sterility, Genetic male sterility, Self incompatibility and last is manual emasculation or pollination. Hybrids are produced to improve the characteristics of resulting plant like high yielding, disease resistance, improved colour and uniformity.

5 Toipe: Organic Farming

Faculty: Dr. Priyanka

Organic agriculture is best known as a method of agriculture where no synthetic fertilizers and pesticides are used. This topic includes need of Organic Farming, Principal, Status of Organic Farming in India. Green Revolution was started during 1960 during this time high in yielding variety of rice and wheat were introduced to reduce the poverty and hunger. Total, production increased 2304 million after green revolution which was 50 million tones before this revolution. This change happened as the result of introduction of HYV, chemical fertilizers and hybrids. Organic farming relies on ecological processes, biodiversity and cyclic adopted to local conditions rather than use of inputs with adverse effect.

Need of organic Farming generally we all are aware that how much harmful synthesis fertilizers for soil, animal as well as human health so there is need to replace the synthesis adopt organic farming is only alternative that will also sustain the agriculture as its function and its harmony with the nature

Status of organic farming in India India ranks first in term of total organic product and 8th in the term of world organic agricultural land. India producer around 3.49 MT of organic product. Madhya Pradesh has the largest area under organic certification and Sikkim is fully organic state.

Certification agency in India

- Indian organic Certificate Agency (INDOCERT)
- Agricultural And Processed Food Products Export Development Authority (APEDA)
- Indian Organic

6 Topic: Seed production and technology

Faculty: Seed is a fertilized ovule consisting living tissue of embryo closed nourishing tissue endosperm and protective covering is seed coat. "Seed technology comprises techniques of seed production, seed processing, seed storage, seed testing and certification, seed marketing and distribution and the related research on these aspects". The Protection of Plant Variety and Farmers Right Act, 2001 (PPVFR Act) is an Act of the Parliament of India that was enacted to provide for the establishment of an effective system for protection of plant varieties, the rights of farmers and plant breeders, and to encourage the development and cultivation of new varieties of plants.

7 Topic: Agriculture waste management

Faculty: Mr. Yograj

Agricultural waste:

Agricultural waste is composed of organic wastes (animal excreta in the form of slurries and farmyard

manures, spent mushroom compost, soiled water and silage effluent).



Include :-- Natural waste ,Animal waste, Plant waste Field Wastes, Weeds Straws , AnimalWastes , Animal Dung ,Dead Bodies Agro-Industrial Wastes

MANAGEMENT PROCESSES * Source * Generation * Collection * Transportation * Treatment processes* Disposal

8 Topic: Entrepreneurship and skill development

Faculty: Ms. Chanchal

Entrepreneurship is the art of starting a business, basically a startup company offering creative product, process or service. We can say that it is an activity full of creativity. Agricultural Entrepreneur: The entrepreneurs who undertake agricultural pursuits are called agricultural entrepreneurs. They cover a wide spectrum of agricultural activities like cultivation, marketing of agricultural produce, irrigation, mechanization, and technology.

9 Topic: Weed Managenent Faculty: Mr. Vijay Kumar

A weed is a plant growing where it is not wanted it is a unwanted plant. On average 30,33% of crop produce is damaged by weeds.

Prevention of weed

1 Eradication

2 control

Component of Control

Chemical methods

Mechanical method

Cultural method

Biological method

10 Topic: Plant growth Regulators

Faculty: Mrs. Shivani Kaundal

Plants require light, water, oxygen, minerals and other nutrients for their growth and development. Apart from these external requirements, plants also depend on certain organic compounds to signal, regulate and control the growth of plants. These are collectively called Plant Growth Regulators or Plant Growth Hormones.

Five major classes Abscisic acid, auxin, cytokinins, ethylene and gibberellins.

Auxin

- Promotion of apical
- Fruit set and growth.

Formation of adventitious roots.

Gibberellins

Gibberellins stimulate cell division and elongation, break seed dormancy, and speed germination. The seeds of some species are difficult to germinate; you can soak them in a GA solution to get them started.

Cytokinin

Unlike other hormones, cytokinin are found in both plants and animals. They stimulate cell division and often are included in the sterile media used for growing plants from tissue culture.

Ethylene

Ethylene is unique in that it is found only in the gaseous form. It induces ripening, causes leaves to drop. Plants often increase ethylene production in response to stress, and ethylene often is found in high concentrations within cells at the end of a plant's life.

Abscisic acid

Abscisic acid (ABA) is a general plant-growth inhibitor. It induces dormancy and prevents seeds from germinating.

11 Topic: Commercial beekeeping

Faculty: Ms. Bharti

BEE SPECIES

- 1. Apis dorsata; The rock bee Apidae.
- 2. Apis cerana indica: The Indian hive bee Apidae.
- Apis florea: The little bee Apidae.
- 4. Apis mellifera: The European or Italian bee Apidae. .

Apiary Management

- Hive inspection
- · Honey extraction
- Swarm management
- Seasonal management
- Bee Pasturage/Bee Forage

12 Topic: Current status of Agriculture in India

Faculty: Dr. Nitin

Agriculture is the primary source of livelihood for about 58% of India's population. Gross value added by agriculture, forestry and fishing was estimated at Rs. 19.48 lakh crore. India is among 15 leading exporters of agricultural product in the world. India is the world's 2nd largest producers of rice, wheat, sugarcane, cotton, groundnut and fruit and vegetables. Dr. Nitin gave presentation on "Current status of agriculture in India". Agriculture in India is source of livelihood for around 58% of population. Shares of the Agriculture in GDP has reached at 19.9% for the first time after 17 years which was sole bright spot in GDP performance of the year 2020 – 2021. In 2019 – 20, India's agricultural export value was around Rs. 252 thousand crore. Major exporting destination were: USA, Iran Nepal, Saudi Arabia and Bangladesh. Top agricultural and related exported products were marine products, basmati rice, buffalo meat, spices, cotton raw, tea and sugar. According to the data of 2019 – 20, food grain production is around 291.95 million tonnes and as per the estimation of ICAR it will reach around 345 million tonnes by 2030. ICAR distributed India among 15 different agro climatic zones with diverse climates, having different types soil which have capacity to grow different types crop varities. India rank 1st in the production of milk, Spices, Tea, Cashew, Jute and pulses.

Unit attachment in Abhilashi University

Activities performed during unit attachment program;

Sowing of Pea

Botanical Name - Pisum sativum

Synonym - Matar, Pca

Origin - Mediterranean Region of Southern Europe & Western Asia

Chromosome no. - 14

Variety - Goldie

Seed Rate- 8-10Kg/Bigha

Sowing Depth- 2-3cm

Spacing:

Plant to Plant-3-5cm

Row to Row-30cm

Implements -Spade, Hand hoe, Rack, Wheel hoe.

Field Preparation Firstly we prepared the field for sowing of Pea. The soil was quite hard and had numerous soil clods so we ploughed it for the purpose of proper aeration, removal excess moisture, soil solarisation, destruction of weeds etc excess moisture, soil solarisation etc.





Preparation of Seed bed

We prepared seed beds for sowing of pea.



Application of Fertilizer

Decomposed FYM was added in field. Apply mixture of MOP, SSP and Urea in basal.



Sowing of seed

We used Goldy varieties of pea. Seed is already treated with Captan. Plant to plant distance = 3cm, Row to Row = 30 cm



Pesticides application:

Herbicides = Pendimethalin @2ml/liter

Insecticides = Chlorpyrifos @ 2ml/liter

Pesticides application was done in pea field by using electrical sprayer.



After 7-14 DAS the plants start germinate





Inter- cultural operation:

Weeding: Weeding should be done after 15 DAS.



French bean

Botanical name- Phaseolus vulgaris
Family- Fabaceae.

Origin- Central and South America.
Chromosome number- 2n=22
Variety- Ankur





Stacking Pole type variety was grown in Polyhouse. Stacking was done in French bean for proper growth and avoid damage. Pole type varieties has very long growth so staking is necessary in it.





Data Collection We also collect the data for study purpose. We measured the height of plant, no. of flower cluster, no. of pods, no. of leaves.





Fertigation: Fertigation in whole polyhouse chemical used for fertigation is UTHANE M-45(Fungicide).



Harvesting of French bean



Weeding: Weeding is done inside the polyhouse in the field of radish, brinjal French beans.



Chemical treatment in polyhouse

Insecticide spray was done in polyhouse. 30 gram 'Rusdol' was mixed in 15 lit of wate. Then it was poured in knapsack sprayer and sprayed inside the entire polyhouse.



Brinjal /Eggplant Management:

Botanical Name; Solanum melongena L.

Chromosome No.: 2n = 2x = 24

Family: Solanaceae Centre of Origin: Asia

Another Name: baingan, Eggplant, Aubergine, Guinea Squash.

Type of pollination: Self pollinated

Brinjal is grown for its edible fruits. Depending on the length of the style flower of brinjal is classified as:

Long - styled with large ovary

Medium - styled with medium ovary

Pseudo short styled with rudimentary ovary

True short - styled with very rudimentary ovary

On the basis of these flower types one can determine the amount of fruiting going to be happened. Brinjal was already sown in the polyhouse in two long and broad seed beds. So, we performed intercultural operation essential for the growth of the crop.



Harvesting of different crop inside polyhouse.

We did Harvesting of Radish, Brinjal, and Coriander inside the polyhouse.



Soil treatment inside polyhouse

We treated the soil inside the polyhouse with insecticide/Fungicides namely copper oxychloride and chlorpyrifos. We spread the Chemical by mixing it with soil and spread uniformly.



Plant Clinic

In Plant clinic we Collect the different disease sample and identify them using microscope. The main aim of setting up such clinics is to diagnose pests and diseases in any crop and render accurate knowledge to the farming community. We made the slide of Powdery mildew of carrot, false smut of rice. We used the stain lactophenol blue and also visualized it using water.

Stain used:

Stain lactophenol blue





Procedure-

- Firstly, gently clean the slides.
- Dusting the disease powder into the slide with the help of brush.
- Putting a drop of lactophenol into the slide.
- Put the cover slip on it make sure it don't make air bubble in slide.
- Placed the slide under the microscope.



Powdery mildew of carrot

Causal organism Erysiphe heracleid

Symptom: Appearance of white powdery mass on both sides of the leaf and leaf petioles. Dry weather and high humidity boost the disease development.

Management: Disease can be controlled using resistance varieties, avoiding water stress conditions and balanced use of nitrogenous fertilizers. Dusting of Sulphur is most effective against powdery mildew.



False smut of Rice

Causal organism Ustilaginoidea virens

Symptoms: Transformation of rice grains into yellow powdery mass, infected grains have green smut balls. Fungus usually appear due to presence of rainfall, high nitrogen content in the soil and appear during flowering stage of the crop.

Management: Disease can be managed using disease free seeds, seed treatment with carbendazim. At boot leaf and milky stage application of Copper oxychloride or Propiconazole will prevent the disease.



VILLAGE ATTACHMENT WITH FARMER

The students gained practical experience in farmers' field situations. We created awareness among farmers about recent innovations in agriculture and allied sciences. Through village attachment, the students got the opportunity to understand the rural setting in relation to agriculture and got familiarized with the socio-economic conditions of the farmers their problems and constraints.

FARMER DETAIL

Name = Jai Prakash

Address = Village-Kotli, Post Office-Gunehar Tehsil Baijnath, District-Kangra

Phone no. +919418725692

Family member =4



My farmer grows crops like Cabbage, Cauliflower, Pea, Potato, Pak choi (Chinese cabbage), Brinjal, coriander, capsicum, Broccoli etc. There are 4 members in farmer family. Farmer and his wife work in their field. They don't have any labour. Their major business is to export the vegetable nursery plant to local market.



Cabbage

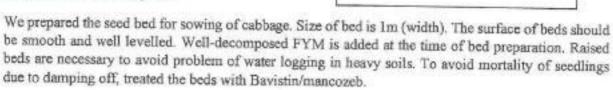
Scientific name Brassica oleracea var.capitata

Family Brassicaceae

chromosome number 2n = 18

Variety Bio Samart.

Preparation of nursery bed





Sowing

Sowing should be done thinly in lines spaced at 5cm distance. Seeds are sown at a depth of 1-2 cm and covered with a fine layer of soil followed by light watering by water can.



Variety = BIO SAMART



Covering of seed bed

The beds should then be covered with green net. The watering should be done by water can as per the need. Then it covered with plastic sheet to maintain required temperature and moisture. Cover should be removed after 3-4 days or emergence of seed sprout.



Irrigation

First irrigation is given just after sowing and subsequent irritations are given daily at evening time.



Transplant

The seedlings should be transplanted within 22 DAS. Older seedlings when transplanted result in poor growth and yield.







Land Preparation

The field is ploughed to fine tilth by giving four to five ploughing.



Manures and fertilizers

FYM and urea is incorporated into the soil before transplanting.





Method of Planting

We did transplant in the late evening. Before transplanting, the roots of the seedlings are dipped in a solution of Bavistin (2g/litre of water). Irrigation should be given immediately after transplanting. We dig the hole and placed plant inside it



Irrigation

First irrigation is given just after transplanting of seedlings. Care should be taken to avoid water stress from the time of head formation to the head maturity period. At the time of crop maturity, irrigation should be avoided as excess irrigation at this stage causes splitting of heads. My farmer use drip irrigation system in his field.





POTATO

(Solanum tuberosum)

Chromosome no. 48

Family Solanaceae



Land Preparation

The land is ploughed 1-2 time with help of power tiller and well decomposed FYM is mixed with the soil.



Chemical Treatment:

Mancozeb and Carbendazim is added in water and potato tuber is dipped 10 min. in that solution. After that shade dried of potato for 20 min.



Manure and fertilizers: Well decompose FYM and NPK (12:32:16) is mixed with soil.





Sowing: Sowing should be done in furrow. The whole or cut tubers are planted 15-20 cm apart. Row to row distance =50 cm. *Placing of tubers (eye facing upwards). After sowing the tuber it covered with soil and make ridges.





After 1 month of sowing.



Pea

Scientific name

Pisum sativum

Chromosome number

14

Family

Leguminosae

When we started our village attachment our farmer already done with sowing of pea so we started with staking of pea.

Staking of Pea For staking, we placed staking stick in equal distance around the pea field. We tie the stick with nylon thread and provide staking for plant. Staking help in proper growth of plant without damage and makes picking peas a little easier.



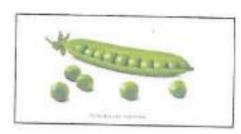
Weeding

First weeding is done either at 2-3 leaves stage or 3-4 weeks after sowing and second weeding is done before flowering.

Staking

2nd staking is done when plant is 2-3 feet long. Or after 15-20 days.





Harvesting

After 75 days, pea are ready to harvest. Well filled and light green pods should be harvest. Harvesting should be done 7-10 days interval.



Disease Attack:

At the time of Harvesting most prevalent disease found by me was Pea Rust.

Causal Organism: Uromyces viciae fabae Plant parts affected: Pods, Leaves, stem.



Identification of disease was presence of yellow powdery mass that turned white on lateral stages. 15-20 °C temperature boost the disease. Rust cause dropping & withering of infected leaves.

Management:

Mancozeb application control the disease, crop rotation, destruction of plant debris.

AGRO-INDUSTRIAL ATTACHMENT (AIA)

Abhilashi University arranged 3week Agro-Industrial program during RAWE. During, this period students visited different industries, learn new things and experience Industrial environment.

Objectives:

- To expose the students to Industrial environment, this cannot be simulated in the university.
- To familiarize the students with various Materials, Machines, Processes,
 Products and their applications along with relevant aspects of shop management.
- To make the students understand the psychology of the workers, and approach
 to problems along with the practices followed at factory
- To understand the scope, functions and job responsibilities in various departments of an organization.

To expose various aspects of entrepreneurship during the programme period.

What is AIAP?

AIAP (Agricultural Industrial Attachment Programme) is a programme for imparting quality, practical and production oriented for agricultural degree.

Importance of AIAP Programme

Preparing agricultural graduates for better career in agriculture.

Preparing agricultural graduates-oriented education to face the challenges by acquiring knowledge and skill through hands on experience.

Developed entrepreneurial skills.

MUSHROOM CULTIVATION (1Dec to 10Dec)

My first industrial training was in mushroom cultivation centre. We interacted with owner. He gave us information about mushroom cultivation. He told us all the process involving in cultivation of mushroom. He cultivated button mushroom. We visited the cultivation site.

Name of Owner: Pawan Kumar

Address: Vill Darat, PO. Joginder Nagar, Teh.-Joginder Nagar, District Mandi H.P.

Their Major Business is cultivation of mushroom and they also sell the nursery plant of vegetable. He is involving in this business for last 4-5 years. He don't have any labour. He used to sell his product in the local market.



Button Mushroom Agaricus bisporus

In India, button mushrooms are grown seasonally and in environment controlled cropping houses. White button mushroom are grown in room with suitable temperature. It need cool climate and high relative humidity.



Room Preparation:

The size of room is 20foot length × 12feet width. 1.5 ml of Formalin and KMNO4 (Potassium Permanganate) is dissolve in 30 litter of water and spray inside the room for sanitation. Leave air tight room for 24 hours. Ventilation should be given after 24 hours.

Bag preparation:

They bought already prepared bag from Punjab. The prize of one bag is 85 rupces. Formalin spray was done in bags. After I day, sprinkle spawn in the bag. Tie one end of bag, put small holes in the middle.



Casing

Casing is a top-dressing applied to the spawn-run compost on which the mushrooms eventually form. Casing is mixture of ash, coco peat, Poultry waste etc. Spawn run should be covered with a layer of casing about 3-4 cm. Thick to induce fruiting. After small emergence of fruiting second time casing is provide.



Moisture:

Mushroom need high humidity between 80-90 %. Provide proper water for maintain the moisture inside the bag. Don't give overwater. The humidity should be built up by frequently watering the floor and walls.





Room temperature and ventilation:

The room temperature should be maintained around 25°. The room may be kept closed as no fresh air is needed during the spawn run. After fruiting provide fresh air 2-3 times in a day. They also install Air conditioner for maintain temperature inside the room.



Harvesting

Harvesting is done at button stage and caps measuring 2.5 to 4 cm. First, crop appear after 2-3 week of harvesting. Mushrooms need to be harvested by light twisting without disturbing the casing soil. Once the harvesting is complete, the gaps in the beds should be filled with fresh sterilized casing material and then watered.



Post- harvest management

Button mushrooms are highly perishable. Harvested mushrooms are cut at the soil line and washed in a solution of 5g. Sodium Metabisulphite in 10L of water for removing the soil particles as well as to induce whiteness. After removing excess water these are packed in perforated poly bags each containing around 250-500 g. of mushrooms. They can be stored in polythene bags at 4-50 C for a short period of 3-4 days.



Disease of mushroom

The most common disease they found in their mushroom is wet bubble disease.

Wet Bubble Disease: Pathogen Mycogone perniciosa

High temperature and high relative humidity outside the production house is Favourable condition for pathogen.

Management: Use Carbendazim fungicides



INDUSTRIAL TRAINING

FISH FARMING (PISCICULTURE)

I started my second industrial training at fish farm. Fish farming or pisciculture involves commercial breeding of fish, usually for food, in fish tanks or artificial enclosures such as fish ponds. India ranked 2nd in Aquaculture and 3rd in Fisheries. British were the first to introduce trout in the country from Europe to meet their need for recreational fishing.

The fish farm owner was performing monoculture fish farming. Monoculture - This system allows farming a single species of fishes. It offers high production and quality.

In Himachal Barot is world famous for trout fish. Barot has one Himachal govt. run trout fish Farm and also have lots of private fishing farms. Zone II and III of Himachal Pradesh have vast potentials for the culture of highly prized fish "Rainbow Trout". The agro-climatic conditions of the area under these two zones are very congenial for cold water aquaculture. The state has over 512 trout farms, mainly in Kullu, Chamba, Shimla, Kinnaur and Mandi districts. These area are declared as Trout Zones in the State. The state has a well developed infrastructure for promotion and development of trout farming.



JASWAL TROUT FISH FARM

Name Sanjeev Jaswal Contact no. 8219636019

Address. V.PO Shanan, Teh. Joginder Nagar, Distt. Mandi H.P.-175015



RAINBOW TROUT: Oncorhynchus mykiss

Rainbow trout is an exotic coldwater species which was introduced in many parts of India. The Himalayan foothills, Kashmir, Himachal Pradesh upper streams of Western Ghats in Karnataka, Tamilnadu and Kerala are ideal for rainbow trout culture. Presently, this fish is marketed in India in fresh chilled condition.



- Nutritional Value As For nutritional value Fish is full of protein, Fats, vitamin, minerals. It is the one of the best sources of Omega-3 fatty acid APA and DHA, which are important for keeping our body health.
- Water Temperature: Water temperature should not more than 141¢ Trout fish are cold water fish.
- Climate: Trout fish required cold Temperature. Temperature should not more than 21 □.



 Size of water tank: 2m width×17m length, 1.5m depth. One tank contains 3000-4000 fishes.





Area covered: 2 bigha area is covered by all fish tanks.



 Feed: During winter season adult fish only need feed once in a day but during summer season adult fish need feed twice in a day. For small fish(20-30g) they need feed 4-5 time in a day. High (Protein 50+ and Fat 10+) are important for good growth of trout fish. The quantity of feed mainly depends on the water temperature and size of fish.



 Requirement Trout fish need running and fresh water. They do not survive in the standing water because trout fish have high oxygen requirement 5 to 9mg/L. In Farm, the owner collected water from natural stream.

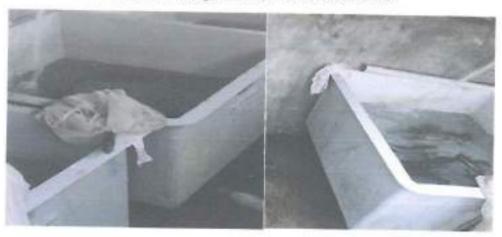




Breeding Climate:

November, December and January are the month for trout breeding. 2 years old fish is mature for breeding. Mature fishes are separated from small fish.

Breeding: Trout will not spawn naturally in culture systems, thus juveniles must be obtained by artificial spawning in a hatchery. For artificial spawning firstly they inspect the mature female and male and separate them in different tank.



Hand Stripping of fish Egg

Stripping is the removal of the unfertilized eggs of sexually mature fish for further farming of indigenous fish species. Immediately after stripping, the breeding fish should be released into water. Hand striping the female by applying gentle hand pressure to the abdomen, moving toward the vent the stream of eggs is directed into a bowl. This process of egg release is termed spawning. One fish release 1000-2500 egg at one time.



Hand Stripping of male fish Milt (sperm)

Milt is sperm which we get from male fish. Process of Stripping of Milt is Same as stripping of eggs. We collect the milt and mix it with the egg with the help of feather. 2 years old male is mature for milt. For 1 female eggs, 2 male milt is enough for fertilization.



Egg, sperm and 100 ml of water used for fertilization. Eggs can be fertilized within the first 40 seconds. After fertilization, washed egg with fresh water and put eggs inside the incubation tray.



Water added in tray. Water temperature should be 10-12%. Egg remains in water for 21-25 days. Rainbow trout eggs will hatch approximately 3 weeks after fertilization.



Incubation Period

During this period, we have to inspect incubator tray daily to avoid any kind of contamination. If we find white egg (unfertilized) we have to remove that egg from tray. Because that egg cause fungal infection to other egg.



After hatching eye egg are formed. At this stage it is also use for transportation. After 1 week it become fry. The fry upto 1 g was retained in the hatchery and later shifted to nursery ponds and retained there till it acquired the weight of 5 g When fry reach 8-10 cm in length they are moved to outdoor grow-out facilities. One week fry start feeding.



Grading: Grading, should be done every month. Separate fish according to their size. Each tank contains different size of fish. Grading is necessary because large fish eat small fish.



Handling and processing

Trout fish took 10-12 months to attain the marketable size of 250 g. Due to cold water fish it is slow growing in nature. Before slaughter, all fish should be starved for 3 days and, once killed humanely, the head should be left on; beheaded fish spoil more quickly. Rainbow trout are supplied to markets either fresh or frozen, and their shelf life is 10-14 days if kept on ice. Trout are marketed as gutted whole fish, fillets (often boneless), or as value-added products, such as smoked trout.





Marketing

They mainly sold fishes in Delhi hotel. Size of fish for table purpose is 250-300g. Price of 1 kg of fishes is 700 rupees. They also sell fish spawn, fish fry. Products for human consumption come as fresh, smoked, whole, filleted, canned, and frozen trout that are eaten steamed, fried, broiled, boiled, or micro-waved and baked. Trout processing wastes can be used for fish meal production or as fertiliser.

Disease

Common diseases found in the fish is fin rot.

Fin Rot: bacterial infection (Pseudomonas fluorescens)

This disease is mainly caused due to fluctuation in temperature. It mainly happen 2 time in year when climate change.



Treatment

They used salt bath for treatment of fin rot.

Damini

D/o- Sh. Ashok Kumar

Village-Dhalar, P.O./Teh.-Joginder Nagar . District Mandi 175015

Contact No 8091794072

E-mail id- daminithakur@147gmail.com

EDUCATION

10th - Holy Child Public School 2016

10+2- Ascent Public School 2018

B. Sc (hons.) Agriculture-Pursuing from Abhilashi University joined in August 2018.































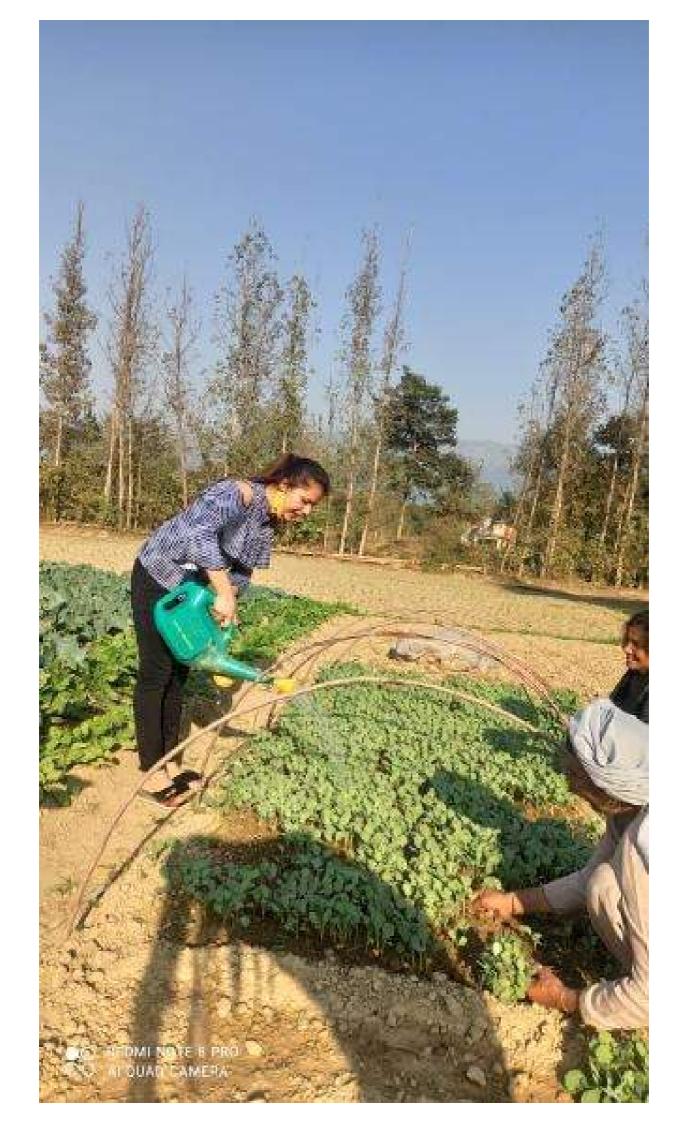














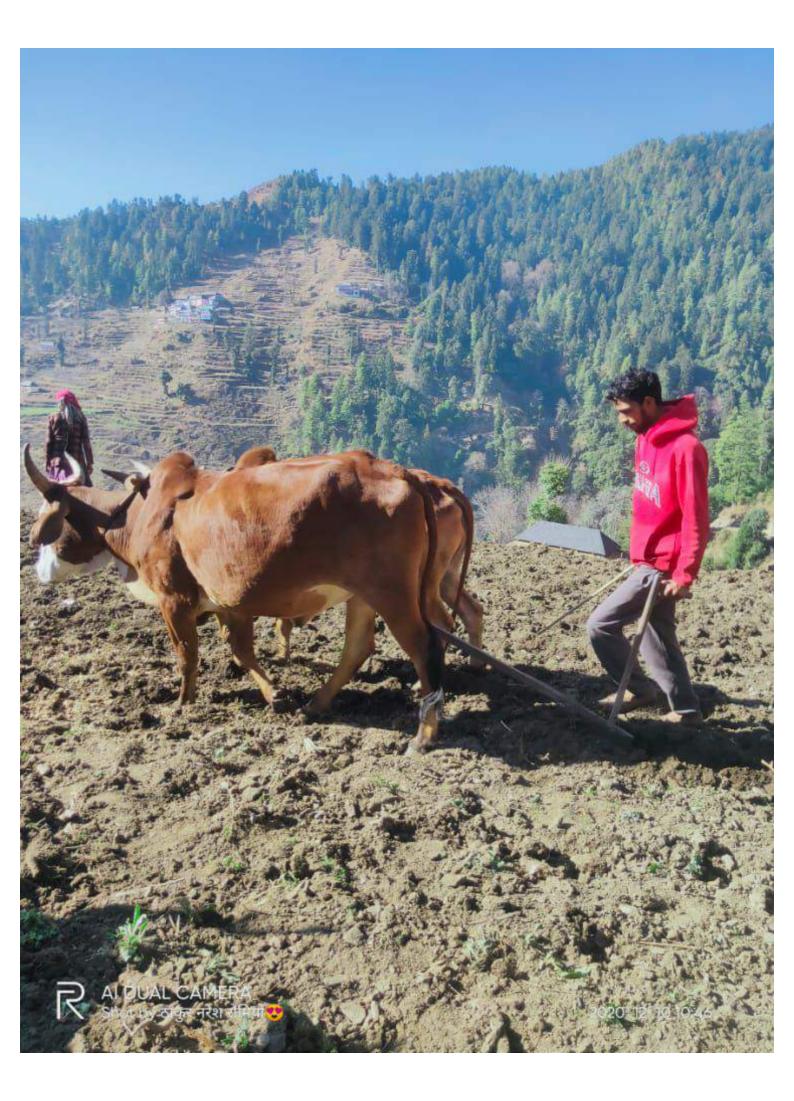




















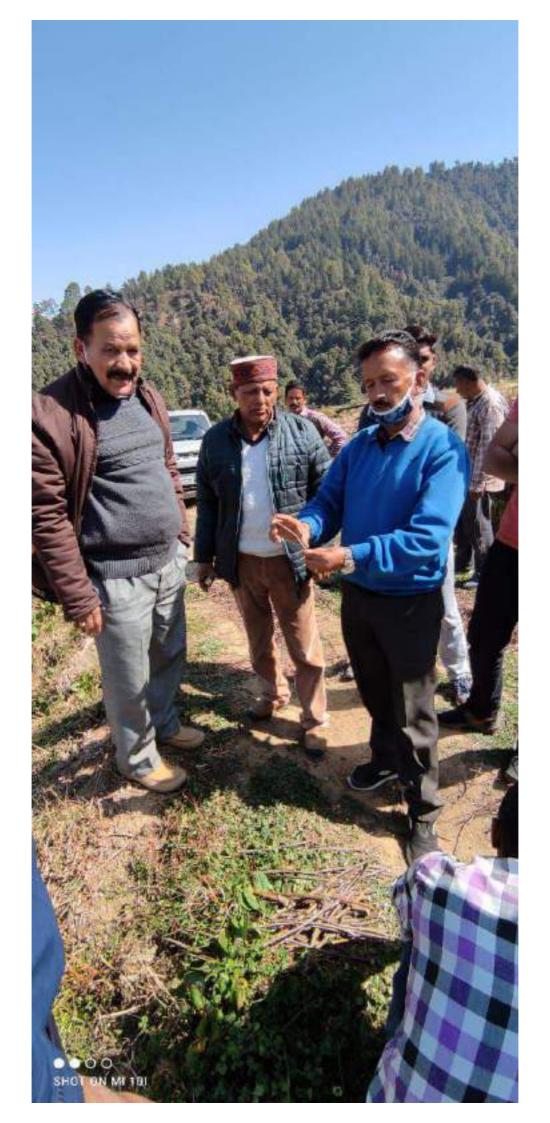










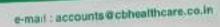














Date: 25-08-1021

To Whom It may Concern

This is to certify the Mr. Aman Kumar S/o Sh. Parkash Chand student of Bachelor of Pharmacy in ABHILASHI UNIVERSITY Mandi, Himachal Pradesh (Registration No. 17RCPBPAL002) successfully completed his training in Quality Control, Quality Assurance, Stores and Production Department in our organization from 25-07-2021 to 24-08-2021. He is found to be technically sound, sincere and hardworking and bears a good moral character.

We wish him success and happiness in all his future endeavor in life.

For C.B Healhcare

Authorized Signatory



Date: 25-08-2021

To Whom it may Concern

This is to certify that Miss Amisha Gautam D/o Sh. Vinod Kumar Gautam student of Bachelor of Pharmacy in ABHILASHI UNIVERSITY Mandi, Himachal Pradesh (Registration No. 17RCPBPAL011) successfully completed her training in Quality Control, Quality Assurance, Stores and Production Department in our organization from 25-07-2021 to 24-08-2021. She is found to be technically sound, sincere and hardworking and bears a good moral character.

We, wish her success and happiness in all her future endeavor in life.

For C. B Healthcare

Authorized Signatory



APPL/SK/PA/004/2021-22

Date: 25th September 2021

TO WHOM IT MAY CONCERN

This is to certify that Mr. Bivek Gurung student of Abhilashi University of Himachal Pradesh have successfully completed training program at Aristo Pharmaceuticals Private Limited in the all departments from 9th to 25th September 2021 (150 hrs) and have gained the necessary experience to pursue their B. Pharm course.

We found he is honest, sincere hardworking and well behaved during his training period with us.

We wish them every success in his carrier.

Aristo Pharmaceuticals Pvt. Ltd

Authorized Signatory

Ph.:- +91 7047075555/7047076666 personnel.sikkim@aristopharma.org

Factory: Plot Nos. 2040-86, NH- 10, Eaghey Khola, West Perstam Block, P.O. Majhtay, Gerglok, Dist.- East Statum (Staken)- 737136.InDRA, Physic: +81-704707666, 7047075555.

Reys. Office: Mercantile Chambers. 5" Floor 12, J. N. Heredis Marg. Balland Estate, Member 400,001. Maharashtra. INDSA., Phone. 491-22 - 2261 7508 + Fax: 491-22 - 2261 5604. UPIL www.aristopherma.org CIN No. UdecompetionFTC015425





PDPL PARENTERAL DRUGS (INDIA) LTD.



City

13

Ret. No.: PDL/Baddi/HR/21 Dated: 05/09/2021

TO WHOM SO EVER IT MAY CONCERN

It is certified that Deepika Kumari D/o Mukhtyar Singh student of B. Pharmacy at Abhilashi University Mandi attended her industrial training at our plant from 05/08/2021 to 05/09/2021. During her stay with us she was found to be sincere and Hardworking.

We wish all the best for her future endeavors.

Thanking you,

For Parenteral Drugs Ltd.

(Raj Kumar Sharma) AUTHORISED SIGNATORY



DPL PARENTERAL DRUGS (INDIA) LTD.

Ref. No.: PDL/Baddi/HR/21 Dated: 05/09/2021

TO WHOM SO EVER IT MAY CONCERN

It is certified that JAYA D/o Pawan Kumar student of B. Pharmacy at Abhilashi University Mandi attended her industrial training at our plant from 05/08/2021 to 05/09/2021 During her stay with us she was found to be sincere and Hardworking.

We wish all the best for her future endeavors.

Thanking you,

For Parenteral Drugs Ltd.

(Raj Kumar Sharma) AUTHORISED SIGNATORY

INNOVA CAPTAB

81-B, EPIP , Phase -I , Jharmajri Baddi, Distt. Solan (H.P.) Phone : 92184-52184 , 01795-650844, Fax : 01795-271850

E-mail, mail@innovacaptab.com

17th September, 2021

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Mr. Manoj Kumar, B. Pharmacy Student of ABHILASHI UNIVERSITY Chail Chowk, Distt Mandi (H.P) has successfully undergone in Plant Training in Our Organization from 16th August to 17th September 2021

During his association with the organization, We have found him to be sincere, hardworking and honest.

We Wishing him all the very best for the all his future endeavors.

For INNOVA CABTAP

Authorized Signatory Human Resources



APPL/SK/PA/005/2021-22

Date: 25th September 2021

TO WHOM IT MAY CONCERN

This is to certify that Mr. Raj Kumar Pradhan student of Abhilashi University of Himachal Pradesh have successfully completed training program at Aristo Pharmaceuticals Private Limited in the all departments from 9th to 25th September 2021 (150 hrs) and have gained the necessary experience to pursue their B. Pharm course.

We found he is honest, sincere hardworking and well behaved during his training period with us.

We wish them every success in his carrier.

Aristo Pharmaceuticais Pvt. Ltd

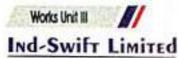
Authorized Signatory

He

Ph.:- +91 7047075555/7047076666 personnel.sikkim@aristopharma.org







(Formulation Division) Vill. Malkumajra, Tehsil Nalagarh, Distt. Solan (H.P.)-173 205 INDIA Ph.: 01795 662800

Telefax: 01795 246 831, 245 431 e mail: islunit3@indswift.com

Ref. No. ISL/HRD/2021-22

Date: 01/10/2021

TO WHOM SO EVER IT MAY CONCERN

This is certified that Mr. Rishabh Bedi S/O Sh. Inder Singh Bedi, Student of B-Pharma Abhilashi University with Registration no-18LCPBPAL004 has undergone one month's in plant training in our Factory w.e.f. 26TH August, 2021 to 26TH September, 2021. He has been given training in Quality control and Production department.

During the period of training his work and conduct were found satisfactory.

For IND-SWIFT LIMITED

(AUTHORISED SIGNATURE)





Date: 01/10/2021

TO WHOM IT MAY CONCERN

This is to certify that Mr. Sailesh Sherpa a B. Pharmacy student of Abhilashi University, Himachal Pradesh has successfully completed his Industrial training Program in Production, QA, QC Dept. at our Sikkim Unit IX, Aho- Yangtam, Ranipool w.e.f 02nd Sept 2021 till 01st October 2021.

During his training period with us he was found punctual, hardworking and sincere.

We wish him the very best in all his future endeavors.

For Macleod's Pharmaceutical Ltd.

Major Salish Bhatt (Retd.)

narmac

Human Resource Asst. General Manager

Date: 01/10/2021



Date: 01/10/2021

TO WHOM IT MAY CONCERN

This is to certify that Ms. Sital Rai a B. Pharmacy student of Abhilashi University, Himachal Pradesh has successfully completed her Industrial training Program in Production, QA, QC Dept. at our Sikkim Unit IX, Aho- Yangtam, Ranipool w.e.f 02nd Sept 2021 till 01st October 2021.

During her training period with us she was found punctual, hardworking and sincere.

We wish her the very best in all her future endeavors.

For Macland's Pharmaceutical Ltd. harmace

sh Bhatt (Retd.)

Human Resource Asst. General Manager

Date: 01/10/2021

CIN 1.94939WHT989FLC059049





Swaraj Majra, Juddi Kalan, Post Baddi. Tehsil - Nalagarh Dist. Solan, Himachal Pradesh-173205

Phone: 01795-246841 Fax: 01795-246842

CIN No.: L24230GJ1995PLC025878

Ref. No.: ZC/Baddi/HR/21 19 August, 2021

TO WHOM SO EVER IT MAY CONCERN

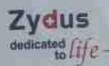
It is certified that Ms. Zseema D/o Late Hira Lal student of B. Pharma Registration no 17RCPBPAL037 from Abhilashi University, Distt Mandi (HP) attended her Industrial Training at our plant from 20/07/2021 to 19/08/2021. During her training with us she was found sincere and hardworking.

We wish her all the best for her future endeavors.

For Codila Healthcare Limited.

For Cedila Healthcare Ltd.

(Authorised Signatory) Authorised Signatory





Swarp Mars Juddi Kelah.
Post Bado: Tehali - Nalagarh
Dist: Solan, Himachal Pradesn-173205
Phone: 01795-246641
Fax: 01795-246842
CN No. 1242366018889; 0205608

Ref. No. 2C/Baddi/HR/21 19 August, 2021

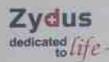
TO WHOM SO EVER IT MAY CONCERN

It is certified that Mr. Zseema D/o Late Hira Lat student of B. Pharma Registration no 17RCPBPAL037 from Abbiliani University, Dono Mandi (149) intended her Industrial Training at our plant from 20/07/2021 to 19/08/2021. During her training with us she was found sincere and hardworking.

We wish her all the best for her finure endeavors.

For Cadilla Healthcare Limited

For Castin Healthcore Ltd.
(Authorised Signatory)





Percray Mayor, Justo Kalan. Post Baddi, Tehali - Nisagorh Dist. Solar, Hillanda Pradost-172.

Dist. Solar, Hilliama Pradest-17205 Phone 01795-246841 Fax 01795-246842 CIN No. 124100011869-0005678

Ref. No.: ZC/Baddi/HR/21 19 August, 2021

TO WHOM SO EVER IT MAY CONCERN

It is certified that Ms. Jagott D/o Late Hero Lal student of B. Phorma-Registration no 17RCPBPAL028 from Abhilashi University, Distr Mandi (11P) attended her Industrial Training at our plant from 20/07/2021 to 19/08/2021. During her training with us she was found tincere and hardworking.

We wish her all the best for her fature endeavors.

For Cadilla Healthcare Limited.

For Coola Healthcare Ltd.

(Audumorate francisco)





Swaraj Majra, Juddi Kalan, Post Baddi. Tehsil - Nalagarh Dist. Solan, Himachal Pradesh-173205

Phone: 01795-246841 Fax: 01795-246842

CIN No.: L24230GJ1995PLC025878

Ref. No.: ZC/Baddi/HR/21 19 August, 2021

TO WHOM SO EVER IT MAY CONCERN

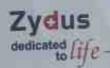
It is certified that Ms. Zseema D/o Late Hira Lal student of B. Pharma Registration no 17RCPBPAL037 from Abhilashi University, Distt Mandi (HP) attended her Industrial Training at our plant from 20/07/2021 to 19/08/2021. During her training with us she was found sincere and hardworking.

We wish her all the best for her future endeavors.

For Codila Healthcare Limited.

For Cedila Healthcare Ltd.

(Authorised Signatory) Authorised Signatory





Swarp Mars Juddi Kelah.
Post Bado: Tehali - Nalagarh
Dist: Solan, Himachal Pradesn-173205
Phone: 01795-246641
Fax: 01795-246842
CN No. 124236601999; 0205678

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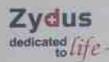
TO WHOM SO EVER IT MAY CONCERN

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We wish her all the best for her finure endeavors.

For Cadila Healthcare Limited

For Castin Healthcore Ltd.
(Authorised Signatory)





Percray Mayor, Justo Kalan. Post Baddi, Tehali - Nisagorh Dist. Solar, Hillanda Pradost-172.

Dist. Solar, Hilliama Pradest-17205 Phone 01795-246841 Fax 01795-246842 CIN No. 124100011869-0005678

Ref. No.: ZC/Baddi/HR/21 19 August, 2021

TO WHOM SO EVER IT MAY CONCERN

It is certified that Ms. Jagott D/o Late Hero Lal student of B. Phorma-Registration no 17RCPBPAL028 from Abhilashi University, Distr Mandi (11P) attended her Industrial Training at our plant from 20/07/2021 to 19/08/2021. During her training with us she was found tincere and hardworking.

We wish her all the best for her fature endeavors.

For Cadilla Healthcare Limited.

For Coola Healthcare Ltd.

(Audumorate francisco)



(PHARMACEUTICAL MANUFACTURERS & EXPORTERS)

Pharmaceutical India Pvt. Ltd.

Administrative cum Correspondence Office 128/5, Swiss House, Vishwas Nagar, Gevi-110 032 Tele 91-11-22380624, 22384352 Fax No. 22305399 E-mail: medipol_pharma @yshoo.com Website medipol.co.in

CIN : U24231HR1992PTC031641

Date: 20.09,2021

To whom so ever it may concern,

This to certify that Mr. Bhushan Goel is B. Pharmacy student of Abhilashi University Chail Chowk, Distt Mandi H.P has completed his industrial training from 20/08/2021 to 20/09/2021 in our Production, Quality Control, Quality Assurance & Warehouse departments successfully. During this tenure his work & behavior was quite satisfactory.

We wish him all the very best for his future endeavors.

Thanking You

For Medipol Pharmaceuticals India Pvt. Ltd

Medipo Pharmaceutical India Pvi Ltd.

Authorized Signatory

Authorized Signatory





Bef. No.: PDL/Baddi/HR/21 Dated: 05/09/2021

TO WHOM SO EVER IT MAY CONCERN

It is certified that Vishakha Patial D/o Raj Kumar student of B. Pharmacy at Abhilashi University Mandi attended her industrial training at our plant from 05/08/2021 to 05/09/2021. During her stay with us she was found to be sincere and Hardworking.

We wish all the best for her future endeavors.

Thanking you,

For Parenteral Drugs Ltd.

(Raj Kumar Sharma) AUTHORISED SIGNATORY

APPENDIX T

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION-1

This form has been issued to Sri/Smt. [[EH]5]1 E	K KONN
(Name of student pharmacist) soll of / daughter of 5 fs	- RAKESH KOMAR
residing at VRO RISSA TEX SARKAGHA	I Dist! MANDI (HP)
who has produced evidence before me that he/she is entit	led to receive the Practical Training as set
con in the Education Regulations framed under section 10 table. $2^{-3}/2^{-3}/2^{-3}$	
SECTION - II	
· 1 Akhishek Rana	(Name of the Student Pharmacist)
accept Journal Kyman	(Name of the Apprentice Master) of
16 Past University chail-chough	(Name of the College / Institution)
Club Haspital Sarbaghat	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to ob	
period of my training. Date: 25/1/5-21	Signature of the Student Pharmacist
SECTION - II	i
accept Sri / Sml Allikek Rana	(Name of the Apprentice Master)
(Name of the student pharmacist) as a trainee and I agree	e to give him /her training facilities in my
organisation so that during his /her training he /she may as	
Working knowledge of keeping of records to profession of pharmacy; and Practical experience in tal the manipulation of pharmaceutical apparatus (h) the recognition by sensors characters of chi in medicine the reading, translation and copying of prese	squired by the various Acts affecting the as in common use; of crude drugs & chemical substance used

- ed) the dispensing of prescriptions illustrating the commoner methods of administrating medicaments, and
- the storage of drugs and medicinal preparations

1 certify that Abharber Range

anthorized person with mentioning the dates.

Training Contract Form for qualification as a Phormacist

Laiso agree that a Registered Pharmacist shall be assigned for his dier guidance

Date 3 1/2029

HEF PHARMACIST Head of the Organization or Photosocutical Division

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Date:	Source
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2) The practical training shall be not less than five hundred hours spread over a period of not less than

3) The head of an academic training institution, on application, shall supply in triplicate "Practical

4) After successful completion of the practical training. It shall be the responsibility of the trainee to ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is submitted to the Head of the academic training institution and the other two copies (hereinafter

three months. Mention the period of training in DD/MM/YYYY format only

referred to as the Second copy and the third copy) shall be filed with the trainee.

APPENDIX T

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION -

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SECTION - II

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Date: 09 of 31

Signature of the Student Pharmacist

SECTION - III

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- organisation so that during his /her training he /she may acquire: -I. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in –
- (1) the manipulation of pharmaceutical apparatus in common use:
- the recognition by sensors characters of chief crude drugs & chemical substance used
- the reading, translation and copying of prescriptions including the checking of doses;

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- 3 the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- (c) the storage of drugs and medicinal preparations.

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

Head of the Organization or Pharmaceutical Division SLB59

SECTION - IV

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Head of the Organization or Pharmaceutical Division

SECTION - V

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Date: 35/11/ Los

Head of the Academic Training Institution

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- Each & every Sections should be filled in with correction information, signed & sealed with the anthorized person with mentioning the dates.
- three months. Montion the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
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Signature of the Student Pharmacist

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SECTION - III

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- ŝ the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

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SECTION - IV

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Head of the Organization or Pharmaceutical Division

SECTION - V

Institution approved the Pharmacy Council of India Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an pharmacist) has completed in all respect his practical training under regulation 20 of the Education certify that Cumar. (Name of student

Date: 25/1/1/50

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APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948 who has produced evidence before me that he/she is entitled to receive the Practical Training as set -NVA are Surpessu (Name of student pharmacist) son of / daughter of Sh. Plake. 25. This form has been issued to Sri/Smt. Ax 2 hay Kulmas Chand - P.O-Tabeli-Ten, Sundannagas chand Did How

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School of Pharmacy, Chall-Chourt, All Headling Mc Mc Williams Suri

SECTION-II

scept Parsy Ram Marneyt	(Name of the Student Pharmacist) (Name of the Apprentice Master) of
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Apprentice Master for the above training and agree to obey and respect him / her during the entire	to obey and respect him / her during the entire
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Signature of the Student Pharmacist

SECTION - III

- (Name of the student pharmacist) as a trainee and I agree to give him ther training facilities in my organisation so that during his ther training he /she may acquire: accept Sri / Smt. Alesha STABLEMENTS. Euma, (Name of the Apprentice Master)
- Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in –
- the manipulation of pharmaceutical apparatus in common use:
- the recognition by sensors characters of chief enude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses:

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- the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- the storage of drugs and medicinal preparations.

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

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SECTION - IV

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Head of the Organization or Pharmaceutical Division

SECTION - V

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- three months. Montion the period of training it: "DIMMYYYY format only The practical training shall be not less than five handred hours spread over a period of not less than
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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION .

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 Pharinger Act, 1948 residing at 159- Garage? - For laxing the Southaghet Dath Monda (1018) Name of student pharmacist) son of daughter of Societies Sole laws This form has been issued to Str Sint. Figshop, That be

SECTION - II

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Signature of the Student Pharmacist

SECTION - III

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- 1. Working knowledge of keeping of receeds required by the various Acts affecting the profession of pharmacy, and
- 2. Practical experience in
- the manipulation of pherovaceutical appearates in common use
- the recognition by sensors characters of chief crude drugs & chemical substance used
- the reading, translation and copying of prescriptions including the checking of disces-

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- 3 the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- (c) the storage of drugs and medicinal preparations.

Lalso agree that a Registered Pharmacist shall be assigned for his Aber guidance

Head of the Organization or Pharipagentical Division SLBSG

SECTION - IV

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SECTION-V

Head of the Organization or

Pharmaceutical Division

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APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948. who has produced evidence before me that he/she is entitled to receive the Plactical Training as set residing at Vill Kampala Ro Jachn Teh, enachiget Dight. Mandi Name of student pharmacist) son of / datighter of 3h. This form has been issued to Sri/Smt. Anita Thakus Purson chand

Date 22/7/2021

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SECTION - II

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Date 22 of 2021

Signature of the Student Pharmacist

SECTION - III

- (Name of the student pharmacist) as a traince and I agree to give him /her training facilities in my organisation so that during his /her training he /she may acquire: accept Sri / Smt. MM. Kumer 1 Marmaerit - The Kur (Name of the Apprentice Master)
- I. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in –
- the manipulation of pharmaceutical apparatus in common use
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses:

medicaments; and the dispensing of prescriptions illustrating the commoner methods of administering

(c) the storage of drugs and medicinal preparations

Labso agree that a Registered Pharmacist shall be assigned for his ther guidance

Date: 02 et Jai

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SECTION - IV

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Head of the Organization of Pharmaceutical Division

SECTION - V

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Date: 93/11/21

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- authorized person with mentioning the dates. Each & every Sections should be filled in with correction information, signed & scaled with the
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- 6 the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Date:	Head of the Organization or
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SECTION - IV	
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Date: 22 1 2 92	Head of the Academic Training Institution
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4) After successful completion of the practical training. It shall be the responsibility of the trainee to consure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is submitted to the Head of the academic training institution and the other two copies (hereinafter that the training).	I shall be the responsibility of the trainee to first copy of the Contract Form) so filled is rution and the other two copies (hereinafter he fluit with the trainer.
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APPENDIX

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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accept period of my training. Apprentice Master for the above training and agree to obey and respect him / her during the entire SECTION - II Secons Signature of the Student Pharmacist (Hospital or (Name of the Apprentice Master) of (Name of the College / Institution) (Name of the Student Pharmacist) Pharmacy) as my

SECTION - III

(Name of the Apprentice Master)

(Name of the student pharmacist) as a traince and I agree to give him ther training facilities in my organisation so that during his ther training he /she may acquire: accept Sri / Smt. 5750

- Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in -
- the manipulation of pharmaceutical apparatus in common use
- 3 5 the recognition by sensors characters of chief crude drugs & chemical substance used
- the reading, translation and copying of prescriptions including the checking of doses: in medicine

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APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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SECTION - II

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SECTION - III

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- Practical experience in profession of pharmacy; and
- the manipulation of pharmaceutical apparatus in common use;
- 3 3 the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- 6 the reading, translation and copying of prescriptions including the checking of doses;

- medicaments; and the dispensing of prescriptions illustrating the commoner methods of administering
- (e) the storage of drugs and medicinal preparations.

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

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SECTION - IV

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Date: 17 | 11 | 91

Head of the Organization or Pharmaceutical Division

SECTION - V

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Institution approved the Pharmacy Council of India pharmacist) has 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

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- authorized person with mentioning the dates. Each & every Sections should be filled in with correction information, signed & sealed with the
- three months. Mention the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
- Training Contract Form for qualification as a Pharmacist The head of an academic training institution, on application, shall supply in triplicate 'Practical
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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

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SECTION - II

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SECTION - III

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Practical experience in profession of pharmacy; and

- 9 (3) the manipulation of pharmaceutical apparatus in common use; the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- S the reading, translation and copying of prescriptions including the checking of doses;

- 6 the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

l absoragree that a Registered Pharmacist shall be assigned for his ther guidance

Head of the Organization or Pharmaceutical Division

SECTION - IV

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Date:

Head of the Organiz

Pharmaceutical Division

SECTION - V

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- Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
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APPENDIX 1:

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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ho has produced evidence before me t	ho has produced evidence before me that he/she is entitled to receive the Practical Training as set
at in the Education Regulations framed	at in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.
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Max JITHET STREET	Signature of the Student Pharmacist
	SECTION - III
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Working knowledge of keeping of records required l	Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
2. Practical experience in - Let the manipulation of planns (b) the recognition by sensors	Practical experience in - the manipulation of pharmaceutical apparatus in common use; the recognition by sensors characters of chief crude drugs & chemical substance used
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the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and

the storage of drugs and medicinal preparations

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

Civil Hospital Auto Medical Off Teh Arki Dist Soloni H 1"

> Head of the Organization or Pharmaceutical Division

SECTION - IV

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· SECTION - V

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- Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
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APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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SECTION - II

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Signature of the Student Pharmacist

SECTION - III

(Name of the Apprentice Master)

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- I. Working knowledge of keeping of records required by the various Acts affecting the profession of phannacy; and
- Practical experience in
- Ξ the manipulation of pharmaceutical apparatus in common use;
- the recognition by sensors characters of chief crude drugs & chemical substance used
- the reading, translation and copying of prescriptions including the checking of doses;

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- medicaments; the dispensing of prescriptions illustrating the commoner methods of administering Ē
- (c) the storage of drugs and medicinal preparations

Lulso agree that a Registered Pharmacist shall be assigned for his ther guidance

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Date 15/01/201

lend of the Organization or Pharmaceutical Division

SECTION - IV

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SECTION - V

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Date: 27 - 1 - 2022

Head of the Academic Schools of the Academic Schools of the Academic on Schools of the Academic Academic Academic of the Acade

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- referred to as the Second copy and the third copy) shall be filed with the traince submitted to the Head of the academic training institution and the other two copies (hereinglier ensure that one copy thereinafter referred to as the first copy of the Contract Form) so filled is After successful completion of the practical training. It shall be the responsibility of the trainee to

APPENDIX

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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SECTION - III

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- 1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in
- the manipulation of pharmaceutical apparatus in common use;
- (8) the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

- the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- the storage of drugs and medicinal preparations.

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

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il training under regulation 20 of the Education	harmacist) has completed in all respect his practical training under regulation 20 of the Education
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Date: 25/11/202

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School of Pharmacy
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Chall-Chows, Dist. Mandi (H.P.)

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- Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
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- ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is submitted to the Head of the academic training institution and the other two copies (hereinafter After successful completion of the practical training, It shall be the responsibility of the trainer to referred to as the Second copy and the third copy) shall be filed with the trainer.

APPENDIX I

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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SECTION - II

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	ining.	ster for the above training and agree to of	1.52	RH Una (H.P)	Smo	Bharat Bhushan
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SECTION - III

accept Sri / Sint. Bhaxat Bhushan SMO (Name of the Apprentice Master)

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

- I. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in .
- 3 the manipulation of pharmaceutical apparatus in common use:
- 9 the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

- the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- (c) the storage of drugs and medicinal preparations

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SECTION - IV

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SECTION - V	Chief Phormodel-	500 for a period of
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Date: 0/12/20

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APPENDIX -F

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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SECTION - II

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profession of pharmacy, and

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

the manipulation of pharmaceutical apparatus in common use;

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

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- the storage of drugs and medicinal preparations

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Date: 16 111 2011 Medical Officer 110 Civil Hospatil Arts Ten Aiki Disti Solais H 1

> Head of the Organization or Pharmaceutical Division

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> Head of the Organization or Pharmaceutical Division

SECTION - V

Institution approved the Pharmacy Council of India Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an pharmacist) has completed in all respect his practical training under regulation 20 of the Education certify that Dikshid Kumax (Name of student

Date:

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APPENDIX -

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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(Name of student pharmacist) son c	leral Roskan LAL SH	
residing at VILL SAKROH	residing at VILL SOKKEDH DO BIHRU TEH BOSICOS DISHHOMINHUL-HP	44.7
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period of my training.	Po	
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the reading, translation and copying of prescriptions including the checking of doses;

- 3 the dispensing of prescriptions illustrating the commoner methods of administering
- (c) the storage of drugs and medicinal preparations.

l also agree that a Registered Pharmacis; shall be assigned for his /her guidance

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Head work of the Pharmaceutical Division or Pharmaceutical Division AL

SECTION - IV

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SECTION - V

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- three months. Mention the period of training in DD/MM/YYY format only The practical training shall be not less than five humdred hours spread over a period of not less than
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- After successful completion of the practical training. It shall be the responsibility of the trainee to referred to as the Second copy and the third copy) shall be filed with the trainee submitted to the Heart of the academic training institution and the other two copies thereinafter custure that one copy thereinifter referred to as the first copy of the

APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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SECTION - II	
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CIVIL HOSSITAL JANJEHLI	(Name of the College / Institution) (Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to obey and respect him / her during the entire	bey and respect him / her during the entire
period of my training.	? 0
Date: 18/11/201	Signature of the Student Pharmacist
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(c) the storage of drugs and medicinal preparations.

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

18/11/2019

Head of the Organization or Phagmageuigal Division Civil Hospital Janjerii Distt. Mandi (H.P.)

SECTION - IV

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SECTION - V

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Institution approved the Pharmacy Council of India

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VOTE:

- Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
- three months. Mordian the period of training in DD/MAI/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
- Training Contract Form for qualification as a Pharmacist The head of an academic training institution, on application, shall supply in triplicate 'Practical
- submitted to the Head of the academic training institution and the other two copies (hereinglier ensure that one copy thereinafter referred to as the first copy of the Contract Form) so filled is After successful completion of the practical training. It shall be the responsibility of the trainee to referred to as the Second copy and the third copy) shall be filed with the traince.

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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

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profession of pharmacy; and 2. Practical experience in -

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(c) the storage of drugs and medicinal preparations.

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

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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

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SECTION - III

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- Practical experience in -
- the manipulation of pharmaceutical apparatus in common use the recognition by sensors characters of chief crude drugs & chemical substance used in medicine

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

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- the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- the storage of drugs and medicinal preparations

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

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Head of the Pharmalunterprivation Distt Mandi (H.P.)

SECTION - IV

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- Each & every Sections should be filled in with correction information, signed & scaled with the authorized person with mentioning the dates
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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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SECTION-II

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SECTION - III

accept Sri / Smt. organisation so that during his /her training he /she may acquire: (Name of the student pharmacist) as a trainee and I agree to give him her training facilities in my STORE cler (Name of the Apprentice Master)

- Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in -
- the manipulation of pharmaceutical apparatus in common use
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

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- the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- the storage of drugs and medicinal preparations.

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

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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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Signature of the Student Pharmacist

SECTION - III

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- the reading, translation and copying of prescriptions including the checking of doses;

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SECTION - IV

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SECTION - V

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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

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SECTION - II

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SECTION - III

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

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NOTE:

- The practical training shall be not less than five hundred hours spread over a period of not less than authorized person with mentioning the dates. Each & every Sections should be filled in with correction information, signed & sealed with the
- three months. Mention the period of training in DDMM/YYYY format only
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- 4 referred to as the Second copy and the third copy) shall be filed with the trainer. submitted to the After successful completion of the practical training. It shall be the responsibility of the trainee to ensure that one copy thereinafter referred to as the first copy of the Head of the academic training institution and the other two copies thereinafter Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

this form has been issued to Sri/Smt. Pally i

out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948. who has produced evidence before me that he/she is entitled to receive the Practical Training as set residing at Vill. Bhadroun PO chailthowk, Ith cheichtyot, Dist! Mandi (N.P.

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period of my training

Signature of the Student Pharmacist

SECTION - III

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- profession of pharmacy; and Working knowledge of keeping of records required by the various Acts affecting the
- Practical experience in –
- the manipulation of pharmaceutical apparatus in common use:
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

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- the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Jule: 25/ 7/201

Head of the Organization or Pharmaceutical Division

SECTION - IV

Chief Pharmacist Civil Hospital Guit-Distr. Manda (H F

pharmacist) has undergone

I certify that

(Name of student

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Head of the Organization or Pharmaceuical Division

SECTION - V

Institution approved the Pharmacy Council of India pharmacist) has 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 certify that (Name of student

Date: 25/11/202

lead of the Academic of lining Institution School of Parmacy Abhilashi University Chall-Chown, Dist. Mandi (H.P.)

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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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who has produced evidence before me that he/she is entitled to receive the Practical out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.	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.
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	(Name of the College / Institution)
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Apprentice Master for the above training and ag-	Apprentice Master for the above training and agree to the company and temperature.
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(c) the reading, translation and copying	in medicine the reading, translation and copying of prescriptions including the checking of doses:

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- 3 the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations

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

Date: 90/11/2/

Head of the Organization or CHIBRIPHINIMABERSION D.H., Pilibhit

SECTION - IV

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SECTION - V

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PRACTICAL TRAINING CONTRACTFORM FOR PHARMACISTS

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(Name of the Student Pharmacist)	1 Rembed Verman

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- 6 the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- the storage of drugs and medicinal preparations

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

Date:

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SECTION-IV

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Head of the Organization Pharmaceutical Division	I certify that The Jankay Verma (Name of student thurnacist) has undergone Five hundred hours training spread over from Date 12 of 12 to 18 11 21 for a period of hazer full-months in accordance with the
mization Division	(Name of student ead over from Date n accordance with the

SECTION V

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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS SECTION-1

	the reading, translation and copying of prescriptions including the checking of doses;	(c) the reading, translation a	
	netical experience in — the manipulation of pharmaceutical apparatus in common use: 5 = 6 the recognition by sensors characters of chief crude drugs & chemical substance used in medicine	2 Practical experience in— (a) the manipulation of phar (b) the recognition by senso in medicine	
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- the dispensing of prescriptions illustrating the commenter methods of administering medicaments, and
- (c) the storage of drugs and medicinal preparations

labse agree that a Registered Pharmacist shall be assigned for his /her guidance

Date: 12/11/201

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SECTION - IV

Date: 12-7/- 3	6. 8'st to 12.11.st for a period of 3	Phirmseist) has undergone Sac	I certify that Prestant Shigh Nogli
Parter a	for a period of 3		HON Mais IN
A Saltania The Signalization of Pharmaceutical Division	months in accordance with the	hours training spread over from Date	(Name of student

SECTION - V

Institution approved the Pharmacy Council of India Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an pharmacist) has completed in all respect his practical training under regulation 20 of the Education certify that KECTOM Singh Megy (Name of student

Date of 12/2011

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- authorized person with mentioning the dates. Each & every Sections should be filled in with correction information, signed & sealed with the
- three months. Mention the period of training in DDAMATYYY format only The practical training shall be not less than five lumdred hours spread over a period of not less than
- Trunning Contract Form for qualification as a Pharmacial The head of an academic training institution, on application, shall supply in triplicate "Practical
- submitted to the Head of the academic training Institution and the other two copies (hereinglier custure that one copy thereinafter referred to as the first copy of the Contract Form) so filled is After successful completion of the practical training, it shall be the responsibility of the trainee to referred to as the Second copy and the third copy) shall be filed with the trainee

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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Date: 27-7/2021	At The activation of the activ
SECTION - II	ON - II
Priva Charker	(Name of the Student Pharmacist)
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>	(Name of the College / Institution)
	(Hospital or Pharmacy) as my
period of my training.	Apprenate master for the access manning are agreed of my training.
	Daniel Park
Date: 3-12-21	Signature of the Student Pharmacist
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(Name of the student pharmacist) as a trainee and	ON - III (Name of the Apprentice Master)
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organisation so that during his /her training he /she	ON – III (Name of the Apprentice Master) d I agree to give him /her training facilities in my e may acquire: —
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- ŝ the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

Date: 3/12/21	3/8/11 to Solution for a period of	pharmacist) has undergone	Lectify that Ruly a Chanter	1	Date Sight: Head of the Branch of the Branc
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	for a period of	75	Chaules	SECTION - IV	
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SECTION - V

Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an pharmacist) has completed in all respect his practical training under regulation 20 of the Education Institution approved the Pharmacy Council of India I certify that P Charles (Name of student

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- Each & every Sections should be filled in with correction information, signed & sealed with the
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- referred to an the Securit copy and the third copy) shall be filed with the trainee course that one capy (hyrothagher referred to as the first capy of the Cournet Form) so filled is submitted to the Head of the academic training institution and the other two capies (hereimother After successful completion of the practical training, it shall be the responsibility of the trainee to

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

Name of student pharmacies) son of the	P
who has produced evidence before me that he/she is entitled to receive the Practical out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.	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: 22-07-202	The activities Institution
7 %	SECTION - II
Chemon Jack Chris Here	(Nume of the Apprentice Master) of Charles Lack Name of the College / Institution)
Apprentice Master for the above training and period of my training.	Apprentice Master for the above training and agree to obey and respect him / her during the entire period of my training.
Date: 248/2021	biyarka Claura. Signature of the Student Pharmacist
1. Vimal Known, Sie	1. Vimal Guran, Sr. Pharmas Name of the Apprentice Master) accept Sri Smt. Miss Pry Janka (Student) Pharmas S)
(Name of the student pharmacist) as a traince and I agree to give organisation so that during his ther training he take may acquire; -	(Name of the student pharmacist) as a traince and I agree to give him ther training facilities in my organisation so that during his ther training he tshe may acquire: —
profession of pharmacy; and 2. Practical experience in –	 Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and Practical experience in –
 (a) the manipulation of pharmaceutical apparatus in common use. (b) the recognition by sensors characters of chief crude drugs & in medicine (c) the reading, translation and copying of prescriptions including 	the manipulation of pharmaceutical apparatus in common use; the recognition by sensors characters of chief crude drugs & chemical substance used in medicine the reading, translation and copying of prescriptions including the checking of doses;
	ing or prescriptions including the energing of doses;

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	157	prescriptions
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l also agree that a Registered Pharmacist shall be assigned for his ther guidance.

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Phirmacist) has undergone 500 kHz hours training spread over from Da S 1201 to 22 111 2021 for a period of Hrye months in accordance with the details enumerated in SECTION III	SECTION-IV
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Pharmaceuteal Division or

SECTION - V

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ouncil of India.	of the Pharmacy Act, 19	pect his practical trainin	
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Date 25/11/201

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- three months. Mention the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
- Training Contract Form for qualification as a Pharmacist The head of an academic training institution, on application, shall supply in triplicate 'Practical
- referred to as the Second copy and the third copy) shall be filed with the trainee submitted to the Head of the academic training institution and the other two copies (hereinafter casure that one copy thereinafter referred to as the first copy of the Contract Form) so filled is After successful completion of the practical training. It shall be the responsibility of the trainer to

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

manipulation of pharmaceutical apparatus in common use; recognition by sensors characters of chief crude drugs & chemical substance used redicine	 (a) the manipulation of pharmaceutical apparatus in common use. (b) the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
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ee to give him /her training facilities in my	Name of the student pharmacist) as a traince and I agree to give him /her training facilities in my
	weeps Sir Sint Rahal Chambran
(Name of the Apprentice Master)	1. Kiron Polo Pharmacyt
	SECTION - III
Signature of the Student Pharmacist	Date 128 04 21
oney and respect than race outing the chair.	Apprentice Master for the above training and agree to obey and respect num rater outing the course period of my training.
(Hospital or Pharmacy) as my	Justines H Marrali at Mer chark
(Name of the College / Institution)	wheat of themore Abhilach University Charl Charle (Name of the College / Institution)
(Name of the Apprentice Master) of	accept but Johan Bula Pharmacist
(Name of the Student Pharmacist)	1 Robert Chaudian
	SECTION - II
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al Chamban	Name of student pharmaciety son of Administration Charles Hat Days

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the dispensing of prescriptions illustrating the commoner methods of administramedicaments, and

the storage of drugs and medicinal preparations

absoragree that a Registered Pharmacist shall be assigned for his /her guidance

Head of the Organization or Plumnagguical Division 200

SECTION - IV

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SECTION - V

pharmacist) has completed in all respect his practical training under regulation 20 of the Education certify that Rahul Chauban

Institution approved the Pharmacy Council of India Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an

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After successful completion of the practical training, it shall be the responsibility of the trainee to the egy that one copy (hereinifler referred to as the first copy of the Contract Farm) so filled is referred to as the Second cupy and the third copy) shall be filed with the transec sationatical to the Head of the accademic training institution and the other two captes (hereinafter

APPENDIX I

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to SriSmt. ASHWANT KUMAR

out in the Education Regulations framed under section 10 of the Pharmagy Act. 1948 who has produced evidence before me that he/she is entitled to receive the Practical Training as set residing at ULL-Broate Po- Broate (Name of student pharmacist) son of / daughter of SHIMTLAP C HAND Tel-Soukaghat Nixt-Howd (HP) Kn-175024.

Teh, Chachyot, Distt. Mandi (n.P.) 1,000

Period of my training.	prentice Master for the above training and a	CLASSIMETH Mandrat News	and of Phanes Abhilaghi warre	accept Kirson Bala Riannacist	1 Ashuari Lumar
Signature of the Student Pharmacist	Apprentice Master for the above training and agree to obey and respect him / her during the entire	(Hospital or Pharmacy) as my	the College / Institution)	(Name of the Apprentice Master) of	(Name of the Student Pharmacist)

SECTION - III

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sation	of th	25	Γ
so that d	e student	Smt.	MARY
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she may acquire: —	(Name of the student pharmacist) as a trainee and I agree to give him /her training facilities in my	3	(Name of the Apprentice Master)

- Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in –
- the manipulation of pharmaceutical apparatus in common use:
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

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- the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- e) the storage of drugs and medicinal preparations.

Lalso agree that a Registered Pharmacist shall be assigned for his ther guidance

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SECTION - IV

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SECTION - V

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Pharmaceutital Division

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	ining in an	Education	(Name of student

Date: 17/14

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- authorized person with mentioning the dates Each & every Sections should be filled in with correction information, signed & sealed with the
- three months. Mention the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
- Training Contract Form for qualification as a Pharmacist The head of an academic training institution, on application, shall supply in triplicate 'Practical
- referred to as the Second capy and the third capy) shall be filed with the traince submitted to the Head of the academic training institution and the other two copies (hereinafter custure that one copy thereinafter referred to as the first copy of the Contract Form) so filled is After successful completion of the practical training. It shall be the responsibility of the trainee to

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION-I

out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.	who has produced evidence before me that he/she is entitled to receive the Practical Training as set 19503	I WILL BADEHOR P.O - HOHMANT I THE JOGINDER NEAR D-MANT	(Name of student pharmacist) son of / daughter of Sh. JAGDISH CHAND	This form has been issued to Sri/Smt. Showship
Pharmacy Act, 1948.	receive the Practical Training as set 19503	ITH - JOGANDERNARAR D-MANT	CHAMIC HSTUD	

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SECTION - II

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EMBP	LASHI UNIV	ERSITY-chaild	Nume of	the College / fr	stitution)
C.	Ortydron - 1:	Cover - HOSpital - Nagrown (Hospital or Pharmacy) as my	(Hospital or	(Pharmacy)	as my
Apprentic	Master for the above	Apprentice Master for the above training and agree to obey and respect him / her during the entire	cy and respect his	n / her during)	the entire
period of I	period of my training.				

Date 13 / 1/20

Signature of the Student Pharmacist

SECTION - III

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- 1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in –
- 6 the manipulation of pharmaceutical apparatus in exmuton use:
- 5 the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses:

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- 3 medicaments, and the dispensing of prescriptions illustrating the commoner methods of administering
- the storage of drugs and medicinal preparations.

Laboragree that a Registered Pharmacist shall be assigned for his ther guidance.

13/11/2011

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ctails enumerated in SECTION III	hurmacist) has undergone	I certify that
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Date

Head of the Organization or Phurmaceutical Division

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SECTION - V

I certify that

(Name of student

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

18/11/20

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- authorized person with mentioning the dates Each & every Sections should be filled in with currection information, signed & scaled with the
- The practical training shall be not less than five hundred hours spread over a period of not less than
- three months. Mention the period of training in DD/MM/YYYY format only. The head of an academic training institution, on application, shall supply in triplicate 'Practical Training Contract Form for qualification as a Pharmacist
- After successful completion of the practical training, it shall be the responsibility of the trainee to referred to as the Second copy and the third copy) shall be filed with the trainee submitted to the Head of the academic training institution and the other two copies thereinafter custure that now copy (hereinafter referred to as the first copy of the Contract Form) so filled is

APPENDIX +

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt. SHUBHAM CHADHARY	CHUBHAM	CHADHORY
(Name of student pharmacist) son of / daughter of	SH, LECH	293
residing at U.D.O Roof, Teh. Book, GISTI Mandi (H.P.) 175008	ア、 今のコーフ	Jandi (H. F.) 17 Sapt
who has produced evidence before me that he/she is entitled to receive the Practical Training as set	is entitled to receive	the Practical Training as set
out in the Education Regulations framed under section 10 of the Pharmacy Act 1948	ion 10 of the Pharma	ev Act 1948

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SECTION-II

period of my training.	Apprentice Master for the above training and agree to obey and respect him / her during the entire	SLASSIME+ in Marchi at New Chowle (Hospital or Pharmacy) as my	Pilarlachi Univerty Charlebook Scharl of Marriag (Name of the College / Institution)	accept Mark Little Learner Magarage (Nume of the Apprentice Master) of	Shubban Chaudhany (Name of the Student Pharmacist)
	thim / her during	or Pharmacy)	of the College / I	f the Apprentice I	e of the Student Pi
	the entire	as my	nstitution)	Master) of	harmacist)

Signature of the Student Pharmacist

SECTION - III

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during his /her t	t pharmacist) a	Shubban	Kita Kuran
rgunisation so that during his ther training he tshe may acquire: -	Name of the student pharmacist) as a trainee and I agree to give him /her training facilities in my	success Sti Smit Shubham Chandhary	(Name of the Apprentice Master)
	vin my		Master)

- 1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in -
- Ξ the manipulation of phurmaceutical apparatus in common use;
- 3 the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

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the dispensing of prescriptions illustrating the commoner methods of adminis

(e) the storage of drugs and medicinal preparations

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

Dite: 02/02/21

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SECTION - IV

D2 00 1 details enumerated in SECTION III pharmacist) has undergone certify that io 29 Shak blog E 176 hundred for a period of theat half months in accordance with the Wandhan hours training spread over from Date (Name of student

Date: 23/11/24

Head of the Organization or Pharmaceutical Division

SECTION - V

Institution approved the Pharmacy Council of India. Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an pharmacist) has completed in all respect his practical training under regulation 20 of the Education certify that SHURKAM (Nume of student

Date: 25/11/2-21

Head of the Academic Fraining Institution

NOTE

Each & every Sections should be filled in with correction information, signed & sealed with the

three months. Mention the period of training in DDMMYYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than

The head of an academic training institution, on application, shall supply in triplicate 'Practical Training Contract Form for qualification as a Pharmacist

ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is After successful completion of the practical training, it shall be the responsibility of the trainee to submitted to the Head of the academic training institution and the other two copies (hereinafter referred to as the Second copy and the third copy) shall be filed with the traince

APPENDIX -1:

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

out in the Education Regulations framed under section 10 of the Pharmacy Act, 1948.	(Name of student pharmacist) son of / daughter of Sachia 619609. (Name of student pharmacist) son of / daughter of Sachia 619609. Tesiding all v - Jibke I - Baryare D - KUKK. HP who has produced evidence before me that he/she is entitled to receive the Practical Learning as set	The firm has been been
is framed under section 10 of the	son of / daughter of Secondary D V.	
he Pharmacy Act, 1948.	Sachia Biswas. D- Kulk W. HD entitled to receive the Practical Learning a	and along
	ning as set	P

Date 22 /0/200

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period of my training	Apprentice Master for the above training and agree to obey and respect him / her during the entire	4 (MIC)	Chool of Phazmay Abrahash University Chall Russe of the College / Institution	accept Nawaway	SUBA	200
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	her during the entity	Pharmacy) as in	! College / That Mulion	Apprentice Master)	(Name of the Student Pharmacist)	
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Signature of the Student Pharmacist

SECTION - III

organisation so that during his ther training he ishe may acquire: (Name of the student pharmacist) as a traince and I agree to give him ther training facilities in my SUBRATA Chief Than march (Name of the Apprentice Master) BISWAS

- 1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in -
- the manipulation of pharmaceutical apparatus in common use;
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

- the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- (c) the storage of drugs and medicinal preparations

Lalso agree that a Registered Pharmacist shall be assigned for his Ajer guidance

Se Algad of the Organization or Crail Pharmaceutical Division

SECTION - IV

1 corning that SUBRATA BISWAS

(Name of student

details enumerated in SECTION III pharmacist) has undergone 30 7/2091 to 15 504 for a period of 3 month, amonths in accordance with the hours training spread over from Date

Date: 15/11/2021

Searchoad of the Organization or Child Hospital Division

SECTION - V

Institution approved the Pharmacy Council of India Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an pharmacist) has completed in all respect his practical training under regulation 20 of the Education l certify that SUBRATA KISWAS (Name of student

Head of the Academic

VOTE:

- Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
- three months. Mention the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
- Training Contract Form for qualification as a Pharmacia The head of an academic training institution, on application, shall supply in triplicate 'Practical
- After successful completion of the practical training, It shall be the responsibility of the trainee to referred to as the Second copy and the third copy) shall be filed with the traines. submitted to the Head of the acculemic training institution and the other two copies (hereingler casure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

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out in the Education Regulations framed under section 10 of the Pharmacy, Act, 1948 residing MVPO- Barmans, the Sades who has produced evidence before me that he/she is entitled to receive the Practical Training as set Name of student pharmacist) son of / daughter of SA Diett Bilespuz Desenden Nath Ban Muca Regues

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SECTION - II

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SECTION - III

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- I. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- 2 Practical experience in -
- the manipulation of pharmaceutical apparatus in common use
- the recognition by sensors characters of chief crude drugs & chemical substance used
- the reading, translation and copying of prescriptions including the checking of doses;

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Date: 29/11/21 I also agree that a Registered Pharmacist shall be assigned for his /her guidance.

Head of the Organization or Pharmaceutical Division

Date: 29/11/21	pharmacist) has undergone 29 8 21 to 2-9 11 2-1 details enumerated in SECTION III
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Ilead of the Organical Blagarn Pharmaceutical Division	Name of student (Name of student hours training spread over from Date to months in accordance with the

SECTION - V

Institution approved the Pharmacy Council of India Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an pharmacist) has completed in all respect his practical training under regulation 20 of the Education I certify that buton (Name of student

Date: 6/12/2021

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NOTE:

- Each & every Sections should be filled in with correction information, signed & sealed with the
- three months. Mention the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than The head of an academic training institution, on application, shall supply in triplicate 'Practical
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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION-1

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net in the Education Regulations framed under section 10 of the Pharmacy Act. 1948.	who has produced evidence before me that he/she is entitled to receive the Practical Training as set	residing at Hosper 292/5 Scalin Hedralles Mondi (H.F.)	1 TOWN !	01.1

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SECTION - II

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SECTION - III

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- J. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy, and
- Practical experience in ...
- the manipulation of planmaceutical apparatus in common use
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses:

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- the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations

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

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SECTION - IV

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SECTION - V

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Date: 17/11/20

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- authorized person with mentioning the dates. Each & every Sections should be filled in with correction information, signed & sealed with the
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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

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SECTION - II

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SECTION - III

- organisation so that during his /her training he /she may acquire: Name of the student pharmacist) as a trainee and I agree to give him ther training facilities in my accept Sri Smt. periodice chandran Por local (Name of the Apprentice Master)
- 1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy, and
- Practical experience in
- (4) the manipulation of pharmaceutical apparatus in common use:
- ŝ the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses.

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the storage of drugs and medicinal preparations. the dispensing of prescriptions illustrating the commoner methods of administering

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

Head of the Pharmacepfical Division Man Pharmacet II Jwalam ikhi

Date: White	details enumerated in SECTION III	Pharmacist) has undergone	I certify that
Head of the Organization of Pharmaceurcal Division	for a period of	Son sand	OF TON-IA
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SECTION - V

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- referred to as the Second copy and the third copy) shall be filed with the trainee. submitted to the Head of the academic training institution and the other two copies (hereinafter ensure that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

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PRACTICAL TRAINING. CONTRACT FORM FOR PHARMACISTS

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rending # 1/11- Horales. Pass of ite Translations, Ter- Polomber 1250 Hangra (45) 176102 out in the Education Regulations framed under section 10 of the Pharmacy Act. 1948 who has produced evidence before me that he/she is entitled to receive the Practical Training as set

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SECTION-II

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SECTION-III

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Date

organisation so that during his ther training he (she may acquire: -(Name of the student pharmacist) as a trainee and I agree to give him ther training facilities in my scuept Sri / Smt. loan kymen 40000 (Name of the Apprentice Master)

- 1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in –
- (#) the manipulation of pharmaceutical apparatus in common use;
- 3 the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

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- 3 the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

I also agree that a Registered Pharmacist shall be assigned for his ther goldance Chief Pharmacist

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Hend of the Organization or Pharmaceutical Division

SECTION - IV

Date: 24/11/2021	The secondance with the	pharmacist) has undergone Son world	I certify that Vipan I
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SECTION - V

Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an	Regulations framed under section 10 of the Pharmacy
ning under regulation 20 of the Education	puarmacist) has completed in all respect his practical training under regulation 20 of the Education
(Name of student	Library Library
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Date: 29/11/10

Lead of the Academic
Training Institution

NOTE:

- authorized person with mentioning the dates. Each & every Sections should be filled in with correction information, signed & sealed with the
- three months. Mention the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
- The head of an academic training institution, on application, shall supply in triplicate 'Practical Training Contract Form for qualification as a Pharmacist
- referred to as the Second copy and the third copy) shall be filed with the trainee. submitted to the Head of the academic training institution and the other two copies (hereinafter ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is After successful completion of the practical training, It shall be the responsibility of the traince to

APPENDIX -

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

out in the Education Regulations framed under section 10 of the Pharmacy Act. 1948.	who has produced evidence before me that he/she is entitled to receive the Practical Training as set	residing at Vill-Kanyant P.O Sanahlar, Diet Handyfor, Tel-Handyfor Forland-177027	Name of student pharmacist) son of / daughter of Sh. SANJAN KUMAR	This form has been issued to Sri/Smt. UTSHAL KUMAR
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SECTION - II

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Signature of the Student Pharmacist

SECTION - III

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- I. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in-
- the manipulation of pharmaceutical apparatus in common use;
- 3 (2) the recognition by sensors characters of chief crude drugs & chemical substance used
- the reading, translation and copying of prescriptions including the checking of doses; in medicine

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- ŝ the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- (c) the storage of drugs and medicinal preparations

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Head of the Organization or Pharmaccution Devision

SECTION - IV

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Date: 1) 12/2-

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SECTION - V

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APPENDIX E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION-1

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SECTION - II

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Date: 13-08-202

Signature of the Student Pharmacist

SECTION - III

- (Name of the student pharmacist) as a trainee and I agree to give him ther training facilities in my organisation so that during his /her training he /she may acquire: accept Sri / Sint. Manvende Yaditya Shorman Shorma (Name of the Apprentice Master)
- I. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in -
- the manipulation of pharmaceutical apparatus in common use
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- the reading, translation and copying of prescriptions including the checking of doses;

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- medicaments; and the dispensing of prescriptions illustrating the commoner methods of administering
- (9) the storage of drugs and medicinal preparations

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Date 12-11-2

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SECTION - IV

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SECTION - V

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Date: 20-11-202

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School of Pharmacy
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- authorized person with mentioning the dates Each & every Sections should be filled in with correction information, signed & sealed with the
- three months. Mention the period of training in DIS/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than
- Training Contract Form for qualification as a Pharmacist The head of an academic training institution, on application, shall supply in triplicate 'Practical
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APPENDIX -F

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION-1

SECTION - II Head of the Pharmacy Act, 1948. Head of the Pharmacy Act, 1948. SECTION - II Head of the Appendix Markets: Secretary of the Student Pharmacist) SECTION - II VOCITIVO E Q Kuna Q (Name of the Appendice Master) of the Appendice Master) of the Appendice Master of the College / Institution) Civil Heshibel Sunda Mayar (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 of the Student Pharmacist Signature of the Student Pharmacist	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.	SECTION-II		Dinesh Ray The Rux	Abhilante University charle about	Civil Hespital Sunder Mayar (Hospital or Pharmacy) as my	Apprentice Master for the above training and agree to obey and respect him / her during the enti- regreed of my training.	SECTION - III	1. Diresh Ray Thaker (Name of the Apprentice Muster)	CUMAR
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the reading, translation and copying of prescriptions including the checking of doses;

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- medicaments, and the dispensing of prescriptions illustrating the commoner methods of administering
- (c) the storage of drugs and medicinal preparations.

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

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SECTION - IV

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SECTION - V

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Head of the Academic Training Institution

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- 1) Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
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APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

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1	the e	8	(Name of the College / Institution)	Maste	(Name of the Student Pharmacist)	
1	ntire	my	tion)	r) of	cist)	
318	001					

SECTION - III

Signature

Student Pharmacist

Name of the student pharmacist) as a trainee and I agree to give him ther training facilities in m	1. Manuender Shorma (Name of the Apprentice Master)	Court Sri / Smt. Abhishak Kennov	Name of the student pharmacist) as a trainee and I agree to give him ther training facilities in my	
--	---	----------------------------------	---	--

- Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
- Practical experience in
- the manipulation of pharmaceutical apparatus in common use;
- the recognition by sensors characters of chief crude drugs & chemical substance used in medicine

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

Cont...

.

5 medicaments; and the dispensing of prescriptions illustrating the commoner methods of administering

(c) the storage of drugs and medicinal preparations

Labso agree that a Registered Pharmacist shall be assigned for his ther guidance

Date 17-11-2

Heaßer file organization Philometricos pital Mary

SECTION - IV

3-8-21 to 16-11-21 details enumerated in SECTION III	certify that
3-8-21 to 16-11-21 for a periot of Three details enumerated in SECTION III	Abhishok Kuman
 hours training spread over from Date Three months in accordance with the	,

Date:

Head of the Shearmander or Pharmaceure (H.P.) Holden or Warmand (H.P.)

SECTION - V

I certify that Abbitable & blanch

pharmacist) has completed in all respect his practical training under regulation 20 of the Education Institution approved the Pharmacy Council of India Regulations framed under section 10 of the Pharmacy Act, 1948. He had his practical training in an (Name of student

Durc: 22/11/201

S no I raining the Academic

NOTE:

Each & every Sections should be filled in with correction information, signed & scaled with the authorized person with mentioning the detect

three months. Mention the period of training in DD/MM/YYYY format only The practical training shall be not less than five hundred hours spread over a period of not less than

Training Contract Form for qualification as a Pharmacist The head of an academic training institution, on application, shall supply in triplicate 'Practical

submitted to the Head of the academic training institution and the other two copies thereinafter After successful completion of the practical training, it shall be the responsibility of the trainee to referred to as the Second copy and the third copy) shall be filed with the traince ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is



ChailChowk, Tehsil Chachyot, Distt. Mandi (H.P.)

Ph: 01907-250408, 9418006520, 9816700520, 9816005139

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Ref No. At 309H CH 112

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Aditya Thakur is a student of B. Pharmacy 4th sem (2styr) School of Pharmacy. Abhitashi University has undergone his Training in CIR instrumental associat School of Pharmacy from 18/03/2021 to 28/03/2021 (Including Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and has per sommer was found excellent.

We wish him success to future professional Endeavour.

CIR In charge

Dept Denn Pharmacy School of Pharmacy Abhilashi University Chall-Chowk, Distt. Mandi (H.P.)



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En:ai: ahhilashigroup agmail.com, website: www.abhilashigroup agmail.com

Ret No. Al. SUPH CIT. 111

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Abhishek is a student of B. Pharmacy 4th sem (2nd yr) School of Pharmacy. Abhilash University has undergone his Training in CIR instrumental room at School of Pharmacy film (8/03/202) to 28/03/2021 (Including Assignments Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour-

CIR in charge

Dean-Plummacy Scribol of Pharmacy School University Chowle, Diett, Mandi (H.P.)



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Ref No. AF SOPH CIR 113

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Akanksha is a student of B. Pharmacy 40 sem (2017) School of Pharmacy. Abhiliashi University has undergone her Training in CIR instrumental room at School of Pharmacy. from 18/03/2021 to 28/03/2021 (Including Assignments / Viva-Voce).

During this period, the sendent has undergone training on various sophisticated instruments of the project and her performance was found excellent.

We wish her success to future professional Endeavour.

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Ref Ser AV SOPH CHU114

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ar. Arpan Chettei is a student of B. Pharmacy 4th sent (2th yr.) School of Pharmacy. Abbilash: University has undergoos his Training in CIR instrumental room at School of Pharmacy from 18/03/2021 to 28/03/2021 (Including Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour.

CIR In charge

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Chall-Chowk, Diett. Mandi (H.P.)



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Ref No. Al SOPH CILLIS

Datesl: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Jyoti Thakur is a student of B. Pharmacy 4thsein (2rdyr). School of Pharmacy. Abbiliato University has undergone her Training in CIR instrumental room at School of Pharmacy from 18/03/2021 to 28/03/2021 Including. Assignments (Vivn-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and her performance was found excellent.

We wish her success in future professional Endeavour-

Cli Incharge

Dean Schook of Pharmacy Abhillashi University Chail-Chowk, Dist. Mandi (H.P.)



ChailChowk, Tehsil Chachyot, Distt. Mandi (H.P.)

Mr. 01907-250408, 9418006520, 9816700520, 9816005139

Emuli abbiliashigraupyymail.com, website: www.abbiliashiuntsersity.in

Ref Nor AL SOPH CHU 116

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Centry that Mr. Keshav Nand is a student of B. Pharmacy 4th sen (2⁴⁴)ri School of Pharmacy. Abhillasii: University has undergone his Training in CIR instrumental room at School of Pharmacy from 18/03/2021 to 28/03/2021 (Including Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour.

CIR In charge

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Emuil abhilashigraupsgmail.com, website: www.abhilashigraupsgrafty.in

Bet Nac Att SciPH CT 17

Dated: 28 03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Costify that left: Mobit Sharmar is a student of B. Pharmacy 4thsem (2thyr) School of Pharmacy. Addition Cornersor, has undergoose his Training in CBC instrumental room in School of Pharmacy from 18:03/2021 to 28:03/2021 (beduding Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour.

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Ref No. At SOPH CL. 118

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Namey Sharma is a student of B. Pharmbey 4th sent (2th yr) School of Pharmacy. Abhilus it University has undergone her Training in CIR Instrumental room at School of Pharmacy it in 18/03/2021 to 28/03/2021 (Including Assignments Vivu-Voce).

During this period, the modern has undergone training on various sophisticated instruments of the project and her periormance was found excellent.

We wish her success in future professional Endervour.

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Dean Schidel of Pharmacy Abhitashi University Chall-Chowk, Distt. Mandi (H.P.)



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Ref No. AU SOPE CE: 119

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

During this period, the student has undergone training on various sophisticated instruments of the project with her jest somance was found excellent.

We wish her success in future professional Endeavour.

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Duted: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

Thin is to Certify that Mr. Nikhil is a student of B. Pharmacy 4"sem (2"yr) School of Pharmacy. Abhilinsto University has undergone his Training in CIR instrumental room at School of Pharmacy from 18/03/2021 to 28/03/2021 (Including Assignments / Viva-Voce).

During this period. The student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour.

CIR in charge

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Ref No. Al. SUPH CR. 121

Dated: 28/07/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Phillips is a student of B. Pharmacy 4thscm (2thye) School of Pharmacy. Abirdana 1 inversity has undergone her Training in CIR instrumental room at School of Pharmacy B. in 18/03/2021 to 28/03/2021 (Including Assignments Viva-Voce).

During the period, the student has undergone training on various sophisticated instruments of the project and her performance was found excellent.

We wish has success in future professional Endoavour.

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Ref No. At. SOPH CL. 122

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Rubul is a student of B. Pharmacy 4th sem (2th yr) School of Pharmacy. Abidian 1 niversity has undergone his Training in CIR instrumental room at School of Pharmacy from 18/03/2021 to 28/03/2021 (Including Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instrusterts of the project and his performance was found excellent.

We wish him socce is as future professional Endeavour.

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Bet No. At SUPPLET 121

Direct: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Robin is a student of B. Pharmacy 4thsens (2rdyr) School of Pharmacy. Abhiliastic University has undergone his Training in CIR instrumental room at School of Pharmacy from 18/03/2021 to 28/03/2021 (Including Assignments) Viva-Vace).

During this period, the undern has undergone mining on various suphraticated instruments of the project and his performance was found excellent.

We wish him success to future professional Endeavour.

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Ref No. AU SOPH CDL 124

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

Dies is to Certify that Mr. Sabil Nnik is a student of B. Pharmacy 4th sem (2th yr) School of Pharmacy. Abhilash: University has undergone his Training in CIR instrumental room at School of Pharmacy from 18/05/2021 to 28/03/2021 (Including Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated lestraments of the project matchinger summer was found excellent.

We wish him success in anuse professional Endeavour

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Chall-Chowk, Distt. Mandi (H.P.)



ChailChowk, Tehsil Chachyot, Distt. Mandi (H.P.) Ph. 01907-250408, 9418006520, 9816700520, 9816005139 Email: abhiltashigrospagmail.com, wwbsite: www.abhiltashignisersity.in

Ref No. Al. SOPH CT 125

Dated: 28/03/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify the 54s. Shagan is a student of B. Pharmacy 4*sem (2*dyr) School of Pharmacy. Abbilion: University has undergone her Training in CIR instrumental room at School of Pharmacy firm 18/03/2021 to 28/03/2021 (hoclading Assignmenta / Viva-Voce).

During this period, the modern has undergone mining on various sophisticated instruments of the project and her performance was found excellent.

We wish for soccess in future professional Endeasour.

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School of Pharmacy : Abbitashi University Chail-Chowk, Dist. Mandi (H.P.)



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Ref No: AU SOPH CIR 126

Dined: 10/04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Aanchal Vermi is a student of B. Pharmacy 60 sem (30 yr) School of Pharmacy. Abhiliasts University has undergone her Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Inelading, Assignments) Viva-Vacc).

During this period, the student has undergone training on various sophisticated instruments of the project and her performance was found excellent.

We wish her success in future professional Endeavour.

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Dean hour Pharmacy School of Pharmacy Abhitashi University Chell-Chows, Dist. Mandi (H.P.)



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Ref No. At SOPH C/R 127

Dated 1004/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Uma Bharti is a student of B, Pharmacy 6th seen (3th yr) School of Pharmacy, Abhilashi University has undergone her Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments: Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and her performance was found excellent.

We wish her success in fidure professional Endeavour.

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Dean Pharmacy School of Pharmacy Aphilanhi University Chall Chovik, Dist. Mandi (H.P.)



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Ref No: AU SUPPLY R 128

-Distail: 10004/2021

TO WHOM SO EVER IT MAY CONCERN

This is for Certify that Mr. Manish Kumar is a student of B. Pharmacy 6th scor. (3rd yr) School of Pharmacy. Abhillashi University has undergone his Training in CIR insurancental rown at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments - Viva-Vosci

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endenyour.



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Ber No. AUSOPH CIR 129

Daniel: 10/04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Jyon Verma is a student of B. Pharmacy 6th sem (3th yr) School of Phoemacy, Arthitashi University has undergone her Training in CIR linurumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments Viva-Vuce)

During this period, the student has undergone training on various sophisticated instruments of the project and her performance was found excellent.

We wish her success in future professional Endeavour.

Aphilashi University Chall-Chowk, Dist. Mandi (H.P.)



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Ref No: AUSOPH CIR 130

Dated: 10/04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Arun Thakur is a student of B. Pharmacy 6th sem (Job yr) School of Pharmies Abhillishi University has undergone his Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour.

CIR In charge

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Ref No: A. SUPH CIR 131

Dated: 10/04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Abhitsek Gupta is a student of B. Pharmacy hth sem (3rd yr) School of Pharmacy. Abhitsals: University has undergone his Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments / Viva-Vocc).

During this period, the student has undergone training on various suphisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour,

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Aprilanti University
Chas-Chowk, Dist. Mandi (H.P.)



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Ref No. AU SOPH Cir. 132

Dated: 10:04/2071

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Leldt Raj is a student of B. Pharmacy 6th sen (3th yr) School of Pharmacy, Abbilastri University has undergone his Training in CBC instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him success in future professional Endeavour.

CIR in charge

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Ref No: AUSOPH CR 133

Duned: 10/04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Anisha Chettri is a student of B. Pharmacy 6th sem (3rd ye) School of Pharmacy. Abhiliash: University has undergone her Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Inchading Assignments: Viva-Voce).

During this period, the student has undergone training on various sopisisticated instructions of the project and her performance was found excellent.

We wish her success in future professional Endenvour.

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CIR in charge

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Ref No: AU/SUPH Cat: 134

Dated 10:04 2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Anna Kumari is a student of B. Pharmacy 6th sem (3rd yr) School of Pharmacy, Abhiliashi University has undergone her Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including, Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instrumeous of the project and her performance was found excellent.

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13med: 10/04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that 84s. Vijny Kumur is a student of B. Pharmacy (sth sem (3rd yr) School of Pharmacy. Abbiliasin University has undergone his Training in CIR instrumental mom at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments / Viva-Voce).

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Ref No: AU SOPH C IL 136

Doted: 10/04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Susmita Subba is a student of B. Pharmacy 6th ann (3th yr) School of Pharmacy. Abbiliato University has undergone her Training in CIR instrumental form at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments | Vivis-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and her performance was found excellent.

We wish her success in future professional Endeavour.

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Ref Not At SOPH Cot 137

Duned: 10/03/202

TO WHOM SO EVER IT MAY CONCERN

This is to Cently that str. Nith Sharma is a student of B. Pharmacy 6.9 sem (3.9 yr) School of Pharmacy. Abhidacia University has undergone his Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments Viva-Voce)

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish from success in future professional Endervour.

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posts of Pharmacy School of Pharmacy Abbitashi Voversity Chall-Choox, Sest, Mandi (H.P.)



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Ref No. All SOPH CH. 138

Date: L004/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Ms. Kiden Bhutia is a student of B. Pharmacy 6th sem (3th yr) School of Pharmacy, Abbilaslai University has undergone her Training in CIR instrumental room at School of Pharmacy from 01/04/2021 to 10/04/2021 (Including Assignments / Viva-Voce)

During this period, the student has undergone training on various sophisticated instruments of the project and her perturbance was found excellent.

We wish her soccess in fature professional Endeavour.

CIR In charge

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Ref No: AU SOPH CIR 139

Direct: 10:04/2021

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Komal Kishor is a student of D. Pharmacy 6th sem (7th yr.) School of Pharmacy. Abhilestic University has undergone his Training in CIR interamental room at School of Pharmacy. from 01/04/2021 to 10/04/2021 (Including: Assignments / Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his performance was found excellent.

We wish him wiede as a junute professional Endercour.

CHE In charge

Seemon in a seemony Single of the seemony Manufacture of the seemon (M.P.)



Chail Chowk, Tehsil Chachyot, Distt. Mandi (H.P.)
Ph. 01907-250408, 9418006520, 9816700520, 9816005139
Email: abhilashigroupigmail.com, websiter www.abhilashigroupigmail.com

Ref No. At. SOPECIR 140.

TO WHOM SO EVER IT MAY CONCERN

This is to Certify that Mr. Pankaj Kumar is a student of B. Pharmacy 6th sem (3th 5r) School of Pharmacy. Abbilium University has undergone his Training in CIR instrumental recon at School of Pharmacy, from 01/04/2021 to 10/04/2021 (Including Assignments) Viva-Voce).

During this period, the student has undergone training on various sophisticated instruments of the project and his periormance was found excellent.

We wish him success in future professional Endeavour.

July Children

School of the Lamber

Dated: 10:04:2021



This certificate is awarded to

ASHISH KUMAR

Has successfully completed the training program on "Handling of Sophisticated Instruments including HPLC and UV Visible Spectrophotometer organized by Central Instrumentation center School of Pharmacy Abhilashi University Chachyot Chailchowk Mandi HP on August 1st 2021 to August 14th 2021

STEE FEET CALLWOOD

Dr, Amit Chaudhary Dean Pharmacy AU

Mr, Sunny Dhiman (CIC Incharge)



This certificate is awarded to

AKANKSHA SHARMA

Has successfully completed the training program on "Handling of Sophisticated Instruments including HPLC and UV Visible Spectrophotometer organized by Central Instrumentation center School of Pharmacy Abhilashi University Chachyot Chailchowk Mandi HP on August 1st 2021 to August 14th 2021

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Mr, Sunny Dhiman (CIC Incharge)



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AVINISH CHAUDHARY

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Mr, Sunny Dhiman (CIC Incharge)



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KAMAL KANT

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A PERMINAGE

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Mr, Sunny Dhiman (CIC Incharge)



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NUTAN THAKUR

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POOJA JAMWAL

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SURENDER KUMAR

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ASHUTOSH THAKUR

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GAURAV KUMAR SHARMA

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KALPANA KASHYAP

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Dr. Amit Chaudhary Dean Pharmacy AU

Mr, Sunny Dhiman (CIC Incharge)

MANDE BANDE BANDE



CERTIFICATE OF PARTICIPATION

This certificate is awarded to

MUKUL SHARMA

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Dr. Amit Chaudhary

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KIRAN KUMARA

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Dr. Amit Chaudhary

Dean Pharmacy AU

Mr, Sunny Dhiman (CIC Incharge)

SECTION - IN

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SECTION-Y

America of all respect his for practical training under Regulation 20 of the Education Regulation framed under section 10 of the Plasmocy Agr. 1948. He she had his her practical virtual to a 1948. He she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual to a 1948 the she had his her practical virtual virtual to a 1948 the she had his her practical virtual virt

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Head of the Acidemic

School of medication

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PRACTICAL TRAINING CONTRACT FORM FOR PHARMACIST



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-	100			200	_
0.31	E - N.	V-10-7	(A P.)		-

Date:

SEC 1103-1				
son of daughter of who has produced a	n issued SANCER Rafi Atimed evidence before me that dion Regulation framed	t he/ she is entitled	to receive the practic	al training as Delhi-110094
Date:			School of Charms ASHBERN Unit Sta	T ion
SECTION - II				
SAMEER	AHMED	(Name of	Student Pharmacist) (f.,,,,,,,
or Pharmacy las my	ne Institution), SON H Apprentice Master for re period of my training	the above training	Name of the od spream, Delvand agree to obey an Student Pharm	d respect (118)
SECTION - III				
SAMETR AT	Na STN 4H THEP (Na Ing facilities in my org	me of the student	Pharmacisty trained a	nd 1 agree to
profession of 2 Practical ex a) The mai b) The reac	nowledge of keeping of of Pharmacy and perience in: nipulation of Pharmace ding, translation and co pensing of prescription	otical apparatus in co	ommon use ns including the chec	cing of doses
	ments and			
d) The ste	orage of drugs and m	edicinal preparation	is. I also agree that	a Registered
Pharma	eist shall be assigned hi	s her gundance	Lau)

Apprentice Master

(Name and Address of the Institution)

R. No- 6500

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations.

authorized person with mentioning the dates.

Training Contract Form for qualification as a Pharmacist

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

 4.8		

Medical Division or Over Head of the Organization or Over Hospital Thursal Distr. Kangra (H.P.)-176107

SECTION - IV

I certify that Aches	Sood	(Name of student
pharmacist) has undergone	500 fine hunder	
14-10-2020 111 23-1-2021	for a period of	84 days months in accordance with the
details enumerated in SECTION II		
		- Legently
Date.		Head of the Organization or
		Phannaceutical Division
		Scenic scenal chief Plasmacon
	SECTION - V	est remal
	DECTION-	
I certify that Acuse Sour	4	- (Name of student
pharmacist) has completed in all re	espect his practical tra	ining under regulation 20 of the Education
Regulations framed under section 1	0 of the Pharmacy A	ct. 1948. He had his practical training in an
Institution approved the Pharmacy (Council of India	J _
- 150 C C C C C C C C C C C C C C C C C C C		2/0
1111 22 02 202	0	Harrison , MIN
1		Train 1905, Medical Officer
	Post Connections	A Thurs
	72700	Ost Kangra (H.P.)-176107
VOTE:	The inyot, Dans	
1) Fach & every Sections should	be filled in with corr	ection information, signed & sealed with the

2) The practical training shall be not less than five hundred hours spread over a period of not less than

** (ther successful completion of the practical training, It shall be the responsibility of the trainee to ensure that one copy thereinafter referred to us the first copy of the Contract Form so filled is

The head of an academic training institution, on application, shall supply in triplicate 'Practical

three months. Mention the period of training in DD/MM/YYYY format only

APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt.	Ashish Sood
(Name of student pharmacist) son of / daughter of 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 sec	tion 10 of the Pharmacy Act, 1948.
	Treated -
Date:	Traffing Tonusumon Hand Hand
SECTION	DN - II
1 ASheek Sood	(Name of the Student Pharmacist)
accept U.P.O. Bhowever Ter Palempn	Name of the Apprentice Master) of
Dr. Angar scalia	(Name of the College / Institution)
C.H. Zhural	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree	e to obey and respect him / her during the entire
period of my training.	John's L
Date:	Signature of the Student Pharmacist
SECTIO	N – III
1. Dr. Angar Walia	(Name of the Apprentice Master)
accept Sri Smt. Asking Soul	
(Name of the student pharmacist) as a trainee and	I agree to give him /her training facilities in my
organisation so that during his /her training he /she	
profession of pharmacy; and 2. Practical experience in — (a) the manipulation of pharmaceutical a	
(b) the recognition by sensors characters	of chief crude drugs & chemical substance used

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

in medicine

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

2) hate:

Head of the Organization or Pharmaceutical Division

SECTION - IV

certify that Reema	ELLANGO	(Name of student
pharmacist) has undergone	504-	hours training spread over from Date
details enumerated in SECTION III		Ox
Date:		Head of the Organization or Pharmaceutical Division

SECTION - V

pharmacist) has 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 Instruction approved the Pharmacy Council of India.

25/2/2021

Teaching Institution
SENIOR MEDICAL Kangra
Civil Hospital, Kangra

VOITE:

It Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.

 The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only

3) The head of an academic training institution, on application, shall supply in triplicate. Practical Framing Contract Form for qualification as a Pharmacist.

in their successful completion of the practical training. It shall be the responsibility of the trainer to ensure that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sr	i/Smr. Reena Kuner:
(Name of student pharmacist) son of /	
residing at V. Natesh 10	and referred to the second sec
	that he she is entitled to receive the Practical Training as set
	ed under section 10 of the Pharmacy Act, 1948.
	The state of the s
Date:	Head of Theoremsey
	Training Health Interstry Chall-Chown
	Yeh, Chachyot, Distr. Mandi (H.P.)
0	SECTION - II
1 Reena Kur	(Name of the Student Pharmacist)
accept Rakesh Kumar	Photomaciat (Name of the Apprentice Master) of
Abhilashi Universi	ty (Mandi) (Name of the College / Institution)
	(Hospital or Pharmacy) as my
Apprentice Muster for the above training	ng and agree to obey and respect him / her during the entire
period of my training.	
	16 - mi -
Date:	Signature of the Student Pharmacist
	SECTION - III
1 Rakerh Kumar	Pharmacist (Name of the Apprentice Master)
accept Sri Smt. Respons	(the control of the Apprentice Waster)
	trainee and I agree to give him /her training facilities in my
organisation so that during his /her train	
	oing of records required by the various Acts affecting the
profession of pharmacy; and	ing of records required by the various Acts affecting the
2 Practical experience in -	accutical apparatus in common use:
(b) the recognition by sensors	characters of chief crude drugs & chemical substance used
in medicine (c) the reading translation and	
The transfer of the state of th	A COMPANIE OF ALL PROCESSIONES AND ADVANCED

SECTION-IV

1 centry that Richi Salhetra

..... (Name of the student Pharmacist) has

undergone \$60 hours training spread over 34

...... mooths in accordance

with the details enumerated in SECTION III.

Dates

Head of the Organization of Phatocaccutical Division

Children's Grevariety Child-Child Date Manel (HJC)

Die Shiry STrainteer Process Singal

SECTION - V

Completed in all respect his her practical training under Regulation 20 of the Education Regulation framed under section 10 of the Plasmack Act 1048 He she had his her practical training in an institution approved by the Pharmacy Council India.

Date: 16/04/2021

Head on the Academic Training Institution

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I	
this form has been issued Richi. Sol hat son of daughter of Row. Solhatea who has produced evidence before me that has she set out in the Education Regulation framed under s	is entitled to receive the practical training as
Date:	School of Pharmacy Abblisshi University at on Chall-Chorn, Diett. Mandi (H.P.)
SECTION - II	
Richi Salhaba	.(Name of Student Pharmacist) of
RAKESH KOMAK Master (Name of the Institution) Saverpuri Sa or Pharmacy to my Apprentice Master for the abo Her during the entire period of my training.	
Date:	Student Pharmicist
SECTION - III	
Richi Salbotra	he student Pharmacist) trainee and Lagree to
Working knowledge of keeping of record profession of Pharmacy and Practical experience in:	Is comine by the various Acts affecting the
a) The manipulation of Pharmaceutical app b) The reading, translation and copying of	paratus in common use. prescriptions including the checking of doses, ting the common methods of administering
medicaments and	
d) The storage of drugs and medicinal	preparations. I also agree that a Registered
Pharmacist shall be assigned his her go	La sulve
Date: (5	C-SW)(Name and Address of the Institution)
	The state of the s

APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. 8	wobhen Dogue
(Name of student pharmacist) son of / daughter of	Sh. Subhash chang ploone
(Name of student pharmacist) son of / daughter of residing at VPO Blyobus Teh.	Joisinghbur Diett Kongre
who has produced evidence before me that he/she	
out in the Education Regulations framed under section	
Date 3/10/20	Heart of the Academy Charles
	O LA JUSTINE LA CONTRACTOR DE LA CONTRAC
SECTIO	N - II
SHOBHEN DOGRA	(Name of the Student Pharmacist)
DECEPT RAJESH KATOCH	(Name of the Apprentice Master) of
ABHILASHI UNIVERSITY MAN	
Civil Hospital Baijneth Dist Kang	un (H.P) Hospital or Pharmacy) as my
Apprentice Master for the above training and agree	to obey and remove him / her during the entire
period of my training.	to oney and respect thin ther during the entire
Trans or no manning.	
Date	Toolse
17ats	Signature of the Student Pharmacist
encertain	A+ 444
SECTION	N-III
L. RAJESH KATOCH	(Name of the Apprentice Master)
accept ST Smt. SHOBHEN DOGRA	
(Name of the student pharmacist) as a trainee and	I agree to give him /her training facilities in my
organisation so that during his /her training he /she i	may acquire: —
Working knowledge of keeping of reco profession of pharmacy; and Practical experience in –	rds required by the various Acts affecting the
(a) the manipulation of pharmaceutical ap	
 (h) the recognition by sensors characters 	of chief crude drugs & chemical substance used

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

in medicine

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Date: 06-02-2621

CHIEF PHARMACISTS
Head of the sagahization or
Pharmaceuties Privision

SECTION - IV

certify that SHOBHEN Do	CLRA (Name of student
phurmacist) has undergone 500	hours training spread over from Date
07-lo-20 to 31 -01 - 2621 for a period of details enumerated in SECTION III	11-
Date	Head in the Organization (P.) Pharmaceutical Division

SECTION - V

t certify that SHOBHEN ODGRA	(Name of student
pharmacist) has completed in all respect his practical training under regulation	
Regulations framed under section 10 of the Pharmacy Act, 1948. He had his pro-	actical training in an
Institution approved the Pharmacy Council of India.	

Dat 17/02/2011

Head the Academic
Training Institution

NUTE:

- Is Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
- 2) The peactical training shall be not less than five hundred hours spread over a period of not less than these months. Mention the period of training in DD/MM/YYYY format only
- 5) The head of an academic training institution, on application, shall supply in triplicate "Practical Training Contract Form for qualification as a Pharmacist
- in other successful completion of the practical training. It shall be the responsibility of the trainer to ensure that one copy (hereinafter referred to us the first copy of the Contract Form) so filled is

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

unthorized person with mentioning the dates

Teaning Contract Form for qualification as a Pharmacist

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

Date	17/	03	21
	. 6-		

Head of the Proprienting Pharmacoptend Michigan Hamirpur (H.P.)

SECTION - IV

1 certify that	Kanchan	(Name of student
pharmacist) has undergone [1] [1] 202 10 17 03 details enumerated in SECTIO	2021 for a period of	hours training spread over from Date months in accordance with the
Date 17/03/21		Head of the Organization or Pharmaceutical Division Medical Superintendent Dr. RKGMC HAMIRPUR
	SECTION -	V
1 certify that	Kanchan	(Name of student
Regulations framed under sect in Transcon approved the Pharm	ion 10 of the Pharmacy /	Head of the Academic Tribung Institution School of Pharmack All Pascil University Assistances Ten Charbyot, Data assistances
11 Field & every Sections si	hould be filled in with cor	rection information, signed & sealed with the

2) The practical training shall be not less than five hundred hours spread over a period of not less than

) The head of an academic training institution, on application, shall supply in triplicate Practical

After successful completion of the practical training, It shall be the responsibility of the trainee to curvate that one copy thereinafter referred to as the first copy of the Contract Form; so filled is

three months. Mention the period of training in DD/MM/YYYY format only

APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form h	as been issued to Sr	i/Smt.	Kand	ran	
(Name of student p	oharmacist) son of /	daughter of	Mr	Rajish	Kumar
residing at Yill-	Dhagwani Po-	Khaudo	Tuh- Dh	aumbur	Kumare Dist - Mandi H.P
	The state of the s				Practical Training as set
out in the Educatio	n Regulations frame	d under section	on 10 of the	Pharmacy /	Act., 1948.
- 6				Dean	N
Date 17/03/2	021		F	lead of the	Wilderly Chail-Chowk
4				Traminada	Stution Vandi (H.P.)
		SECTION	N - II		
9	Kanchan			(Name of	the Student Pharmacist)
песерт 5	aroj Kauno	tal		Name of th	e Apprentice Master) of
Abhilashi	University	Chailcha	wk	(Name of	the College / Institution)
De RKGM	araj Kaune University C Hamiespe	ve [H.P.) (Hospital o	Pharmacy) as my
				d respect his	m / her during the entire
period of my training	ng.				ales
				Kan	char
Date: 17/03/20	2.1		S	ignature of t	he Student Pharmacist
		SECTION	1-111		
1	Saraj Kaus			(Name of	the Apprentice Master)
accept Sri / Smt.	Kanc	han			
(Name of the stude	ent pharmacist) as a	trainee and I	agree to g	ive him /her	training facilities in my
organisation so that	during his /her train	ning he /she m	nay acquire	-	
		ping of recor	ds require	d by the var	rious Acts affecting the
	on of pharmacy; and experience in -				
	anipulation of phare				A CONTRACTOR OF THE PARTY OF TH
	edicine	s characters o	of eniet em	de drugs & d	chemical substance used
(c) the re	ading, translation ar	id copying of	prescriptio	ns including	the checking of doses;

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

1 abou agree that a Registered Pharmacist shall be assi	igned for his /her guidance.		
Date	SndPhainfaget Moon or Zidner Hospital Mariet Disti Mandi (H.P.)		
SECTION - I	v		
pharmacist) has undergone 500 40Ctobes 10 2 Feb 2021 for a period of details enumerated in SECTION III	(Name of student hours training spread over from Date Three months in accordance with the Head of the Organization or		
SECTION - V	Pharmaceutical Division		
pharmacist) has completed in all respect his practical tra Regulations framed under section 10 of the Pharmacy Action approved the Pharmacy Council of India.	(Name of student ining under regulation 20 of the Education at 1948. He had his practical training in an		
This 24/01/2011	Head Pile Academic Coming Institution Teh, Guachyot De		

In Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.

2) The practical training shall be not less than five hundred hours spread over a period of not less than surce months. Mention the period of training in DD/MM/YYFY format only

It the head of an academic training institution, on application, shall supply in triplicate. Practical Daining Contract Form for qualification as a Pharmacist

4) After successful completion of the practical teaming, it shall be the responsibility of the trainer to curing that one copy thereinafier referred to as the first copy of the Contract Form so filled is

APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. M	Seahou Thobus
(Name of student pharmacist) son of / daughter o	
	orta Jeh - Sarkaghat Distl-Ward
who has produced evidence before me that he/she	
out in the Education Regulations framed under sec	tion 10 of the Pharmacy Act, 1948.
Date: 5/11/2.20	Head of the Anti-Charle Charles Train of the Anti-Charles Charles Char
SECTI	ON - II
Mischay theleur	(Name of the Student Pharmacist)
securi Smt Shradha Rathorson Phe	Amacst 3 (Name of the Apprentice Master) of
20nal Hospital Mand	(Name of the College / Institution)
	(Hospital or Pharmacy) us my
Apprentice Master for the above training and agree	ee to obey and respect him / her during the entire
period of my training.	
	a facilities and the same
Pric:	Signature of the Student Pharmacist
* SECTION	DN – III
1. Smt Shradha Rather Sr. Pharr	naeist 3 (Name of the Apprentice Master)
accept Sri / Smt Mr. Allschay Pha	
(Name of the student pharmacist) as a trainee and	
organisation so that during his /her training he /she	may acquire: —
2. Practical experience in – (3) the manipulation of pharmaceutical and the recognition by sensors character in medicine	apparatus in common use; s of chief crude drugs & chemical substance used of prescriptions including the checking of doses;

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

1 also agree that a Registered Pharmacist shall	be assigned for his /her guidance.
	21424
Date:	Head St. Pharmacist I/C
	Pharmacist I/C Pharmacist I/C Pharma

SECTION - IV

	nal Hakur	(Name of student	
pharmacist) has undergone	500	hours training spread over from Date	
14.10.2020 to 11.2.2021.	for a period of	months in accordance with the	
defines enumerated in SECTION III		Markey	
Date 12-2-2021		Head of the Element Phartman priper Phartman priper Division	

SECTION - V

1 write that Komail Thataur	(Name of student
pharmacist) has completed in all respect his practical training under regulation	
Regulations framed under section 10 of the Pharmacy Act, 1948. He had his pr	netical training in an
Institution approved the Pharmacy Council of India.	artitut annone in mi
Α.	

1200 23/02/2021

Head of the Academic

Framing Institution

As all University

Ten. Coastlyof, Distr. 1997

NOTE:

- Is Each & every Sections should be filled in with correction information, signed & sealed with the anthorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than storce mouths. Mention the period of training in DD/MM/YYYY format only.
- 34 The head of an academic training institution, on application, shall supply in triplicate Practical Tectning Contract Form for qualification as a Pharmacist
- It is successful completion of the practical training. It shall be the responsibility of the trainee to ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is

APPENDIX -E

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has be	en issued to S	ri/Smt. Komal	Thakur	
Name of student pharm residing at View Kee	nneist) son of	daughter of Sh	Jasuart	Singh
		THE RESERVE OF THE PARTY OF THE		
				the Practical Training as set
out in the Education Re	guations train	ed under section 10	or the Pharma	Cy Act. 1946.
Date: 05/30/2020			Head of It	and of Physical Charles Charle
0 1				
		SECTION - II		
Kom	al Tha	kur	(Name	of the Student Pharmacist)
accept Shradha	Rathore	Pharmacist &	Zc_(Name of	f the Apprentice Master) of
accept Shradhar . Y. 4.	mande	4.	(Name	of the College / Institution)
				or Pharmacy) as my
Apprentice Muster for t	he above train	ing and agree to ob-	ey and respect	him / her during the entire
period of my training.			Control of the Control of the Control	Section of the sectio
				A kor
Date:			Signature	of the Student Pharmacist
		SECTION - III		
1 111 11 11	0.11	PP.	G. (N)	of the Apprentice Master
accept Sri / Smt.		thakur	/e (Name	of the Apprentice Master
	The second second	The state of the s		
				her training facilities in my
organisation so that duri				
profession of 2. Practical expe	pharmacy; and crience in -			various Acts affecting the
				& chemical substance used

(c) the reading, translation and copying of prescriptions including the checking of doses.

in medicine

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drogs and medicinal preparations.

Later agree that a Registered Pho	rmacist shall be assigned for	his /her guidance.
Date	P	Sr-Pharmagarijic or Zenarrijispilarijishdi Distt Mandi (H.P.)
	SECTION - IV	
plantacist) has undergone F	Chander	(Name of student
6.10.2.20 11 13.1-2021	for a period of Three	training spread over from Date months in accordance with the
Diffe.	Hea	d Ministerin Superin and ont in the delication of the delication o
	SECTION - V	
1 certify that Havis Bonarmacist) has completed in all respondentials framed under section 10 as to along approved the Pharmacy Co	of the Pharmacy Act, 1948.	
27/01/2021	Head	I of the Academic

NOTES

Is each & every Sections should be filled in with correction information, signed & souled with the authorized person with mentioning the dates.

It is practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM-YYYY format only

It the head of an academic training institution, on application, shall supply in triplicate "Practical Training Contract Form for qualification as a Pharmacist

ther successful completion of the practical training, It shall be the responsibility of the trainee to a name that one copy thereinafter referred to as the first copy of the Contract Form so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sfi/Smt. HAR	NOH CHANDER
(Name of student pharmacist) son of / daughter of 34	RATTAN CINUTH
residing at VILL CHATROT P.O MASHWAR	U. Mariana
who has produced evidence before me that he/she is en	titled to receive the Practical Training as set
out in the Education Regulations framed under section I	0 of the Pharmacy &Ct, 1948,
	Dean School of hermacy.
Date:	Head of Abba Aletsanivery Chall-Chowic
	Training (histribation Plant Mandi (H.P.)
S. T. S.	
SECTION -	II.
Harish Chander.	(Name of the Student Pharmacist)
scrept St Manoj Luman Sr. Pharma	(Name of the Apprentice Master) of
Pharmacist 1/C. 2 mal Hospital Mandi	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to c	obey and respect him / her during the entire
period of my training.	
	(ample
Dates	Signature of the Student Pharmacist
C .	
SECTION - I	Ш
1. 5h manoj humar sr. Pharmacist	- (Name of the Apprentice Master)
accept Sri Smr. Hartsh Chander.	
Name of the student pharmacist) as a trainee and I agre	ce to give him /her training facilities in my
organisation so that during his /her training he /she may :	
Working knowledge of keeping of records of profession of pharmacy; and Practical experience in - (a) the manipulation of pharmaceutical apparair	
(b) the recognition by sensors characters of ch	nief crude drugs & chemical substance used

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations.

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

Varie	301	41	417
Alle	30	13.4	20)

Head of the Openitorsion or Philiping equical Division Solan Regional Hospitalor Solan Distr. Solan (HP)

SECTION - IV

certify that Blin chand	(Name of student
plantacist) has undergone 500	hours training spread over from Date
15-19-26 to 39-1-2-21 for a period of	&w Daymonths in accordance with the
details enumerated in SECTION III	land -
	Sr. Medical Superintendent
i kee.	Pharmaceutical Division
SECTION - 1	
sharmacist) has completed in all respect his practical tra	(Name of student
Regulations framed under section 10 of the Pharmacy A	ct, 1948. He had his practical training in an
nstitution approved the Pharmacy Council of India.	Dean Sch Lobon Land
22/4/2021	At Hendlan the Academic Ten. Children gunstantion p

WHITE:

- is tach & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only
- 2) The head of an academic training institution, on application, shall supply in triplicate 'Practical Training Contract Form for qualification as a Pharmacist
- 4) After successful completion of the practical training. It shall be the responsibility of the trainee to ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled in

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. Blube (
(Name of student pharmacist) son of / daughter of Sh	
residing at Village Chara . P.O. Basal Teh	\$ DIST Solan (HP) PIN . 173213
who has produced evidence before me that he/she is entit	led to receive the Practical Training as set
out in the Education Regulations framed under section 10	of the Pharmacy Act. 1948.
	Ω
Date 3 10 20	Head of the occupant of the Charles
SECTION - II	
1 Bhin Chand	(Name of the Student Pharmacist)
accept Madan Co-pul	(Name of the Apprentice Master) of
Abhilashi University mandi H.P.	(Name of the College / Institution)
Regional Hospital Solon	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to ob	
period of my training.	
	School of Harrist channel
Date:	Signature of the Student Pharmacist
	The state of the s
SECTION – III	
1 00 1 6 - 1	and the second
1 Madon Gopal	(Name of the Apprentice Master)
accept Still Smt. Blin Chang	The second was a second
(Name of the student pharmacist) as a trainee and I agree	
organisation so that during his /her training he /she may ac	quire: —
Working knowledge of keeping of records records records; and Profession of pharmacy; and	quired by the various Acts affecting the
Practical experience in – (a) the manipulation of pharmaceutical apparatus	s in common use;

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

in medicine

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Dane

Hend of Chief Pharmacistri or | Pharm CH Shahput vision

SECTION - IV

I certify th	III Chang	ler kont			(Name of	student
phomocos) has	undergone 8	4 worker days	hours train	ing spread	over from	Date
		for a period of				
letinis enumerated	in SECTION III					

27-1-2021

Head of the Head Pharmacist or Pharmaceur Sharmaceur Sharmaceur Shareston

SECTION - V

Charder Kant	(Name of student
plannia ist) has 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 pro-	actical training in an
in distriction approved the Pharmacy Council of India.	

27-1-2021

48321 -

Head of the Academic

Tele conchyst. Distr. Mandi (H.P.)

1- faith & every Sections should be filled in with correction information, signed & scaled with the summitteed person with mentioning the dates.

2 (80 penetical training shall be not less than five hundred hours spread over a period of not less than love months. Mention the period of training in DD MM YYYY format only.

The head of an academic training institution, on application, shall supply in triplicate. Practical training Contract Form for qualification as a Pharmacist

ther successful completion of the practical training. It shall be the responsibility of the trainee to ensure that one carry thereinafter referred to as the first capy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This fi	orm has been issued to Sri/Smt. Gray	der Kant
(Name of stu	dent pharmacist) son of / daughter of_	SH Nand Lail
		a sist knopk (HP
		entitled to receive the Practical Training as set
	ication Regulations framed under section	
Date: 03/1	0/20	Head orbital Academic chall-Chown. Training Fishibilitions: Mana., and
0	SECTION	N - 11
1	Charder Kast	(Name of the Student Pharmacist)
иссері	Bakete Komen	(Name of the Apprentice Master) of
	Ashelade university	(Name of the College / Institution)
0	H Skalper	(Hospital or Pharmacy) as my
period of my t		Chemoley Kont Signature of the Student Pharmacist
0	SECTION	- III
1	Bobett Kuran	(Name of the Apprentice Master)
accept Sri / 3	Sint. Chardes Kont	
Name of the	student pharmacist) as a trainee and I	agree to give him /her training facilities in my
organisation s	o that during his /her training he /she m	ay acquire: —
pro 2. Pra	rking knowledge of keeping of recon- fession of pharmacy; and ctical experience in – the manipulation of pharmaceutical app	ds required by the various Acts affecting the saratus in common use:
(b)	the recognition by sensors characters of in medicine	f chief crude drugs & chemical substance used prescriptions including the checking of doses;

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

12010

Headi Rharmacist (/O# PhZonal Hospital Wandi Distt Mandi (H.P.)

riP)

Teh, Cauchyot, Dis-

	SECTION -	
cently that Abhinan	dan Aggra	(Name of student
pharmacist) has undergone	500	hours training spread over from Date
2940.2020 W 15.2.2021	for a period of	three months in accordance with the
delay characted in SECTION III		A STATE OF THE STA
They.		Head Affine Phoentengent Phalmicenterial Lyvision Mandi (H.P.)
*		
	SECTION -	V
Abhimanday	Dogia	(Name of student
pharmacist) has completed in all resp	ect his practical tra	aining under regulation 20 of the Education
Reculations framed under section 10	of the Pharmacy A	et. 1948. He had his practical training in an
In transcompressed the Pharmacy Co	suncil of India.	A Constitution of the last
16/02/2021		madal to

Is taken devery Sections should be filled in with correction information, signed devealed with the authorized person with mentioning the dates.

In the reactical training shall be not less than five hundred hours spread over a period of not less than cores months. Mention the period of training in DD/MM/YYYY format only.

* The head of an academic training institution, on application, shall supply in proficate Practical contract Form for qualification as a Pharmacist

of the vaccessful completion of the practical training, it shall be the responsibility of the trainee to come that one copy thereinafter referred to as the first copy of the Contract Forms so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri	Smr. Abbinous	dan Dousa
(Name of student pharmacist) son of /	daughter of M. R	Parech Mass
residing at 71/11 Tarna - 17	Erros Mondi	Moundal Product
the same of the sa		d to receive the Practical Training as set
out in the Education Regulations framed		
		0
Date:		Head of the Academic
TWAN		Essining Institution
0-		Abi Teh. Achyut, D. Mandi (N.P.)
	SECTION - II	
ABHINANDAN	DOGRA	(Name of the Student Pharmacist)
wood Shradha Rathers Pha	rmacist 7/c	_ (Name of the Apprentice Master) of
BBNICASHI UNNE		(Name of the College / Institution)
20ML HOSPITAL,	nANDI (HP,	/ (Hospital or Pharmacy) as my
		and respect him / her during the entire
period of my training.		
		() South
13ac 28/10/2020		Signature of the Student Pharmacist
0.4		
	SECTION - III	
1. Shradka Rathore Pt	Carmacist S/R	(Name of the Apprentice Master)
ICCOPT Sri Smt. ABNINAND		
Name of the student pharmacist) as a t		
organisation so that during his /her train		
		ired by the various Acts affecting the

- 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 recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- (c) the reading, translation and copying of prescriptions including the checking of doses;

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Date

Head of the magniful planet.

Bharmaceons in the polymore

Zonst Mandi (Hiphym

Distr Mandi (Hiphym

SECTION - IV

I certify that Machesh Kumas Bhardway	(Name of student
plannancist) has undergone Five Hunstel hours training spread	l over from Date
F - 18 - 17 - 6 - 1 - 100	ecordance with the
Schuls chamerated in SECTION III	- 1

20.1.2021

Hold of the Organization or Pharmaceutical Division

SECTION - V

that Mahes Lumay Bherdway (Name of student phermacist) has 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 instrument approved the Pharmacy Council of India.

27/01/2021

Head of the Academic Francis Distillation

1021

teach is every Sections should be filled in with correction information, signed it sealed with the weatherized person with mentioning the dates.

The practical training shall be not less than five hundred hours spread over a period of not less than three mentles. Mention the period of training in DD/MM/YYYY format only

The head of an academic training institution, on application, shall supply in triplicate "Practical commercial Contract Form for qualification as a Pharmacist

in other energy-stal completion of the practical training, it shall be the responsibility of the trainee to ensure that one copy thereinofter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to	Sri/Smt. MAHE	SH KHMAR BHARDWAY
(Name of student pharmacist) son o		
residing at vill + P.o.	MATHWAR	TCH. SADAR DISTY. MANUE HI
		d to receive the Practical Training as set
out in the Education Regulations fra		
Date:		Dean School of Phermacy, Chall-Chowle, Training Institution Distr. Man & (Hold)
	SECTION - II	
Makesh Kuma	r Bhardwaj	(Name of the Student Pharmacist)
Makesh Kuma	Rathore	(Name of the Apprentice Master) of
Pharmacist 9)		(Name of the College / Institution)
"Lonal Hospita		(Hospital or Pharmacy) as my
		and respect him / her during the entire
period of my training.		
Date;		Signature of the Student Pharmacist
	SECTION - III	
1. Smf Shradha	Rathere	(Name of the Apprentice Master)
accept Sri Smt. Machesh	Kumas Bhard	waj
		o give him /her training facilities in my
organisation so that during his /her to	raining he /she may acq	uire: —
profession of pharmacy; a 2. Practical experience in – (a)—the manipulation of ph	nd armaceutical apparatus	in common use; crude drugs & chemical substance used

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

in medicine

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt. Who	Sood
(Name of student pharmacist) son of / daughter of Sk.	Salbal Soud
residing at Ward No 7. Mandix Road	Shakti Gali Kangra (4. P.) 1760)
who has produced evidence before me that he/she is entitled	I to receive the Practical Training as set
out in the Education Regulations framed under section 10 of	
Dine 04/02/2021	Head of the Caleman Chall-Cr
1 1-	Training Training out Mandi (c.d.)
SECTION - II	
1 Mita Sad	Oliver Ed. Pr. L. Ol
0 1 2 1 1 2 01 +	(Name of the Student Pharmacist)
Mitin Sood Mitin Sood Mitin Sood Makesh Kumar Pharmacist Makesh Kumar Pharmacist Mitin Sood Miti	_ (Name of the Apprentice Master) of
Frontcashi college ate Phismacy	(Name of the College / Institution)
CIVIL Hospital Kangra	(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.	.,
	Nitinsered
Date: 64/02 / 2021	Signature of the Student Pharmacist
SECTION - III	
1 Rakesh Kumar	Oleman of the Assession Advances
accept Sri Smt Nitin Good	(Name of the Apprentice Master)
	1. 1. 2
(Name of the student pharmacist) as a trainee and I agree to	
organisation so that during his /her training he /she may acqu	ire: —
Working knowledge of keeping of records requi- profession of pharmacy; and Practical experience in	ired by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt. Who	Sood
(Name of student pharmacist) son of / daughter of Sk.	Salbal Soud
residing at Ward No 7. Mandix Road	Shakti Gali Kangra (4. P.) 1760)
who has produced evidence before me that he/she is entitled	I to receive the Practical Training as set
out in the Education Regulations framed under section 10 of	
Dine 04/02/2021	Head of the Caleman Chall-Cr
1 1-	Training Training out Mandi (c.d.)
SECTION - II	
1 Mita Sad	Oliver Ed. Pr. L. Ol
0 1 2 1 1 2 01 +	(Name of the Student Pharmacist)
Mitin Sood Mitin Sood Mitin Sood Makesh Kumar Pharmacist Makesh Kumar Pharmacist Mitin Sood Miti	_ (Name of the Apprentice Master) of
Frontcashi college ate Phismacy	(Name of the College / Institution)
CIVIL Hospital Kangra	(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.	.,
	Nitinsered
Date: 64/02 / 2021	Signature of the Student Pharmacist
SECTION - III	
1 Rakesh Kumar	Oleman of the Assession Advances
accept Sri Smt Nitin Good	(Name of the Apprentice Master)
	1. 1. 2
(Name of the student pharmacist) as a trainee and I agree to	
organisation so that during his /her training he /she may acqu	ire: —
Working knowledge of keeping of records requi- profession of pharmacy; and Practical experience in	ired by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
 - (e) the storage of drugs and medicinal preparations.

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

Date: 08/2/21

Head of the Openication of Phalmacoureau Moham C.

SECTION - IV

(Name of student
hours training spread over from Date
of months in accordance with the
bull sto.
Head of the Organization or Pharmaceutical Division Series Senior Medical Officer I/c PH.C., Gharnan
V - V
(Name of student
l training under regulation 20 of the Education
y Act, 1948. He had his practical training in an
Λ
Helicas the Academic Iraming matitation
Ten. Construction (A.P.)

NOTE

- Is Each & every Sections should be filled in with correction information, signed & scaled with the authorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three menths. Mention the period of training in DD/MM/YYYY format only.
- It The head of an academic training institution, on application, shall supply in triplicate "Practical Training Contract Form for qualification as a Pharmacist
- one encessful completion of the practical training. It shall be the responsibility of the trainee to casare that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. DINE.	SH SHARMA
(Name of student pharmacist) son of / daughter of Sp	B.R. SHARMA
residing at House No. 26 SANGAM ENCL	AVE , SECTOR 48 (A) CHANDIGARH.
who has produced evidence before me that he/she is en	
out in the Education Regulations framed under section	
Date 07 10 2020	Head of the Action of Charles P. Training Institution
SECTION -	п
1 Dinneyh chaviman	(Name of the Student Pharmacist)
scrept Amil Kunnast	(Name of the Apprentice Master) of
Parimenty Health centary	(Name of the College / Institution)
Charuan	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to	
period of my training.	
	Signature of the Student Pharmacist
124c 08/2/21	Signature of the Student Pharmacist
SECTION -	111
1. Amil kumavi	(Name of the Apprentice Master)
accept Sri Smt. Dimesh Shooma	
(Name of the student pharmacist) as a trainee and I ag	ree to give him ther training facilities in my
organisation so that during his /her training he /she may	
Working knowledge of keeping of records profession of pharmacy; and Practical experience in	required by the various Acts affecting the
the manipulation of pharmaceutical appara the recognition by sensors characters of c in medicine	
the reading, translation and copying of pre-	escriptions including the checking of doses;

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

Laber agree that a Registered Pharmacist shall be assigned for his /her guidance

18.02.2021

Head of the Oceanization or Pharma Quitcal Division Block Medical officer of Health Chendrate BPHC, Guighota Block North 24 Pos.

SECTION - IV

I certify that Palash Adhyla.

(Name of student

phantacast) has undergone 500 (five hundred hours training spread over from Date -29-10-2020 1008-02-202 L for a period of

months in accordance with the

School commerciated in SECTION III

Date: 08-02-2021

Head of the Occapization or Phurmicumical Hivision Chandpura BFHC Galdhola Block

SECTION - V

Palash Adhya.

(Name of student

pharmacist) has 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.

06/04/2021

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aid of the Academic during Institution Javana Challetonk

Teh Carehout Day

to their & every Sections should be filled in with correction information, signed & sealed with the walling and person with mentioning the dates.

In the reactical training shall be not less than five hundred haves spread over a period of not less than

liver storales. Mention the period of training in DD MM YY) Y format only

23. The head of an academic training institution, on application, shall supply in triplicate Practical ranning Contract Form for qualification as a Pharmacist

2. They were still completion of the practical training, it shall be the responsibility of the trainer to and the contract form so filled is the first copy of the Contract forms so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I	
This form has been issued to Sri/Smt. Palash	Adhya -
(Name of student pharmacist) son of / daughter of Late.	
residing at Al-Dhakaraja pay Dhakaria Kali Bari, Tron-as	lighala Dist-North y powers west Beng
who has produced evidence before me that he/she is entitle	
out in the Education Regulations framed under section 10 o	
Date: 5/10 / 2020	Head of the Charles of Charles Chowle, Training Traffic 1907 Dist. Mandi (N.P.)
SECTION - II	
Palash Adhya.	(Name of the Student Pharmacist)
moupe Amet Kumas Pal	(Name of the Apprentice Master) of
Abhilashi University	(Name of the College / Institution)
Chandpara, B.P.H. (NORTH 24 PG.S)	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to obey	
period of my training.	
Date: 08: 02: 2021	Palash Adhya. Signature of the Student Pharmacist
SECTION – III	
	fruit kemar Pal
1. And Kumas Pal, Pharmoust	(Name of the Apprentice Master)
accept Sri Smt. Palash Adhya.	Chandpaia B.P.H.C.
(Name of the student pharmacist) as a trainee and I agree t	
organisation so that during his /her training he /she may acq	uire: —
The contract of the contract o	A PROPERTY OF THE PROPERTY OF

- 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 recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- (c) the reading, translation and copying of prescriptions including the checking of doses,

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations

THE TANK OF THE PROPERTY OF THE PARTY OF THE	meaneana factan	WINDS.			
I also agree that a Registered I	harmacist shall be ass	igned for his /her guidar	Pec O		
8/2/wz)		Head of the Organization or Pharmaceutical Division			
		Minte Manag	Interes.		
	SECTION =	IV			
1 certify that	yoshasvi S	en	_ (Name of student		
pharmacist) has undergone	500	hours training sprea	d over from Date		
8/10/2010 to 30/1/201	-\ for a period of	84 dy months in	accordance with the		
8/2/2021		Head of the Organ Pharmaceutical	ization or Dividum		
		Will Made 155	de Manage		
	SECTION -	V			
certify that	allysvi Sey		(Name of student		
startmacist) has completed in all r	espect his practical tra	aining under regulation			
regulations framed under section					
indication approved the Pharmacy		8m			
3/2/2021		HE WITCH HE PING Sun Praining Instituti	on the same		
orr-		Your	A COUNTY (PICER)		

SOFF

In hard & every Sections should be filled in with correction information, signed & scaled with the annhormed person with mentioning the dates.

2) The practical training shall be not less than five hundred hours spread over a period of not less than Sirver months. Mention the period of training in DD/MM/YYYY formen only

. Un head of an academic training institution, on application, shall supply in triplicate Practical among Communic Form for qualification as a Pharmacist

as other successful completion of the peactical training. It shall be the responsibility of the trainer to come that one copy thereinager referred to as the first copy of the Contract Forms so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION -1

This form has been issued to Sri/Smt.	ASHASVI SEN
(Name of student pharmacist) son of / daughter of	
residing at Villege - SALAM, P.O & Teles	U - SUNDERNASAR-I DISTE MANDI (HP)
who has produced evidence before me that he/she is	V/TEN VI
out in the Education Regulations framed under section	n 10 of the Pharmacy Act 4948.
Date: \$0ct, 2020	Dean School of Pharmacy, Head of the Manufacture of Charles and Ch
SECTION	- 11
accept Megl Suph Civil Hospital Small Need	(Name of the Student Pharmacist) (Name of the Apprentice Master) of Name of the College / Institution) (Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to	
period of my training.	tooky and respect till / her during the entire
Date: 8/2/2011	Signature of the Student Pharmacist
SECTION	- III
1. Megh Singh noccom Sri Smi Yashasson Sen	(Name of the Apprentice Master)
Name of the student pharmacist) as a trainee and I a	wree to give him ther training facilities in ma
organisation so that during his /her training he /she ma	
Working knowledge of keeping of record profession of pharmacy; and	

- Practical experience in –
 (a) the manipulation of pharmaceutical apparatus in common use;
- (b) the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- (c) the reading, translation and copying of prescriptions including the checking of doses,

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations.

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

Dane		

	SECTION -	IV
1 certify that Dec	V RAj	(Name of student
pharmac(st) has undergone	500	hours training spread over from Date
09-10-202011 15-1-2021	for a period of	3 months in accordance with the
action anomerated in SECTION III		V.
23/1/2021 DNO-3-2321 DISPURSARY		Headarinal Breamphon or Pichamba (H.A.) Division
DANO-3-2521 SISPAINSARY Bent Section	SECTION -	v ·
	and the second	

Del

(Name of student

plantage ista has 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 in a man approved the Pharmacy Council of India.

28/06/2021

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Headas the Academic Light the Institution Teh, Chach of Dis.

the de every Sections should be filled in with correction information, signed & scaled with the authorized person with mentioning the dates.

I was treat training shall be not less than five hundred hours spread over a period of not less than are countly. Mention the period of training in DD MM-YYYY format only

The head of an occulemic training institution, on application, shall supply in triplicate Practical Turning Contract Form for qualification as a Pharmacist

as they successful completion of the practical training. It shall be the responsibility of the trainer to some that one copy theremajter referred to as the first copy of the Contract Forms so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. Dev Ro	oj'
(Name of student pharmacist) son of / daughter of 544-	
residing at Vill-Kunda Po-Shunad Dis,	
who has produced evidence before me that he/she is entitle	
out in the Education Regulations framed under section 10 o	
Date: 5-10-2020	Head of the Address Chair Chowl. Training less the Department (And 1977)
SECTION - II	
Dev Ray Rudonnani	(Name of the Student Pharmacist)
uccept Kudonnani	(Name of the Apprentice Master) of
Pt. JINUMC B Hospital Chamba	(Name of the College / Institution)
	(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.	nwo.
T.	HO.
Date Ad Date 9 2020	Signature of the Student Pharmacist
202	
SECTION – III	
1. Rudermani accept Sri Smt. Dev Roj	(Name of the Apprentice Master)
accept Sri Smt. Dev Roj	
(Name of the student pharmacist) as a trainee and I agree t	o give him /her training facilities in my
organisation so that during his /her training he /she may acq	uire: —
Working knowledge of keeping of records requestion of pharmacy; and Practical experience in –	aired by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

I also agree that a Registered Pharmacist shall be a	ssigned for his /her guidance
Date: 28/1/2014	Head of the Organization or Pharmaceutical Division
SECTION	
vertify that _ Charmondry Th	When (Name of student
pharmacist) has undergone 500	hours training spread over from Date
S/10/2020 to 28/1/2021 for a period of details commented in SECTION III	84 dys months in accordance with the
Date. •	Head of the Organization or Pharmaceutical Division
SECTION	Chief Place - Dr. Since Allege Vision Stagesh Smith March 186 Ka
I certify that Stromundry Tha	
pharmacist) has 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.	Sure
Anc raforfront	Held of the Academic Training Institution
Dean School School	Mark .
NOTE: At Men to Each & every Sections should be filled by with co uniforized person with mentioning the dates.	rrection information, signed & sealed with the

It the practical training shall be not less than five hundred hours spread over a period of not less than

Is The head of an academic training institution, on application, shall supply in triplicate Practical

in their successful completion of the practical training, it shall be the responsibility of the trainer to castive that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

three months. Mention the period of training in DD/MM-YYYY format only

Teaming Contract Form for qualification as a Pharmacist

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. Dhart man	obra shakur
(Name of student pharmacist) son of / daughter of Sh.	Ishwar Dars
residing at Vill-Pathan , P.O to 7, Teh - Chachyot	· Dist. mand Cuff 1 Pinlade-1750
who has produced evidence before me that he/she is entitle	
out in the Education Regulations framed under section 10 o	
and an one consension regulations trained under section to o	The Flammacy No. 1946.
4011446	Peer Orennacy,
Date 03/10/20	Head A die Academical Che-
	Manual additional
SECTION - II	
1 Show mending Thateur	(Name of the Ct. down Blooms of the
Diago C - La	(Name of the Student Pharmacist)
necept freque says	(Name of the Apprentice Master) of
Civil Hospital Sunda Norp	(Name of the College / Institution)
Civil Hospital Sund Norpo	(Hospital or Pharmacy) as my
Apprentice Muster for the above training and agree to obey	and respect him / her during the entire
period of my training.	01
	Charmendra Thakar
Date: 28/1/204	Signature of the Student Pharmacist
	Signific of the Staden Financial
SECTION: III	
SECTION - III	
1. Megh STOPE	(Name of the Apprentice Master)
accept Sri Smc Charmendry Haker	
(Name of the student pharmacist) as a trained and I agree t	
organisation so that during his /her training he /she may acqu	
1. Working knowledge of keeping of records requ	
profession of pharmacy; and	The state of the same of the s
2. Practical experience in	

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations.

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

_					
	Э				

Head of the Organization or Pharmacentical Design P

SECTION - IV	
certify that Althory Blatia	(Name of studen
pharmacist) has undergone 500 hours training sprea	d over from Date
02-11-2020 to 01-03-2021 for a period of four months in	
details commermed in SECTION III	
Head Medical Super Pharmaceutical	intendent MZANNUNDT Division

SECTION - V

Allshow Blation ocrafy that (Name of student pharmacist) has 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 Instruction approved the Pharmacy Council of India.

1 x /50/ 80 mil

Head whe Academic DeseTraining Institution School of Pharmacy, Abhirmal University Chall-Chowk, Teh. Chackyot Dist. Handi J. P.)

NOTE:

- 1) Each & every Sections should be filled in with correction information, signed & sealed with the muthorized person with mentioning the dates.
- It is two theal training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only
- 2) The head of an academic training institution, on application, shall supply in triplicate 'Practical Training Contract Form for qualification as a Pharmacist
- 4) Ther successful completion of the practical training. It shall be the responsibility of the trainer to conser that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been beened to Citisms Alm	. Aldi
This form has been issued to Sri/Smt. Alex A (Name of student pharmaeist) son of / daughter of residing at House No. 229 wood No. 8 p.	December 11.4%
(Name of student pharmaeist) son of / daughter of	rajeed ishoria
residing at House No. 229 Wood No. 8 h	Car but stond Home after (1727)
who has produced evidence before me that he/she is en	ititled to receive the Practical Training as sel
out in the I ducation Regulations framed under section	10 of the Pharmacy Act, 1948.
	Dear N
Dane:	Head of the Wallenie
	Training by thumon an Associated
SECTION -	II
Decept Sarof Koundal	(Name of the Student Pharmacist)
overpl Sarot Kandal	(Name of the Apprentice Master) of
	(Name of the College / Institution)
Da R. H. Gr. M. C. How	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to	
period of my training.	
	axitest
Date:	Signature of the Student Pharmacist
Date.	Signature of the Student Frankleise
SECTION -	
1. Sahot Maundal	(Name of the Apprentice Master)
1. Sakoj Kaundal Decept Sri / Smt. Alkshoy Bhalla	
(Name of the student pharmacist) as a trainee and I ag	
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	
Practical experience in – One manipulation of physical appearance in a property of the manipulation of the manipulati	arms in compensar mass
(a) the manipulation of pharmaceutical appara	mus in continuit use,

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

in medicine

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Date:	Head of the Organization or Pharmaceutical Division Dhisty' known (Re. No. 29719) Pharmacist CHE Ball-Chauski Dult Ma
l certify that Chuni lal	(Name of student
pharmacist) has undergone 500	hours training spread over from Date
8/16/2022 to 13/1/2021 for a period of details enumerated in SECTION III	3 months in accordance with the
Date	Head of the Organization of Pharmaceureal Division
SECTION	- V
1 certify that Chuni & I	(Name of student
pharmacist) has 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.	
Dance 28 01 2021	A: Training Institution
NOTE:	

- 1) Fuch & every Sections should be filled in with correction information, signed & sealed with the sunthorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only
- The head of an academic training institution, on application, shall supply in triplicate. Practical Training Contract Form for qualification as a Pharmacist.
- 4) (Her successful completion of the practical training. It shall be the responsibility of the trainee to consure that one copy thereinafter referred to as the first copy of the Contract Form; so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION-1

This form has been issued to Sri/Smt.	chuni Led
(Name of student pharmacist) son of / daughte	
residing at v. D.O . Thathe Te	c Belichaster Brief mind (+ 10)179
	she is entitled to receive the Practical Training as set
out in the Education Regulations framed under	
Date: 03/10/20	Training Last Justionn
SEC	TION - II
1 Chum lat	(Name of the Student Pharmacist)
occept bhisay kumas. Pharmoust the	Bell-chowk? (Name of the Apprentice Master) of
	(Name of the College / Institution)
	(Hospital or Pharmacy) as my
Apprentice Master for the above training and a	agree to obey and respect him / her during the entire
period of my training.	
	Col
Date:	Signature of the Student Pharmacist
C	FION – III
1. Dhiray kumas	(Name of the Apprentice Master)
accept Sri / Smt. Churd lat	
(Name of the student pharmacist) as a traince :	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 profession of pharmacy; and Practical experience in	records required by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

(e) the storage of drugs and	d medicinal preparations.	
Table agree that a Registered Phar		his ther guidance.
-6/17		harmaceutient Division
	SECTION - IV	died financest.
certify that	nishkum ar	(Name of student
		training spread over from Date
8/10/1020 to 28/1/2021		months in accordance with the
details commerated in SECTION III	7	4 Mary
Dat 18/1/2021		ad of the Organization or harmaceutical Division
		Cond Tournament Harning
	SECTION - V	One State of State
certify that Must	nish Kumar	(Name of student
pharmacist) has completed in all resp		
Regulations framed under section 10		
Institution approved the Pharmacy Co	suncil of India.	ul —
2/1/204	Das	dist the Academic
NOTE:	School of Planting	
	e filled in with correction in	iornation, signed & scaled with the

- "ized person with mentioning the dates."
- In the practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only
- It he head of an academic training institution, on application, shall supply in triplicate. Practical Training Contract Form for qualification as a Pharmacist
- is after successful completion of the practical training. It shall be the responsibility of the trainee to cover that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sh/Smt. Munish	Kumar
(Name of student pharmacist) son of / daughter of Sh. T	
who has produced evidence before me that he/she is entitled out in the Education Regulations framed under section 10 of	Ust . Mand; (HR) 1750 45 I to receive the Practical Training as set
Date 63/10/20	Head of pro Academican-Cho-
SECTION - II	
accept My Sigh CivilHospital Snude Nocy	(Name of the Student Pharmacist)
accept Mers Enh	(Name of the Apprentice Master) of
Civil Hornital Cunde Noch	(Name of the College / Institution)
Contract of the contract of	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to obey	
Date 28/1/2021	Signature of the Student Pharmacist
SECTION III	
SECTION - III	
1. Megh Singh	(Name of the Apprentice Master)
accept Sri Smil Munis G Kumar	
(Name of the student pharmacist) as a traince and I agree to	give him /her training facilities in my
organisation so that during his /her training he /she may acqu	ire: —
Working knowledge of keeping of records requi- profession of pharmacy; and Practical experience in	red by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Date: 14/02/2021

Head of the Organization or Pharmaceutical Division

		SECTION - P	V	
	Ramesh			(Name of student
pharmacist) has und		00	hours training spread	d over from Date
details commerated in 5	SECTION III	for a period of\$	84 days months in a	accordance with the
Date 14/02/2021			Head of the Organi Pharmaceutical I	ization or Division
		SECTION - V		
certify that	Ramesh	KUMBR		Name of student
pharmacist) has comple			ning under regulation 2	O of the Education
Regulations framed und Instruction approved the	der section 10 of	the Pharmacy Act	t, 1948. He had his prac	tical training in an
		201 N. J. L. (22 ST. 118)	and-	
m. 09[03] 2021		About	Head of the Academ Emining-Institution	

Wills:

1) hach it every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.

Teh Chathyof, Digit Man-

2) The practical training shall be not less than five hundred hours spread over a period of not less than . three months. Mention the period of training in DD/MM/YYYY formal only

3) The head of an academic training institution, on application, shall supply in triplicate 'Practical Franting Contract Form for qualification as a Pharmacist

ther successful completion of the practical training. It shall be the responsibility of the trainer to castice that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt.	AMESH KUMAR
(Name of student pharmacist) son of / daughter of_	
residing at V.P.O MANDAL TEH S	
who has produced evidence before me that he/she is	
out in the Education Regulations framed under section	on 10 of the Pharmacy Act, 1948.
1745 03/10/20	Training Mathuliques y
SECTION	N - II
1 Ramesh KUMAR	(Name of the Student Pharmacist)
ABHILAShi University (Chai	(Name of the Apprentice Master) of
CH. Sunder Nagar	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree	
period of my training.	Janesh
Date:	Signature of the Student Pharmacist
SECTION	i – III
1. Dinash Ray Thabur	
accept sit sink Ramesh KUMA	2
(Name of the student pharmacist) as a trainee and I	agree to give him /her training facilities in my
organisation so that during his /her training he /she m	say acquire: —
Working knowledge of keeping of recor profession of pharmacy; and Practical experience in	ds required by the various Acts affecting the

in medicine
(c) the reading, translation and copying of prescriptions including the checking of doses;

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

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

(c) the storage	of drugs and medicinal preparations.	
I also agree that a Regi	istered Pharmacist shall be assigned f	for his /her guidance.
Dines		Head of the Organization or Phachiae Pharatelistsion C.H. Barsar, Dist. Harrispur (H.P.)
100	SECTION - IV	al/ptW1
certify that	PANKAJ	(Name of student
pharmacist) has undergo	one 31/2 may 504 hour hour	s training spread over from Date
5/10/ 2020 to 18/1	for a period of 3/4	months in accordance with the
Date.	ic W	lead of the Organization or Pharmaceutical Division
	SECTION - V	
I certify that	Panker	(Name of student
pharmacist) has completed	in all respect his practical training u	under regulation 20 of the Edward
Regulations framed under	section 10 of the Pharmacy Act, 1948	8. He had his proving temporary
Institution approved the Ph	armacy Council of India.	A practical training in an

Head of the Academic Des Fraining Inspiration School of Million Thail-Chowk, Teh _____gat, the ____madi (N.P.)

MOTE:

- 1) Each & every Sections should be filled in with correction information, signed & sealed with the cathorized person with mentioning the dates
- 2) The evactical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only
- I The head of an academic training institution, on application, shall supply in triplicate Practical Training Contract Form for qualification as a Pharmacist
- is ofter successful completion of the practical training. It shall be the responsibility of the trainee to casare that one copy thereinafter referred to as the first own at the

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt.	PANKAJ
(Name of student pharmacist) son of / daughter of	SA HUKAM CHAND
residing at Viel Bherry P.O. Tiller Te	
who has produced evidence before me that he/she is	
out in the Education Regulations framed under section	
	5
Dute: 03/10/20	Heady the Menders of the land
	Ten Chachyot and To
SECTION	N - II
PANKAT	
	(Name of the Student Pharmacist)
CH BARADA	(Name of the Apprentice Master) of
CH BOXDOR	(Name of the College / Institution)
	(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.	
	Pankey
Date.	Signature of the Student Pharmacist
energow.	
SECTION	-111
1. Rejuder Kumer storms	(Name of the Apprentice Master)
accept Sri SAL PANKAT	
(Name of the student pharmacist) as a traince and I	agree to give him /her training facilities in my
organisation so that during his /hot training he /she m	ay acquire: —
	ds required by the various Acts affecting the
profession of pharmacy; and	
Practical experience in — (a) the manipulation of pharmaceutical app	aratus in common use

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

the dispensing of prescriptions illustration medicaments; and the storage of drugs and medicinal prepara	
so agree that a Registered Pharmacist shall be assi	
	Sr Pharmonet I/C
	Phirmaceulical Division Disti Mandi (H.P.)
SECTION - I	IV.
1 certify that Robit Prasher	(Name of student
acist) has undergone 500 fourc	hours training spread over from Date
bex2300 27 January 2021 for a period of	Three months in accordance with the
enumerated in SECTION III	A. 11
50.1.2021	Head of the Preuntendent Pharmaceutical Division
SECTION - V	v
entity that Robit Prasher	(Name of student
icist) has completed in all respect his practical tra	
tions framed under section 10 of the Pharmacy A	
ion approved the Pharmacy Council of India.	()
2/02/2021	Telegraphy Tolumer 191
	Training Institution
	Teh. Chachyot Dist. — HARD — /

SOUTH

Date

pharm

Moch

Date:

pharm

Regula

Institu

Ditte

2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only

I he head of an academic training institution, on application, shall supply in triplicate. Practical Training Contract Form for qualification as a Phormacist.

4) After successful completion of the practical training, it shall be the responsibility of the trainee to costere that one copy thereinafter referred to as the first capy of the Contract Form) so filled is

In Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt.	Shif Peaclox
(Nume of student pharmacist) son of / daughter of_	She Radall Barton
residing in Will - Hawaning P.O. Ropari	Total Surprofest Nigote Mandell
who has produced evidence before me that he/she is	
out in the Education Regulations framed under section	on 10 of the Pharmacy Act, 1948.
- th 10 9	Down and the same of the same
Date: 05/10/2.2.e.	Printing Institution
	49CCV38H
SECTIO	
Mr. Rohit Prasher words Smt. Shradha Rathare VC Phe	(Name of the Student Pharmacist)
accept Smt. Shradha Rathere I/c Pl.	(Name of the Apprentice Master) of
The state of the s	(Name of the College / Institution)
Zonal Hospital Mandi	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree	
period of my training.	no oney and respect min r ner during the entire
7.4.4.4.4.4.4.4.6.	01001
Onic:	Signature of the Student Pharmacis
Date.	Signature of the Student Pharmacist
orowan	
SECTION	N-111
1. Snt. Stradha Rathore	(Name of the Apprentice Master)
accept Sri Smt. Mr. Rohit Prashes	8
Name of the student pharmacist) as a trainee and I	agree to give him /her training facilities in my
organisation so that during his /her training he /she n	nay acquire; —
Working knowledge of keeping of recor	rds required by the various Acts affecting the
profession of pharmacy; and	
Practical experience in – the manipulation of pharmaceutical appropriate and the manipulation and the	parafus in common use:
the recognition by sensors characters of	of chief crude drugs & chemical substance used
in medicine for the reading translation and convince of	prescriptions including the checking of doses;
and the same of th	breaethroug meraning me encernig of moses!

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

	AND THE SAME	
1 Nate	SECTION - IV	Head of the Organization or Pharmaceutical Division Dhough known (Rg. No. 29719) Pharmacist CHC Rabi-showk: Distl An
I certify that Days R	am.	(Name of student
pharmacist) has undergone		urs training spread over from Date
details enumerated in SECTION II	for a period of 3 me	months in accordance with the
Date		Headre The Organization or Pharmaceutical Division
I certify that Dya	SECTION - V	(Name of student
paramocists has completed in all re	spect his practical training	under regulation 20 of the Education
Institution approved the Pharmacy (Council of India.	Head of the Academic Training Institution Training
11 Fach & every Sections should	he filled in with some of a	*

It hack it every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.

2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only

3) The head of an academic training institution, on application, shall supply in triplicate 'Practical Training Contract Form for qualification as a Pharmacist

It is a successful completion of the practical training, it shall be the responsibility of the trainee to custore that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

106

This form has been issued to Sri/Smt.	Dak Ram
(Name of student pharmacist) soft of / daughter of	
residing at Vill. Bahari P.D. and	Teh Bali Chowlsi Distl. Mondi (HP)
Who has produced evidence before me that back	e is entitled to receive the Practical Training as set 175
7/	
out in the Education Regulations framed under se-	ction 10 of the Pharmacy Act, 1948.
	Dean
Darce 03 10/20	Head of the Oakidean change
	Training Anataurian
SECTI	ON - II
1 Days Ram	(Name of the Student Pharmacist)
accept Dhisay kumas Pharmacist CHL B	eli'-clause? (Name of the Apprentice Master) of
	(Name of the College / Institution)
	(Hospital or Pharmacy) as my
Apprentice Muster for the above training and agree	
period of my training.	
	1. Com
Date.	Signature of the Student Pharmacist
	Signatur 900 tile Situdent Pharmacist
OF COURS	
SECTIO	JN - 111
1. Dhisaj kemal	(Name of the Apprentice Master)
accept Sri / Smt. Daya Ram	The state of the s
(Name of the student pharmacist) as a trainee and	I agree to give him /her training facilities in my
organisation so that during his /her training he /she	
	ords required by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

Training Contract Form for qualification as a Pharmacies

agree smar a Registered Pharmacist shall be	assigned for his /her guidance
Date 28/1/20 U	Head of the Organization or Pharmaceutical Division
	TOWNER TO A CONTROL OF THE PARTY OF THE PART
SECTION	4-IV
	2-
1 certify that 1507/11 Sm	(Name of student
pharmacist) has undergone 580 /	hours training spread over from Data
Shofter to 28/1/2021 for a period of details enumerated in SECTION III	
inac 28/1/204	Head of the Organization or Pharmaceutical Division
SECTION	
1 certify that Borin &	Tranic of student
pharmacist) has completed in all respect his practical	Straining 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.	Shune
17.00 30/1/2021	I fead of the Academic Examing Institution
Abbassa University Constitution of the practical training shall be not less than five has three months. Mention the period of training in DD.	ndred hours spread over a period of not less than
3) The head of an academic training institution, on	application, shall supply in triplicate Practical

in ther successful completion of the practical training. It shall be the responsibility of the trainee to casury that one copy thereinafter referred to as the first copy of the Contract Forms so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION-1

Sizerio	
This form has been issued to Sri/Smt	ovin Singh
(Name of student pharmacist) son of / daughter of_	Sh. Tei Singh.
residing at Vill. Khandohali, P.O. Joc	
who has produced evidence before me that he/she is	V
out in the Education Regulations framed under section	
	0
Date: esto/2000	Transport Dist. Mandi (H.P.)
SECTION	
Civil Hospital Suncle Nap Dist Maneli H.D	(Name of the Student Pharmacist)
accept May 8mm	(Name of the Apprentice Master) of
(du P Hospital Suncle Na	(Name of the College / Institution)
Dit H Mandi H-D	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree	
period of my training.	
ner I ron	
Date: 28/1/2024	Signature of the Student Pharmacist
SECTION	1-111
accept Sri Smi Bovin Ship	(Name of the Apprentice Master)
accept Sri Smi Bovin SANA	
Name of the student pharmacist) as a trainee and I	agree to give him /her training facilities in my
organisation so that during his /her training he /she m	ay acquire; —
profession of pharmacy; and	ds required by the various Acts affecting the
Practical experience in – the manipulation of pharmaceutical app	stratus in common use:

in medicine
(c) the reading, translation and copying of prescriptions including the checking of doses;

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

SECTION	
This form has been issued to Sri/Smt. Abh	ishek Trokuz
(Name of student pharmacist) son of / daughter of /	
residing at Mongrumba -34 Shaper	
who has produced evidence before me that he/she is	
out in the Education Regulations framed under section	n 10 of the Pharmaey Act, 1948.
Date:	Charles the Academic
	Tell, Enganyot L
SECTION	V-11
Abhishek Thakus	(Name of the Student Pharmacist)
accept Sh. Redesmani	(Name of the Apprentice Master) of
Abhilashi college of Phe Et JLNUME & Hospitali	Charles (Hospital or Pharmacy) as my
Apprentice Master for the above training and agree t	o obey and respect him / her during the entire
period of my training.	No.
Date: 22 /10/2020	Signature of the Student Pharmacist
SECTION	- 111
8 1_ Rudomani	(Name of the Apprentice Master)
accept sri smi. Abbyshek Phaku	
(Name of the student pharmacist) as a trainee and I a	agree to give him /her training facilities in my
organisation so that during his /her training he /she ma	ay acquire: —
Working knowledge of keeping of record profession of pharmacy; and Practical experience in	ds required by the various Acts affecting the
(a) the manipulation of pharmaceutical appli	aratus in common use; f chief crude drugs & chemical substance used
(c) the reading, translation and copying of p	prescriptions including the checking of doses;

Disposed No 5 andt 10/2/2021 PTILNGHESHASPATUS Charton Dispossory Section @ 7/0/2/2021

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

12020 22/10/2020

Head of the Organization of Phormacourses Division

Hearth Academic Training Institution School of Pharmacy Abbtern University Ten Charlegel C

	SECTION - I	V	
certify that	Abhishek T	rakus	(Name of student
pharmacist) has undergone	500 02 for a period of A	hours training spre	ad over from Date
Date: 10-2-2021		Head of the Orga Pharmaceutical	Montalign of Division
	SECTION - V		
	hek Tho har		(Name of student
pharmacist) has completed in all			
Regulations framed under section	10 of the Pharmacy Ac	t, 1948. He had his pri	actical training in an
Institution approved the Pharmac		12	

NOTES

15/03/2021

- Is Each & every Sections should be filled in with correction information, signed & sealed with the unihorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD:MM/YYYY format only.
- 24 The head of an academic training institution, on application, shall supply in triplicate "Practical Training Contract Form for qualification as a Pharmacist
- in ther successful completion of the practical training. It shall be the responsibility of the trainee to easilie that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations.

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

Date: 06-2-21

Head of the Organization or Pharmaceutical Division

		SECTION -	IV	
I certify that pharmacist) has ur	dergone 4	y Kumai	hours training spr	(Name of student read over from Date in accordance with the
Date 26-2-2	SECTION III		Head of the Ora	Barrier Contract
		SECTION -	v	
I certify that	BRAJESH	KUMAR		_ (Name of student
pharmacist) has com Regulations framed in Institution approved	under section 10 o	f the Pharmacy /	raining under regulation	on 20 of the Education practical training in an
Date: 26-2-21			200	1 6

Head of the Academic Training Instituted

NOTE:

1) Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.

2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM-YYYY format only

3) The head of an academic training institution, on application shall supply in triplicate Practical

Training Contract Form for qualification as a Pharmacist

4) After successful completion of the practical training. It shall be the responsibility of the trainer to ensure that one copy (hereinafter referred to as the first copy of the Contract Form) so filled is submitted to the Head of the academic training institution and the other two copies thereimifler referred to as the Second copy and the third copy) shall be filed with the trainer

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECT	ION - I
This form has been issued to Sri/Smt.	BRAJESH KUMAR
(Name of student pharmacist) son of / daughter of	
	had ten Pangi alists chamber (1918-1763)
	e is entitled to receive the Practical Training as set
out in the Education Regulations framed under se-	
	N.
Date: 25/6 2 202	Head of the Academic - 120
	Fruiting Institution
	St. Vi
	Teh. Chiectyo. De
SECTI	ION - II
1 BRAJESH KUMAR	(Name of the Student Pharmacist)
scrept RAKON KUMAR	(Name of the Apprentice Master) of
civil hopital leiller	(Name of the College / Institution)
- Chargy	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agr	ree to obey and respect him / her during the entire
period of my training.	Rajel
Date: 26-2-1	Signature of the Student Pharmacist
SECTION	ON – III
1. RAKESY KUMAR	(Name of the Apprentice Master)
accept Sri / Smt. BRATESH KUMAR	
	d I agree to give him /her training facilities in my
organisation so that during his /her training he /she	e may acquire: —
 Working knowledge of keeping of rec profession of pharmacy; and 	cords required by the various Acts affecting the
2. Practical experience in -	
(a) the manipulation of pharmaceutical a	
 (b) the recognition by sensors character in medicine 	s of chief crude drugs & chemical substance used
(c) the reading, translation and copying	of prescriptions including the checking of doses.
	Cont

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

1 Nation		There of the Organization
		CHC Blazar bur HP
	SECTION - IV	
certify that Manju		(Name of str

pharmacist) has undergone 500, Cive hundred hours training spread over from Date 20-10-20-20 to 13-0-2-20-21 for a period of months in accordance with the details enumerated in SECTION III

Dine

Head of the his orientill or present the transport (HP)

SECTION - V

pharmacist) has 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.

Doll 15/02/2021

Head of the Academic petrainting Institution Create, School of Art and University (P)

NOTE:

- is Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD MMTYYY format only
- 33 The head of an academic training Institution, on application, shall supply in triplicate Practical Training Contract Form for qualification as a Pharmacist
- 2) one successful completion of the practical training. It shall be the responsibility of the trainee to easies that one copy thereinafter referred to us the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. Mani	ti
(Name of student pharmacist) son of / daughter of	Sh Duni chand
residing at W/D Vivek Kumay C/O Durga C	
who has produced evidence before me that he/she is e	
out in the Education Regulations framed under section	
Date 03/10/20	Head of the beaterment of the same
1.7~	Training Wishington
	No.
SECTION	- 11
1 Mars. Manju	(Name of the Student Pharmacist)
accept Smit Pushba Sharma	(Name of the Apprentice Master) of
Abhilashi University, Mandi	(Name of the College / Institution)
CHC Bhazari, Bilasbur	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to	
period of my training.	
**************************************	O a
Date:	Signature of the Student Pharmacist
	Section 2 of the section 1 that the test
SECTION -	-111
1. Pushba Sharima	(Name of the Apprentice Master)
accept Sri / Smt. Mandu	
(Name of the student pharmacist) as a trainee and I as	gree to give him /her training facilities in my
organisation so that during his /her training he /she may	v acquire; —
Working knowledge of keeping of records profession of pharmacy; and Practical experience in	required by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

Laso agree that a Registered Pharmacist shall be assigned for his /her guidance. Date harmaceutical Division SECTION - IV Roken Kumu certify that (Name of student pharmacist) has undergone hours training spread over from Date Selly for a period of Three months in accordance with the detinis enumerated in SECTION 111 Date call work file north Known Rharmaceutical Division SECTION - V Rakesh Kumar certify that (Name of student pharmacist) has 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) 1 22/02/2021

WOTE:

- (i) Each & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three mouths. Mention the period of training in DD/MM/YYYY format only.
- The head of an academic training institution, on application, shall supply in triplicate "Practical Training Contract Form for qualification as a Pharmacist
- It shall be the responsibility of the trainer to enough that one copy thereinafter referred to as the first capy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This t	form has been issued to Sri/Smt. Rak	esh Kumar
	adent pharmacist) son of / daughter of &	B Cian Signal
residing at	V.P. 5 - Ladore, Tel. Murbur	Dill K Circl
		ntitled to receive the Practical Training as set
out in the Eq	ucation Regulations framed under section	10 of the Pharmacy Act, 1948.
Date: 03/	10/2.020	Heach our gar Action folian-Chowle, Philipping 19 Structure Mandi (H.P.)
0	SECTION -	П
	Rakesh kymny. Nelvy charlar-	(Name of the Student Pharmacist)
accept	Helm charles.	(Name of the Apprentice Master) of
		(Name of the Cöllege / Institution)
	CHC Gangeria	(Hospital or Pharmacy) as my
Apprentice N	faster for the above training and agree to	obey and respect him / her during the entire
period of my		
		Dubaria
Date.		Signature of the Student Pharmacist
× ·	SECTION -	III
	Needy chalan	(Name of the Apprentice Master)
accept Sri	Sint. Laketh kumay	
Name of the	student pharmacist) as a trainee and I agr	ee to give him /her training facilities in my
organisation s	to that during his /her training he /she may	acquire: —
2. Pra	tession of pharmacy; and ctical experience in –	required by the various Acts affecting the
(6)	the manipulation of pharmaceutical appara the recognition by sensors characters of ch	tus in common use; nief crude drugs & chemical substance used

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

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations.

I have that a Registered Pharmacist shall be assigned for his ther guidange.
--

812/202

Head of the Organization or Pharmaceutical Division

SECTION - IV

I certify that

Khushal

(Name of student

plantacist) has undergone

500

hours training spread over from Date

Stydigonths in accordance with the

Pharmagentical Divis

ENWIC

8 16 2020 10 38 1 2021 for a period of

oc to a connermed in SECTION III

SECTION - V

tarribucist has completed in a Kespesi his near

(Name of student

plantime (st) has 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

In a division approved the Pharmacy Council of India.

Dine

Head photos Academic

Fraining Institution

Til Tillian

3. For A seem Sections should be filled in with correction information, signed & scaled with the outlowised person with mentioning the dates.

2) The penetical training shall be not less than five hundred hours spread over a period of not less than succession. Mention the period of training in DD/MM/YYYY format only.

On head of an academic training institution, on application, shall supply in triplicate 'Practical scaling Contract Form for qualification as a Pharmasist

there were setal completion of the practical training, It shall be the responsibility of the trainer to remy that one copy thereineffer referred to us the first copy of the Contract Form) so filled in

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt.	Khushal
(Name of student pharmacist) son of / daughter of	of Rosender Soh vill Barling ai
residing at lo Chatrok in Tel f	under Neupa Dort Mandi CH.P
	e is entitled to receive the Practical Training as set
our in the Education Regulations framed under se	ction 10 of the Pharmacy Act, 1948.
	Dean ()
Date:	Head of 3the old of Terrino
	Training institution by Chall Ch
	The state of the s
SECTI	ON - II
1 Khushal	(Name of the Student Pharmacist)
accept Meth Soft	(Name of the Apprentice Master) of
Civil Hospital & d Noyn Divi	1 Mau Lift (Hame of the College / Institution) (Hospital or Pharmacy) as my
	ee to obey and respect him / her during the entire
period of my training.	
	12
Date 8/2/2021	Signature of the Student Pharmacist
SECTION	ON THE
accept Sri Smi Khugharf	
The state of the s	(Name of the Apprentice Master)
secon Sri Smi Khughar	
(Name of the student pharmacist) as a trainee and	I 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 reconstruction of pharmacy; and	cords required by the various-Acts affecting the

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

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

2. Practical experience in

in medicine

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

1 also agree that a Registered Pi	narmacist shall be ass	igned for his /her guidance.
Date:	SECTION -	Head of the Orthwization or Pharmacething 18th 18fen al Hospital Manc
	SECTION.	
t certify that	Wishal	(Name of student
pharmacist) has undergone	500	hours training spread over from Date
14-10-2020 10 11-2-2021	for a period of	months in accordance with the
details enumerated in SECTION II	ř.	L'alzeri
Date. 12-2-2021		Head of the Division or Pharmacout well by the Property of the Pharmacout well by the Pharmacout well by the Pharmacout well and the Pharmacout well by the Pharmacout well by the Pharmacout well and the Pharmacout well and the Pharmacout well well by the Pharmacout well and the Pharmacout well
	SECTION -	V
1 certify that Visha	1.	(Name of student
pharmacist) has completed in all re-	espect his practical tr	aining under regulation 20 of the Education
		ct, 1948. He had his practical training in an

1 hill 22/02/02/02/

Institution approved the Pharmacy Council of India.

Flead of the Academic Training Institution Teh, Unachyot, Dist. Want Jury

NOTE:

- In Each & every Sections should be filled in with correction information, signed & sealed with the amhorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three months, Mention the period of training in DD/MMYYYY format only
- 3) The head of an academic training institution, on application, shall supply in triplicate 'Practical Francist Contract Form for qualification as a Pharmacist
- 4) After successful completion of the practical training. It shall be the responsibility at the trainer to cosme that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt.	VISHAL
(Name of student pharmacist) son of / daughte	er of Sho Megh Singh.
	a, Tch, Jogis dur Nagor, Distl. Mondi, (H.P.)
	she is entitled to receive the Practical Training as set
out in the Education Regulations framed under	
	Dean
Date 05/10/2020	Head obside Agademic
	Training Closin (ut) on (1911)
SEC	CTION - II
Wishal.	(Name of the Student Pharmacist)
	smacist To (Name of the Apprentice Master) of
Z. 4. Mandi	(Name of the College / Institution)
x.4.770mm	
Appropriate Master for the above restricts and	(Hospital or Pharmacy) as my
	agree to obey and respect him / her during the entire
period of my training.	.,/
	Lefter
Date:	Signature of the Student Pharmacist
SEC	TION – III
the the Ollers . Oh	- Colth was to the
	macist T/L (Name of the Apprentice Master)
accept Sri / Smt. Vishal	
and the second s	and I agree to give him /her training facilities in my
organisation so that during his /her training he	
Working knowledge of keeping of profession of pharmacy; and	records required by the various Acts affecting the

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

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

2. Practical experience in -

in medicine

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (e) the storage of drugs and medicinal preparations.

A sign agree that a Registered Pharmacist shall be assigned for his /her guidance.

03-02-2021

Chief Phamidiaisha Cum
Store I/C
Chi Paonta

SECTION - IN

	COLUMN TO PERSON	
I centify that Rupes	h kymar	(Name of student
phatmacist) has undergone	500	hours training spread over from Date
8 16 120 to 19 11/21	for a period of	84 days months in accordance with the
03-02-2021		Head of the deman Modical Office Chief Philippine Chief Philippines of the Commission of the Commissio
D.No-2341		Cum Store I/C CH Paonta
	SECTION-	

Diarroscist) has 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.

02/03/9-21

Framing Section (Framework)

rhyot E

SOTE

- 1) reach & every Sections should be filled in with correction information, signed & sealed with the authorized person with mentioning the dates.
- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three nombs. Mention the period of training in DEMMYYYY formul only
- 2) The head of an academic training institution, on application, shall supply in triplicate "Practical regimeng Contract Form for qualification as a Pharmacist
- 4) They successful completion of the practical training. It shall be the responsibility of the trainer to income that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt.	
(Name of student pharmacist) son of / daughter of	Rubert Kymox Sol Sh Kamedi
residing at Bhawla Koula dirmove	· Paontashair (H.A)
who has produced evidence before me that he/she is	
out in the Education Regulations framed under section	
Date: 5-10-2020	Head of the Astronomery, Truining the Charlette (H.P.)
SECTION	-11
1 Rubesh kumar	(Name of the Student Pharmacist)
accept Albria Cicel	(Name of the Apprentice Master) of
March Print	(Name of the College / Institution)
Civil Hospital Parat	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to	
period of my training.	
	~ popular
Date:	Signature of the Student Pharmacist
SECTION	-111
1. Alpria Coel	(Name of the Apprentice Master)
accept Sri Son. Rupesh Kumen	
(Name of the student pharmacist) as a trainee and I a	
organisation so that during his /her training he /she ma	
Working knowledge of keeping of record profession of pharmacy; and Practical experience in –	is required by the various Acts affecting the
(a) the manipulation of pharmaceutical apparents (b) the recognition by sensors characters of in medicine	chief crude drugs & chemical substance used
(c) the reading, translation and copying of p	orescriptions including the checking of doses;

- the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

Danie 30 1/21

Hard Partie cisting or Regional Hospitalis Solan (HP)

SECTION - IV

I cently that mad	an singh	(Name of student
pharmacist) has undergone	500	hours training spread over from Date
15/19/20 to 30/1/21	for a period of	84 daysonths in accordance with the
Viole		Sr Medical Superinter cent Histogram (Microsoft P) Pharmaceutical Division

SECTION - V

serialy that	(Name of student
plantinacist) has 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 pr	actical training in an
In the Sion approved the Pharmacy Council of India.	

22/4/2021

Schligar Vernerachtemic Ab Vuning Institute(H.P.)

11777

Is exact & every Sections should be filled in with correction information, signed & sealed with the amborized person with mentioning the dates.

2) The practical training shall be not less than five hundred hours spread over a period of not less than Sires wonths. Mention the period of training in DIYMM-YYYY format only.

Who head of an academic training institution, on application, shall supply in triplicate Practical Training Conteact Form for qualification as a Pharmacist

stor accessful completion of the practical training. It shall be the responsibility of the trainee to cover that one copy thereinafter referred to as the first copy of the Contract Form so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. M	adan Singh
(Name of student pharmacist) son of / daughter of_	sn. mohan Lal.
residing at Village That P.O Kotla 7	Teh & Dist solan HP Pin 17331
who has produced evidence before me that he/she is	
out in the Education Regulations framed under section	on 10 of the Pharmacy Act, 1948.
Date: 21 10/ 20	Head of the Academing Chair. Training Institution
C	of the state of th
SECTION	N - II
Madan Snigh	(Name of the Student Pharmacist)
secrept Madan Compal	(Name of the Apprentice Master) of
Abhilashi University Mande	M.P. (Name of the College / Institution)
Regional Hisspital Solan	(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.	School of Pharmery Anali-Chowk
Date:	Signature of the Student Pharmacist
SECTION	- III
1. Madan Grapal	(Name of the Apprentice Master)
iccept Str Smt. Madan Singly	
Name of the student pharmacist) as a trainee and I	agree to give him /her training facilities in my
organisation so that during his /her training he /she m	
Working knowledge of keeping of recon- profession of pharmacy; and Practical experience in –	ds required by the various Acts affecting the
in medicine	f chief crude drugs & chemical substance used
ter the reading, translation and copying of	prescriptions including the checking of doses;

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments, and
- (e) the storage of drugs and medicinal preparations.

Labor agree that a Registered Pharmacist shall be assigned for his /her guidance

This

Head of the Organization or Pharmaceutical Division CHC NIHE

SECTION - IV

certify that	TIKAM RAM	(Name of student
pharmicist) has undergone	500	hours training spread over from Date
01/07/2020 10 16/01/2	2001 for a period of	3 months in accordance with the
delinis chamerated in SECTIO		
Medical C.H.C. Distt.	Officer Sinri andi (H.P.) SECTION -	Head of the Organization or Pharmaceutical Division CHC NURS
I cently that TIK	AM RAM	(Name of student
		aining under regulation 20 of the Education
Regulations framed under sect	ion 10 of the Pharmacy A	et. 1948. He had his practical training in an
In-titution approved the Pharm	nacy Council of India.	
29/1/201		Head of the Academic

SCHE:

- each & every Sections should be filled in with correction information signed & sealed with the authorized person with memining the dates.
- 2) The practical training shall be not less than five hundred hours spread over a perfoil of not less than some months. Mention the period of training in DD/MM/YYYY format only.
- 13) head of an academic training institution, on application, shall supply in replicate 'Practical training Community Form for qualification as a Pharmacist
- 11 (see recessful completion of the practical training. It shall be the responsibility of the trainee to come that one copy thereinsfier referred in as the first copy of the Contract Form so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to Sri/Smt. TEKAM	RAM
(Name of student pharmacist) sen of / daughter of Sh.	MEHAR SINGH
residing at VIII. fegru. Po. 8 Teb. NIHRI	mandi HP 175038
who has produced evidence before me that he/she is entitle	
out in the Education Regulations framed under section 10 o	f the Pharmacy Act, 1948.
	eran 📈
17mc +3/10/20	Heigh Chan Academical Chest.
SECTION - II	
TIKAM RAM	(Name of the Student Pharmacist)
SCOOPL SH. DAPRAKASH SHARMA	(Name of the Apprentice Master) of
ABHILASHI UNIVERSITY.	(Name of the College / Institution)
C.H.C. NIHRI [MANDI] HP.	(Hospital or Pharmacy) as my
Apprentice Master for the above training and agree to obe	y and respect him / her during the entire
period of my training.	A I listue
	Adhalada
Date:	Signature of the Student Pharmacist
SECTION - III	
1. OM PRAKACH SHARMA	(Name of the Apprentice Muster)
accept Sri Smt. TIKAM RAM	
(Name of the student pharmacist) as a trainee and I agree	to give him /her training facilities in my
organisation so that during his /her training he /she may acq	uire: —
Working knowledge of keeping of records req profession of pharmacy; and Practical experience in –	uired by the various Acts affecting the

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

in medicine

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

- (d) the dispensing of prescriptions illustrating the commoner methods of administering medicaments; and
- (c) the storage of drugs and medicinal preparations.

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

	Pares in my the Bounder.
Date:	Head of the Organization or Pharmaceutical Division
section -	IV. **T**T**
I certify that AMIT KUMAR	(Name of student
pharmacist) has undergone 500	hours training spread over from Date
8 16 26 to 20 1 21 for a period of details enumerated in SECTION III	Medical Officer I/C Civil Hospital Arki Teh Arki, Oath Solan Ho Head of the Organization or Pharmaceutical Division
SECTION -	v
Certify that AMIT KUMAR	(Name of student
Pharmacist) has completed in all respect his practical trace. Regulations framed under section 10 of the Pharmacy A Institution approved the Pharmacy Council of India. Date: 25/02/2021	Head of the Academica and Training Institution and Institution

Tet: (2) Each & every Sections should be filled in with correction information, signed & sealed with the anathorized person with mentioning the dates.

VOX.1.

- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three manths. Mention the period of training in DD/MM/YYYY format only
- Free head of an academic training institution, on application, shall supply in triplicate. Practical Framming Contract Form for qualification as a Pharmacist
- incressoccassful completion of the practical training, It shall be the responsibility of the trainee to covere that one copy (hereinafter referred to us the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt. AMIT	KUMAR
(Name of student pharmacist) son of / daughter of \$4-	
residing at V-P-O- DARLAGHAT TEH-	ARKI DISTT- SOCAN
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 03/10/20	Plend on the Academic School Chowk Invot. Dist. (Janes (19.9.)
SECTION - II	
AMIT KUMAR	(Name of the Student Pharmacist)
incope Sh. MAHESH KUMAR	(Name of the Apprentice Master) of
Abhidashi University Mandi	(Name of the College / Institution)
civil Hospital Arla	(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.	
	Lole
Date.	Signature of the Student Pharmacist
SECTION - III	
1. MAHESH KUMAR	(Name of the Apprentice Master)
accept Sri / Smt. AMIT KUMAR	
(Name of the student pharmacist) as a trainee and I agree to	give him /her training facilities in my
organisation so that during his /her training he /she may acqu	ire: —
Working knowledge of keeping of records require profession of pharmacy; and Practical experience in – (a) the manipulation of pharmaceutical apparatus in (b) the recognition by sensors characters of chief of	n common use;

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

in medicine

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

This form has been issued to Sri/Smt.	sh Palo
(Name of student pharmacist) son of / daughter of	
residing at Cette Lasha P.O.	Galore Dist Hammy
who has produced evidence before me that he/she is entitle	and the second s
out in the Education Regulations framed under section 10 o	Head of the Agademic Charles Charles Training Instantion University Charles and Charles Tells Charles
SECTION - II	tractale agains
Gash Pall Suckashna Pancle	(Name of the Student Pharmacist)
accept Int O Culleaghna Panels	(Name of the Apprentice Master) of
CHC. Galore	(Name of the College / Institution)
	(Hospital or Pharmacy) as my
Apprentice Muster for the above training and agree to obey	and respect him / her during the entire
period of my training.	
	Whamp
Date 27/10/2021	Signature of the Student Pharmacist
	U
SECTION - III	
0	11.
1. Smt Sullcashna Pan	Name of the Apprentice Master)
accept Sri Smi. Uash Pul	
(Name of the student pharmacist) as (trainee and I agree t	o give him /her training facilities in my
organisation so that during his /her training he /she may acqu	
Working knowledge of keeping of records requestrolession of pharmacy; and	

- Practical experience in —
- (a) the manipulation of pharmaceutical apparatus in common use:
- (b) the recognition by sensors characters of chief crude drugs & chemical substance used in medicine
- (c) the reading, translation and copying of prescriptions including the checking of doses;

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - I

	C 11/2/1-1
This form has been issued to Sri/Smt.	
(Name of student pharmacist) son of / daughte	eros U Sh. Brij Mohan
residing at Utill. Lawha	P.O. Galore Dist Homorph
	she is entitled to receive the Practical Training as se
out in the Education Regulations framed under	
Date:	Head of the Academy Common Training Insumficely University and a second of the Academy Common
SEC	CTION - II
yash Val	(Name of the Student Pharmacist)
necept emt . Culleashing	Panolet (Name of the Apprentice Master) of
CHC. Galore	At the second se
CHC. Galore	(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.	
and to	UKhamp
Date 27/10/2021	Signature of the Student Pharmacist
	TION - HI
1 Smt Sulkashne necept Sri / Smt Ugsh	Panch (Name of the Apprentice Master)
(Name of the student pharmacist) as a trainee	and I agree to give him /her training facilities in my
organisation so that during his /her training he /	
	records required by the various Acts affecting the
The state of the s	и организа иг стиписи изс.

(b) the recognition by sensors characters of chief crude drugs & chemical substance used

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

in medicine

medicaments; and the storage of drugs and medicinal pre	parations.
l also agree that a Registered Pharmacist shall be	assigned for his /her guidance.
THE REST CO. IS NOT THE REST OF THE REST O	1 ame
Date 05 10 2020 Pharmacias Civil Hospital G dua Distt. Mandi (H)	Head of the Organization or Pharmageanical Division
SECTION	V-IV
I certify that Sh. Vi Kas Kuman	of Sh. Tele Chand (Name of studen
pharmacist) has undergone 500 kms	hours training spread over from Date
05 10 2020 to 16 01 2021 for a period of details enumerated in SECTION III	of 3 1/2 months in accordance with the
One 6 01 202 Switch Pharmacist Of the Distr. March 11	Head of the Organization or Pharmaceurical Phologogian Pharmaceurical Phologogian (H.P.)
SECTION	V - V
I cently that Vikas Kumas	(Name of student
pharmacist) has completed in all respect his practical	
Regulations framed under section 10 of the Pharmacy	v Act 1948. He had ble another training
Institution approved the Pharmacy Council of India.	rves, 1746. He had his practical training in an
The sea of the state of the sea o	0
Date 24/1/2021	Head of the Academie
	AND THE PARTY OF T

Is Each & every Sections should be filled in with correction information, signed & sealed with the antiboxized person with mentioning the dates.

WITE:

- 2) The practical training shall be not less than five hundred hours spread over a period of not less than three months. Mention the period of training in DD/MM/YYYY format only
- 3) The head of an academic training institution, on application, shall supply in triplicate 'Practical Training Contract Form for qualification as a Phormacist
- (ther successful completion of the practical training, it shall be the responsibility of the trainee to control that one copy thereinafter referred to as the first copy of the Contract Form) so filled is

PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS

SECTION - 1

This form has been issued to STUSmt. Vikas Yo	-max
(Name of student pharmacist) son of / daughter of Sh. T	
residing at Vill Kharsi P.D. Cohar, Teh. Coha	
who has produced evidence before me that he/she is entitled	
out in the Education Regulations framed under section 10 of	
Date 03/10/20	theid of the Acedemic
	AN Identification (Indiana) Charles
SECTION - II	
1 Vikas Kumar	(Name of the Student Pharmacist)
CH Gohar, Distt. Maneli	(Name of the Apprentice Master) of
CH Gohar, Dist. Mandi	(Name of the College / Institution)
C4.82	(Hospital or Pharmacy) as my
Apprentice Muster for the above training and agree to obey	
period of my training.	
water to	Sung.
Date 05/10/2020	Signature of the Student Pharmacist
SECTION – III	
1 Krishan Kumar	(Name of the Apprentice Master)
never Sri Smi VI (Cas Kumar	1
(Name of the student pharmacist) as a trainee and I agree to	give him /her training facilities in my
organisation so that during his /her training he /she may acqui	ire: —
Working knowledge of keeping of records requi- profession of pharmacy; and Practical experience in -	red by the various Acts affecting the
the manipulation of pharmaceutical apparatus ir	г соттол изе:
the recognition by sensors characters of chief e in medicine	rude drugs & chemical substance used
the reading, translation and copying of prescript	ions including the checking of doses;