

[Refer to Chapter – II, Regulation – 7 of ER - 2014]
Practical Training Contract Form For Pharmacists

SECTION I

This form has been issued to Niladri Roy
(Name of student pharmacist)

✓
son of/daughter of Alak Roy residing at Vill + P.O - Raugorah
Dist - Jhargram, Pin Code - 721128 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: 16/06/2023

Vinil AR
T6/T6

16/06/2023
The Head of Institution
Imparting practical training (J.U.)

Dr. B. C. Roy, Pharmacy & AHS
Durgapur, West Bengal - 713206

SECTION II

Niladri Roy
(Name of the Student Pharmacist)

Jogdev Karmodak of Raipur 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.

Niladri Roy
(Student Pharmacist)

SECTION III

I, Jogdev Karmodak accept
(Name of the Apprentice Master)

Niladri Roy as a
(Name of the student pharmacist)

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.



16/06/2023
Prof. (Dr.) Samir Kumar Samanta
M. Pharm., Ph.D (J.U.)
Principal
Dr. B. C. Roy, Pharmacy & AHS
Durgapur, West Bengal - 713206

Jogdev Karmodak
(Apprentice Master)
(Name & address of the Institution)
Pharmacist
Raipur Rural Hospital
Raipur, Bankura

SECTION IV

I certify that Niladri Roy had / has

(Name of student pharmacists)

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

[Signature]
(The Head of Institution imparting practical training)

Block Medical Officer of Health
Raipur Rural Hospital
Raipur :: Bankura

SECTION V

I certify that Niladri Roy 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: 10-10-23

[Signature]

[Signature]
(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



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