

[Refer to Chapter - II, Regulation - 7 of ER - 2014]

Practical Training Contract Form For Pharmacists

SECTION I

This form has been issued to Hampi Hansda

(Name of student pharmacist)

son of /daughter of Babu Ram Hansda residing at vill + Po - Balidaha

Gusap, Hooghly, 712303 who has produced evidence before me

that he/she is entitled to receive the Practical Training as set out in the Education Regulations, 2014 made under section

10 of the Pharmacy Act, 1948.

Date: 07/06/23

*Veril Ac*  
*7/6*

*[Signature]*  
The Head of Institution Samantha  
Imparting practical training  
(J.U.)  
Principal  
Dr. B. C. Roy College of Pharmacy & AHS  
Durgamur, West Bengal-713206

SECTION II

I, Hampi Hansda

(Name of the Student Pharmacist)

MD. Kabir Mallik

of Dhaniakhali Rural Hospital

(Name of the Apprentice Master)

(Name of the 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.

Hampi Hansda  
(Student Pharmacist)

SECTION III

I, MD. Kabir Mallik

(Name of the Apprentice Master)

accept

Hampi Hansda

(Name of the student pharmacist)

as a

trainee and I agree to give him /her training facilities in my organization so that during his /her training he /she may acquire:

1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
2. Practical experience in -
  - 1) Stocking of Drugs and Medical Devices
  - 2) Inventory control procedures
  - 3) Handling of prescriptions
  - 4) Dispensing
  - 5) Patient counseling

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



*[Signature]*  
Prof. (Dr.) Samir Kumar Samanta  
M. Pharm., Ph.D (J.U.)  
Principal

Dr. B. C. Roy College of Pharmacy & AHS  
Durgamur, West Bengal-713206

MD. Kabir Mallik  
Reg. NO - A-6676  
(Apprentice Master)

(Name & address of the Institution)

Pharmacist  
Dhaniakhali Rural Hospital  
Dhaniakhali Hooghly

SECTION IV

I certify that Mamfi Hansda had / has  
(Name of student pharmacists)

undergone 150 hours training spread over 1 months in accordance with the details enumerated in SECTION III.

(The Head of Institution imparting practical training)  
Block Medical Officer of Health  
Dhama Khali Rural Hospital  
P.O.- Dhama Khali, Dist.- Hooghly

SECTION V

I certify that Mamfi Hansda has  
(Name of student pharmacists)

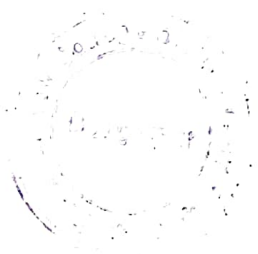
completed in all respect his practical training under regulation 7 of Chapter - II of the Education Regulations, 2014 made under section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution approved by the Pharmacy Council of India.

Date: 16/6/23

Submitted AZ  
10/8-

(Head of the Academic Institution)

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



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