



A
Project Report on

Formulation Development Study of Oral Wafers of A Model Antidepressant Drug

Submitted by

MD MUSTAKIM MALLICK

University Regn. No. – 211892320310001 of 2021-23
Roll No. - 18920321001

Under the guidance of
Prof. (Dr). Subhabrata Ray
PG studies & Research
Dr. B.C. Roy College of Pharmacy & AHS

In partial fulfilment of the Requirement for the Degree of
Master of Pharmacy in Pharmaceutics

Submitted to
**Maulana Abul Kalam Azad University of Technology
West Bengal**

**Dr. B. C. Roy College of Pharmacy and Allied Health Sciences
Durgapur 713206 Academic Year: 2022 – 2023**



Prof. (Dr.) Samir Kumar Samanta
M. Pharm., Ph.D (J.U.)
Principal
Dr. B. C. Roy College of Pharmacy & AHS
Durgapur, West Bengal-713206

DECLARATION

I am hereby declared that the Project entitled "Formulation Development Study of Oral Wafers of A Model Antidepressant Drug" in partial fulfilment of the requirement for the award of Master of Pharmacy submitted to Maulana Abul Kalam Azad University of Technology, West Bengal, is an authentic record of bona fide work carried out by me under the guidance of Prof. (Dr.) Subhabrata Ray.

The matter embodied in this Project has not been submitted for the award of any other degree or diploma to any University / Institution.

Md. Mustakim mallick
Signature

Name of Candidate: Md. Mustakim mallick

Roll No: 18920321001

Date: 24/05/23

Place: Durgapur




Prof. (Dr.) Subhabrata Ray
M. Pharm., Ph.D (I.U.)
Principal
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CERTIFICATE

This is to certify that the Project entitled "Formulation Development Study of Oral Wafers of A Model Antidepressant Drug" by Md Mustakim Mallick in partial fulfilment for the MASTER OF PHARMACY (PHARMACEUTICS) under MAULANA ABUL KALAM AZAD UNIVERSITY OF TECHNOLOGY, is a record of the original research work under our supervision and up to our satisfaction. To our knowledge, neither his/her thesis nor any part of it has been submitted for any other academic award anywhere before. The thesis is forwarded to Controller of Examination MAULANA ABUL KALAM AZAD UNIVERSITY OF TECHNOLOGY for assessment.




Signature of Guide

Name of Guide: Prof. (Dr.) Subhabrata Ray

Date: 24/5/23

Place: Durgapur



PROF (DR.) SAMIR KR. SAMANTA
(PRINCIPAL)

Date:

Place: Durgapur

Signature

Name of External Examiner:

Date:

Place:




Prof. (Dr.) Kajal Ghosal
M. Pharm. (Pharmaceutics) (J.U.)
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_____ NA _____

Signature of Co-Guide

Name of Co-Guide: NA

Date: NA

Place: NA