



MACLEODS
PHARMACEUTICALS LIMITED

Offer Letter for Apprenticeship

Name: **Mr. Samiran Bosw**

Date: **05/09/2020**

Name: **Mr. Samiran,**

We are pleased to extend to you this offer of working as an Apprentice. If you accept this offer, you will begin your Apprenticeship with the Company on D. 03/10/2020 and will be expected to work 6 Days per week.

You will be paid a stipend of Rs. 9500/- per month less all applicable taxes and withholding. As an Apprentice, you will not receive any of the employee benefits that regular company employees receive.

Your Apprenticeship is expected to end on 02/01/2021. However, your Apprenticeship with the company is "at-will," which means that either you or the company may terminate your Apprenticeship at any time, with or without cause and with or without notice.

During your Apprenticeship, you may have access to trade secrets and confidential business information belonging to the company. By accepting this offer of Apprenticeship, you acknowledge that you must keep all this information strictly confidential, and refrain from using it for your own purpose or from disclosing it to anyone outside the company. In addition, you agree that, upon conclusion of your Apprenticeship, you will immediately return to the company all of its property, equipment, and documents, including electronically stored information.

By accepting this offer, you agree that throughout your Apprenticeship, you will observe all Rules and policies and practices governing the conduct of our business and employees, including our policies prohibiting discrimination and harassment. This letter sets forth the complete offer we are extending to you, and supersedes and replaces any prior inconsistent statements or discussions. It may be changed only by a subsequent written agreement.

I hope that your association with the company will be successful and rewarding. Please indicate your acceptance of this offer by signing below.

With best regards,

For: **Macleods Pharmaceuticals Ltd.**

Authorized Signatory

Acceptance:

I accept employment with the Company on the terms and condition set out in this letter.

Mr./Ms.

MACLEODS
PHARMACEUTICALS
LIMITED

Regd. Office:
Attn: Admin, Church Road,
Nagarjuna Hills, Anchari Kula Road,
Anchari Road, Musheer-400 059, Andhra Pradesh

Phone: 91 - 08 - 6676 8900
Fax: 91 - 08 - 2995 6599
Email: care@macleodspharma.com
Website: www.macleodspharma.com
CN: 0348226A119079C050049

SHRI
BENTLEY ROAD, VAD
SOMATI DIST. WARD
TOLU, GUNTUR DIST. WARD