

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

SECTION I

This form has been issued to TRITA MURMU
(Name of student pharmacist)
son of /daughter of SUNIL KUMAR MURMU residing at ADRA, PURULIA
, 723121 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: 7.6.2023

*Veil A
7/6*

[Signature]
The Head of Institution, Samanta
Imparting practical training
M. Pharm., Ph.D (J.U.)
Dr. B. C. Roy College of Pharmacy & AHS
Durgapur, West Bengal - 713206

SECTION II

I, TRITA MURMU
(Name of the Student Pharmacist)
MADHUMITA MANDAL of RAGHUNATHPUR SUPER SPECIALITY 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.

TRITA MURMU
(Student Pharmacist)

SECTION III

I, MADHUMITA MANDAL accept
(Name of the Apprentice Master)
TRITA MURMU 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.



[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

Madhumita Mandal
Raghnathpur S. D. Hospital
(Apprentice Master)
(Name & address of the Institution)
Raghnathpur S. D. Hospital
Durgapur, West Bengal

