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

**SECTION I** KANSARI SOUDIPTA This form has been issued to (Name of student pharmacist) VILL- RAIMON I KHAKI DIPAK KUMAR KANSARI son of /daughter of\_ residing at BAKULTALA, P.S-RAIDIGHI, DIST-SOUTH 24 PAS 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: 09/06/23 Imparting practical training Gamunts

Puris, (Chr.) Bashir (Cumes Gamunts

Puris, (Chr.) Bashir (Ch.) SECTION II SOUDIPTA KANSARI \* (Name of the Student Pharmacist) MATHURAPUR RURAL (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. Soudipla Karsari (Student Pharmacist)

(Name of the Apprentice Master)

SOUDIPTA

KANSARI

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
  - Inventory control procedures
  - 3) Handling of prescriptions
  - Dispensing
  - 5) Patient counseling

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

Sowar Naskn augupher P.H.C.

Mathurapur-I

South 24 Pargamas (Apprentice Master)

(Name & address of the Institution)

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

Durgapur, West Bengal-713206

I certify that	SOUDIPTA		IONIV SARI		had / has
,	(Name of student pharmacists)  150 hours training spread over months in accordance with the details enumerated in SECTION III.				
undergone	150 nous training spread over 2—nic				
			(The Head	l of Institution	Amparting practical training)  AMOLE  B.M.O.E
		SECTIONV			B.M.O.H Matherapur Rural Hospital South 24 Parganas
I certify tha	SOUDIP	TA	KANS	ARI	has
	(Name of student pho	1-4	an 7 of Char	oter - II of the	Education Regulations, 2014 made itution approved by the Pharmacy

under section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution approved by the Pharmacy

Council of India.

(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

Samanta Durgapur, West beligater 1. Jo