

**Representative documents of students progressing for  
Higher Education**

**2017-2018**



  
(Dr. R. O. Ganjwale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha

**Vidarbha Youth Welfare Society's**  
**INSTITUTE OF PHARMACEUTICAL EDUCATION AND RESEARCH**  
**Borgaon (Meghe), Wardha 442001 (M. S.)**

**List of Name of student who enrolled for higher education**

Sr. No.	Name of student who enrolled for higher education	Name of institution joined	Name of program admitted to
1.	Ku. A. V. Yerne	Dadasaheb Balpande college of Pharmacy, Nagpur, (M. S.)	M. Pharm
2.	Ku. D. N. Nagare	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
3.	Ku. H. A. Bhojar	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
4.	Ku. H. A. Chakole	National Institute of Pharmaceutical Education And Research (NIPER), Panjab	M. Pharm
5.	Ku. H. S. Bode	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
6.	Ku. K. S. Talekar	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
7.	Ku. K. S. Kamble	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
8.	Ku. K. M. Gomkale	Priyadarshani J. L. Chaturvedi College of Pharmacy, Nagpur, (M. S.)	M. Pharm
9.	Ku. K. K. Kharabe	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
10.	Ku. M. P. Sarode	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
11.	Ku. M. A. Soni	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
12.	Ku. M. N. Yengade	Institute of Pharmaceutical Education and Research, Wardha, Maharashtra	M. Pharm
13.	Ku. M. G. Umate	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
14.	Ku. M. R. Zoting	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
15.	Ms. N. U. Sheikh	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
16.	Ku. R. P. Urkude	JSPM's Charak College of Pharmacy, Pune, (M. S.)	M. Pharm
17.	Ku. R. V. Gawande	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
18.	Ku. S. A. Bandgar	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
19.	Ku. S. A. Patekar	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm




*(Signature)*  
**(Dr. R. O. Ganjiwale)**  
**Principal**  
**PRINCIPAL**  
**Institute of Pharmaceutical Education & Research**  
**Borgaon (Meghe), Wardha**

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20.	Ms. S. U. Dhurve	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
21.	Ku. T. G. Shete	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
22.	Ms. U. P. Kowe	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
23.	Ku. Y. S. Mude	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
24.	Mr. A. A. Gaikwad	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
25.	Mr. A. A. Sabale	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
26.	Mr. M. B. Itankar	NDMVP Samaj's College of Pharmacy, Nashik, (M. S.)	M. Pharm
27.	Mr. N. J. Gujar	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
28.	Mr. S. S. Satone	Institute of Pharmaceutical Education and Research, Wardha, (M. S.)	M. Pharm
29.	Mr. V. S. Marde	National Institute of Pharmaceutical Education and Research, Hyderabad, (Telangana)	M. Pharm



  
(Dr. R. O. Ganjiwale)  
Principal  
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Borgaon (Meghe), Wardha



**STATEMENT OF MARKS**

Sr No. **019716**

**THIRD SEMESTER MASTER OF PHARMACY PHARMACEUTICS WINTER 2019**

**[CREDIT AND GRADE BASED]**

NAME OF STUDENT : **AARTI VIJAY YERNE** MEDIUM : **ENGLISH**  
 MOTHER'S NAME : **KANJANA** CENTRE CODE : **153**  
 ENROLLMENT NO : **2015016601796386** EXAM CATEGORY : **REGULAR**  
 ROLL NO : **238425** DATE : **21/01/2020**  
 COLLEGE NAME : **(150) DADASARABU BALPHARDE COLLEGE OF PHARMACY WAGDHARE-440037**

SR	SUBJECT	MARKS & CREDITS SCHEME				GRADES AWARDED			
		MAX	MIN	MARKS	MARKS	GR	CR	GP	GPV
1	RESEARCH METHODOLOGY AND BIostatISTICS	75	25	100	50	C	07	04	28
2	JOURNAL CLUB	--	25	025	13	A	09	01	09
3	DISCUSSION/PRESENTATION (PROPOSAL PRESENTATION)	--	50	050	25	A	09	02	18
4	RESEARCH WORK	350	--	350	175	O	10	14	140

INCENTIVE	GPV	TOTAL CREDITS	SGPA	OUT OF	RESULT	REMARKS
	195	21	9.29	10.00	PASS	

**[FACULTY OF SCIENCE & TECHNOLOGY]**  
**[CREDIT AND GRADE BASED]**

Criteria for Award of Grades :

Grade	Percentage Score	Grade Point
G	100.00 - 94	10
A	89.99 - 80	09
B	79.99 - 70	08
C	69.99 - 60	07
D	59.99 - 50	06
F	LESS THAN 50	00
AB	Absent in Examination	--

**ABBREVIATIONS**  
 \*Pass by grade marks vide Ordinance No.3 of 2007. \*T=Theory, \*P=Practical, \*R=Refusal, \*U=Theory University, \*PU=Practical University, \*TI=Theory Internal, \*PI=Practical Internal, \*GP=Grade Points, \*GPV=Grade Point Value, \*MR=Remark, \*CR=Credit, \*X=Current Exception, \*PX=Previous Exemption, \*A=Absent, \*I=Incentive, \*NCC=National Cadet Corps, \*NSC=National Service Scheme, \*CUL=Cultural Activity, \*GAS=Games and Sports, \*ACE=Adult & Continuing Education



(Dr. R. O. Ganjwale)  
 Principal  
 Institute of Pharmaceutical Education & Research  
 Wagdhare (Wardha), Wardha

20/01/2020 19:28



State Common Entrance Test Cell, Maharashtra State, Mumbai  
 8th Floor, New Excelstor Building, A.K.Nagar, Fort, Mumbai-400001.(M.S.)  
 Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year  
 Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18101741 Mode of Admission : Non Sponsored

Personal Details			
Full Name	NAGARE DHANASHRI NAGESH		
Nationality	Indian	Gender	Female
Date of Birth	18-10-1996	Annual Family Income (₹)	1,00,001 - 1,50,000
Category-Caste	OPEN		
Religious Minority/Linguistic Minority	N.A		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		



Allotment Details	
All India Merit Number	2437
Allotted Choice Code	416082110
Allotted Seat Type	GOPEN
Preference No.	3

Reporting Details			
Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	5000/-	Course	416082110-Pharmacology
Development Fees (₹)	0/-	Admission Date	18-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 3
Total Fees (₹)	5000/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate or remove from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:18-08-2018	 <b>Signature of The Candidate</b> (NAGARE DHANASHRI NAGESH) 
Place :	

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	Signature of Institute Officer (4160)
Reported On:18-08-2018 04:49:23 PM	<b>Dr. R. O. Ganjivale</b>
Printed On :18-08-2018 04:49:32 PM	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha
Last Modified On :18-08-2018 04:49:23 PM	Last Modified By:4160



(Dr. R. O. Ganjivale)  
 Principal  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full**  
**Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

Admission ID : MPH18100296 Mode of Admission : Non Sponsored

**Personal Details**

<b>Full Name</b>	BHOYAR HARSHA SANJAY		
<b>Nationality</b>	Indian	<b>Gender</b>	Female
<b>Date of Birth</b>	03-03-1996	<b>Annual Family Income (₹)</b>	3,00,001 - 3,50,000
<b>Category-Caste</b>	OBC -Kunabi		
<b>Religious Minority/Linguistic Minority</b>	N.A		
<b>PWD Type</b>	N.A.		
<b>Type of Candidature</b>	Maharashtra State Candidate - Type A		



*Harsha Bhoyar*

**Allotment Details**

<b>All India Merit Number</b>	879
<b>Allotted Choice Code</b>	416012610
<b>Allotted Seat Type</b>	GOPEN
<b>Preference No.</b>	1

**Reporting Details**

<b>Institute</b>	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
<b>Tuition Fees (₹)</b>	5000/-	<b>Course</b>	416012610-Quality Assurance Techniques
<b>Development Fees (₹)</b>	0/-	<b>Admission Date</b>	04-08-2018
<b>Other Fees (₹)</b>	0/-	<b>Admission Type</b>	CAP Round 1
<b>Total Fees (₹)</b>	5000/-		
<b>Remark</b>	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

<b>Date:</b> 04-08-2018	 <b>Signature of The Candidate</b> (BHOYAR HARSHA SANJAY)
<b>Place :</b> Wardha	



**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

<b>Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha</b>	<b>Signature of Institute Officer (4160)</b> I/c. PRINCIPAL
<b>Reported On:</b> 04-08-2018 03:40:06 PM	<b>Institute of Pharmaceutical Education and Research By:</b> 4160
<b>Printed On :</b> 04-08-2018 03:40:16 PM	<b>Borgaon (Meghe), Wardha Printed By:</b> 4160
<b>Last Modified On :</b> 04-08-2018 03:40:06 PM	<b>Last Modified By:</b> 4160



*(Dr. R. O. Ganjivale)*  
**Principal**  
**Institute of Pharmaceutical Education & Research**  
 Borgaon (Meghe), Wardha



राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान

**NATIONAL INSTITUTE OF PHARMACEUTICAL  
EDUCATION AND RESEARCH (NIPER)**  
(Ministry of Chemicals & Fertilizers, Govt. of India)



I. Card No. : 19BTM3027  
Name : Chakole Harshda Arun  
Programme : M.S. (PHARM.)  
Department : BT  
Blood Group : B +VE  
Valid Upto : JUNE 2021



**IDENTITY CARD**

*Present Address*

CF-209, RAMI HOSTEL, M.D. 2207468661

*Permanent Address*

RD118, 15 RAMBUMSOTI, NERABHA, NENGAIPADA, NAGPUR, INDIA

*E-mail* : harshdajchakole@gmail.com

*Instructions* :

- \* This card is non-transferable.
- \* The holder must carry this card always and produce the same on demand.
- \* The loss of this card must be reported to the Issuing Authority and nearest Police Station immediately.
- \* A duplicate card will be issued on payment of Rs. 100/-

*If found, please return to*

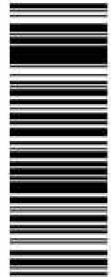
**NATIONAL INSTITUTE OF PHARMACEUTICAL  
EDUCATION AND RESEARCH (NIPER)**

Sector 67, SAS Nagar, Punjab 160062, (INDIA)

Ph. : 0172-2214682-87,

Fax : 0172-2214692, 2230068

Web : www.niper.gov.in



*(Dr. R. O. Ganjiwale)*  
**(Dr. R. O. Ganjiwale)**

**Principal**

**PRINCIPAL**


**Institute of Pharmaceutical Education & Research  
Borgou (Meghe), Wardha**



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full**  
**Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

Application ID : MPH18100260 Mode of Admission : Non Sponsored

**Personal Details**

Full Name	BODE HARSHITA SHRIRAM			 <i>Bode</i>
Nationality	Indian	Gender	Female	
Date of Birth	02-06-1993	Annual Family Income (₹)	5,00,000 - 5,50,000	
Category-Caste	NT 2 (NT-C) -Dhangar			
Religious Minority/Linguistic Minority	N.A			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			

**Allotment Details**

All India Merit Number	2563
Allotted Choice Code	416081710
Allotted Seat Type	GNTC
Preference No.	1

**Reporting Details**


Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	5000/-	Course	416081710-Pharmaceutics
Development Fees (₹)	0/-	Admission Date	04-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	5000/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

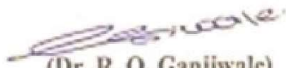
Date: 04-08-2018	 <b>Signature of The Candidate</b> (BODE HARSHITA SHRIRAM)
Place : Wardha	

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	 <b>Signature of Institute Officer (4160)</b>
Reported On : 04-08-2018 03:37:05 PM	<b>I/c. PRINCIPAL</b>
Printed On : 04-08-2018 03:37:19 PM	Institute of Pharmaceutical Education & Research Borgaon (Meghe), Wardha
Last Modified On : 04-08-2018 03:37:05 PM	Reported By: 4160 Printed By: 4160 Last Modified By: 4160



  
 (Dr. R. O. Ganjwale)  
**Principal**  
**I/c. PRINCIPAL**  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha






State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full  
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18102065 Mode of Admission : Non Sponsored

Personal Details

Full Name	TALEKAR KANCHAN SANJAY			 K.S.Talekar
Nationality	Indian	Gender	Female	
Date of Birth	26-03-1996	Annual Family Income (₹)	50,001 - 1,00,000	
Category-Caste	OBC -Teli			
Religious Minority/Linguistic Minority	N.A			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			

Allotment Details

All India Merit Number	847
Allotted Choice Code	416012610
Allotted Seat Type	GNTA
Preference No.	7

Reporting Details

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	20000/-	Course	416012610-Quality Assurance Techniques
Development Fees (₹)	0/-	Admission Date	14-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 2
Total Fees (₹)	20000/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:14-08-2018

Place : Wardha.

*K.S. Talekar*  
Signature of The Candidate  
(TALEKAR KANCHAN S ANJ)



INSTITUTE USE ONLY

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity.The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha

Signature of Institute Officer (4160)

Reported On:14-08-2018 02:30:13 PM

Reported By:4160  
Institute of Pharmaceutical Education & Research

Printed On :14-08-2018 02:30:22 PM

Borgaon (Meghe), Wardha 4160

Last Modified On :14-08-2018 02:30:13 PM

Last Modified By:4160



(Dr. R. O. Ganjwale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha




**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
 8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001, (M.S.)  
 Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full  
 Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18102348

Mode of Admission : Non Sponsored

**Personal Details**

Full Name	KAMBLE KARISHMA SUDHAKAR			
Nationality	Indian	Gender	Female	
Date of Birth	13-01-1995	Annual Family Income (₹)	15,001 - 50,000	
Category-Caste	SC -Mahar	Religious	N.A.	
Minority/Linguistic Minority	N.A.	PwD Type	N.A.	
Type of Candidature	Maharashtra State Candidate - Type A			

**Allotment Details**

All India Merit Number	948
Allotted Choice Code	416012610
Allotted Seat Type	GSC
Preference No.	1

**Reporting Details**


Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	0/-	Course	416012610-Quality Assurance Techniques
Development Fees (₹)	0/-	Admission Date	13-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	0/-	Remark	OK

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2018

Place :

**K.S.Kamble**  
 Signature of The Candidate  
 (KAMBLE KARISHMA SUDHAKAR)



**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha

Reported On: 13-08-2018 04:15:09 PM

Printed On :13-08-2018 04:15:17 PM

Last Modified On :13-08-2018 04:15:09 PM



Signature of Institute Officer (4160)  
**I/c. PRINCIPAL**  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha  
 Reported By: 4160  
 Last Modified By: 4160



*(Dr. R. O. Ganjivale)*  
 Principal  
**I/c. PRINCIPAL**  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha



# Rashtrasant Tukadoji Maharaj Nagpur University

Established by Government of Maharashtra Education Department, Maharashtra, India. It was started on 17th of August, 1923 & presently a State University. The Government of Maharashtra Public Instruction Act, 1918 (M.A. Act No. 19 of 1918).

## STATEMENT OF MARKS

Sr No 065043

(FACULTY OF SCIENCE & TECHNOLOGY)  
FOURTH SEMESTER MASTER OF PHARMACY PHARMACOLOGY, SUMMER 2020  
(CREDIT AND GRADE BASED SYSTEM)

STUDENT NAME: KIRAN MANOHAR GOMEALE ROLL NO: 123111 DATE: 19/10/2020  
MOTHER'S NAME: CHANDA CENTRE NO. P/L: 3/1  
ENROLLMENT NO: 2013016600288077 EXAM CATEGORY: REGULAR MEDIUM: ENGLISH  
COLLEGE NAME: (265) PRIYADARSHINI J.L. COLLEGE OF PHARMACY ELECTRONIC ZONE, BULLFINN, M.I.D.C. HINGNA ROAD, NAGPUR

SR NO.	SUBJECT	MARKS & CREDITS SCHEME			GRADES AWARDED				
		MAX TU/PT	MAX TU/PI	MIN MARKS	GRADE	GP	CR	GPV	RMK
1	JOURNAL CLUB	025	025	013	A	09	01	09	
2	DISCUSSION PRESENTATION (PROPOSAL PRESENTATION)	075	075	038	A	09	03	27	
3	RESEARCH WORK AND COLLOQUIUM	400	400	200	B	08	16	128	

INCENTIVE	GPV	TOTAL CREDIT	SGPA	OUT OF	RESULT	CGPA	FINAL CREDIT	REMARKS
	164	20	8.20	10.00	PASS	7.89	C	

SEMESTER	I	II	III	SEM I+II+III+IV	CLASS / DIVISION
SGPA / CREDITS	7.08 / 26	7.23 / 26	9.00 / 21	SEM. CR : 97	FIRST CLASS WITH DISTINCTION
GPV	184	188	189	SEM. GPV : 765	

Criteria for Award of Grades:

Grade	Percentage Score	Grade Point
O	100.00 - 90	10
A	89.99 - 80	09
B	79.99 - 70	08
C	69.99 - 60	07
D	59.99 - 50	06
F	LESS THAN 50	00
AB	Absent in Examination	-

Criteria for Final Grade:

CGPA	Final Grade
10	O
9	A
8	B
7	C
6	D
0 - 5.99	F
0	AB

Criteria for Class / Final Grade:

CGPA	Final Grade
7.50 - 10.00	DISTINCTION
6.00 - 7.49	FIRST CLASS
5.00 - 5.99	SECOND

ABBREVIATIONS

\*Note: Pass by grace marks vide Ordinance No. 3 of 2007. (R)-Fall Ok=Conversion RR=Refusal TU=Theory University, PU=Practical University TI=Theory Internal, PI=Practical Internal, GP=Grade Points, GPV=Grade Point Value, RMK=Remark, CR=Credit, XM=Current Exemption, PEM=Previous Exemption, AA=Absent, INC=Incumbent, MCC=National Cadet Corps, NSS=National Service Scheme, CUL=Cultural Activity, GS=Games and Sports, ACE=Adult & Continuing Education



*(Dr. R.O. Ganjivale)*  
Principal

Board of Examination and Evaluation  
Rashtrasant Tukadoji Maharaj Nagpur University  
Institute of Pharmaceutical Education & Research  
Borghole (Borghole), Nagpur



State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001, (M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full  
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18100990

Mode of Admission : Non Sponsored

Personal Details

Full Name	KHARABE KOMAL KAMLAKARJI			
Nationality	Indian	Gender	Female	
Date of Birth	25-12-1996	Annual Family Income (₹)	50,001 - 1,00,000	
Category-Caste	OBC - Kumbi Maratha			
Religious Minority/Linguistic Minority	N.A.			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			

Allotment Details

All India Merit Number	689
Allotted Choice Code	416081710
Allotted Seat Type	GOPEN
Preference No.	1

Reporting Details

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	10000/-	Course	416081710-Pharmaceutics
Development Fees (₹)	0/-	Admission Date	13-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	10000/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2018

Place :

Signature of The Candidate  
(KHARABE KOMAL KAMLAKARJI)

INSTITUTE USE ONLY

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha

Reported On : 13-08-2018 04:08:07 PM

Printed On : 13-08-2018 04:08:19 PM

Last Modified On : 13-08-2018 04:08:07 PM



Signature of Institute Officer (4160)

Principal  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha  
Reported By: 4160  
Printed By: 4160  
Last Modified By: 4160



(Dr. R. O. Ganjwale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha



State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year  
Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18100665 Mode of Admission : Non Sponsored

**Personal Details**

Full Name	SARODE MADHURI PRAKASHRAO		
Nationality	Indian	Gender	Female
Date of Birth	26-11-1996	Annual Family Income (₹)	3,00,001 - 3,50,000
Category-Caste	OBC -Kunabi		
Religious Minority/Linguistic Minority	N.A.		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		



*M. Sarode*

**Allotment Details**

All India Merit Number	3184
Allotted Choice Code	416081710
Allotted Seat Type	GSC
Preference No.	2

**Reporting Details**

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	5000/-	Course	416081710-Pharmaceutics
Development Fees (₹)	0/-	Admission Date	18-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 3
Total Fees (₹)	5000/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am a student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rustre from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 18-08-2018	 <b>Signature of The Candidate</b> (SARODE MADHURI PRAKASHRAO) 
Place :	

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	 Signature of Institute Officer (4160) <b>DR. PRINCIPAL</b> Institute of Pharmaceutical Education & Research Borgaon (Meghe), Wardha Reported By: 4160 Printed By: 4160 Last Modified By: 4160
Reported On: 18-08-2018 04:47:13 PM	
Printed On : 18-08-2018 04:47:19 PM	
Last Modified On : 18-08-2018 04:47:13 PM	



*(Dr. R. O. Ganjivale)*  
Principal  
**DR. PRINCIPAL**  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha

State Common Entrance Test Cell, Maharashtra State, Mumbai  
 8th Floor, New Excelior Building, A.K.Naya's Park, Fort, Mumbai-400001.(M.S.)  
 Receipt : Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full  
 Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Registration ID : MPH18100242

Mode of Admission : Non Sponsored

**Personal Details**

Full Name	SONI MAYUR ASHOKCHAND		
Nationality	Indian		
Date of Birth	05-11-1996	Annual Family Income (₹)	50,001 - 1,00,000
Category-Caste	OPEN		
Religious Minority/Linguistic Minority	Religious Minority - Jain/N.A.		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		

**Allotment Details**

All India Merit Number	1613
Allotted Choice Code	416012610
Allotted Seat Type	PWD
Preference No.	2

**Reporting Details**

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	5000/-	Course	416012610-Quality Assurance Techniques
Development Fees (₹)	0/-	Admission Date	16-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 3
Total Fees (₹)	5000/-		
Remark	OK		

**Declaration by Candidate** : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the College/Institute/University/Government and the undertaking given above.

Date: 16-08-2018

Place :

*(Signature)*  
 Signature of The Candidate  
 (SONI MAYUR ASHOKCHAND)



**INSTITUTE USE ONLY**

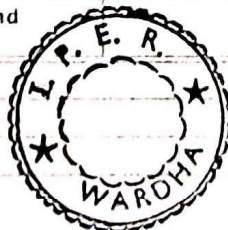
**Declaration by the College/Institute** : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The Candidate has paid the fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha

Reported On : 16-08-2018 04:20:55 PM

Printed On : 16-08-2018 04:21:11 PM

Last Modified On : 16-08-2018 04:20:55 PM



*(Signature)*  
 Signature of Institute Officer (4160)

**I/O. PRINCIPAL**

Institute of Pharmaceutical Education & Research,  
 Borgaon (Meghe), Wardha By: 4160

Last Modified By: 4160



*(Signature)*  
 (Dr. R. O. Ganjivale)

Principal


Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two**  
**Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

**Application ID : MPH18100257** **Mode of Admission : Non Sponsored**

**Personal Details**

<b>Full Name</b>	YENGADE MAYURI NARESHRAO			 <i>Yengade</i>
<b>Nationality</b>	Indian	<b>Gender</b>	Female	
<b>Date of Birth</b>	06-02-1996	<b>Annual Family Income (₹)</b>	1,00,001 - 1,50,000	
<b>Category-Caste</b>	OBC -Kunabi			
<b>Religious Minority/Linguistic Minority</b>	N.A			
<b>PWD Type</b>	N.A.			
<b>Type of Candidature</b>	Maharashtra State Candidate - Type A			

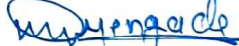

**Allotment Details**

<b>All India Merit Number</b>	1558
<b>Allotted Choice Code</b>	416081710
<b>Allotted Seat Type</b>	GOBC
<b>Preference No.</b>	1

**Reporting Details**

<b>Institute</b>	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
<b>Tuition Fees (₹)</b>	5000/-	<b>Course</b>	416081710-Pharmaceutics
<b>Development Fees (₹)</b>	0/-	<b>Admission Date</b>	04-08-2018
<b>Other Fees (₹)</b>	0/-	<b>Admission Type</b>	CAP Round 1
<b>Total Fees (₹)</b>	5000/-		
<b>Remark</b>	OK		

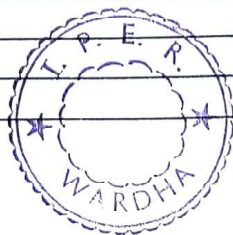
**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

<b>Date:</b> 04-08-2018	 <b>Signature of The Candidate</b> (YENGADE MAYURI NARESHRAO) 
<b>Place :</b> <i>Wardha</i>	

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

<b>Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha</b>	<b>Signature of Institute Officer (4160)</b> <i>Scale</i> I/c. PRINCIPAL
<b>Reported On:</b> 04-08-2018 04:40:47 PM	<b>Reported By:</b> 4160
<b>Printed On :</b> 04-08-2018 04:41:02 PM	<b>Printed By:</b> 4160
<b>Last Modified On :</b> 04-08-2018 04:40:47 PM	<b>Last Modified By:</b> 4160




*Scale*  
(Dr. R. O. Ganjiwale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two**  
**Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

Application ID : MPH18100482 Mode of Admission : Non Sponsored

**Personal Details**

<b>Full Name</b>	UMATE MINAL GANESH			 S. Umate
<b>Nationality</b>	Indian	<b>Gender</b>	Female	
<b>Date of Birth</b>	01-07-1996	<b>Annual Family Income (₹)</b>	2,00,001 -2,50,000	
<b>Category-Caste</b>	OBC -Tell			
<b>Religious Minority/Linguistic Minority</b>	N.A			
<b>PWD Type</b>	N.A.			
<b>Type of Candidature</b>	Maharashtra State Candidate - Type A			



**Allotment Details**

<b>All India Merit Number</b>	2254
<b>Allotted Choice Code</b>	416081710
<b>Allotted Seat Type</b>	GOBC
<b>Preference No.</b>	1

**Reporting Details**


<b>Institute</b>	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
<b>Tution Fees (₹)</b>	20000/-	<b>Course</b>	416081710-Pharmaceutics
<b>Development Fees (₹)</b>	0/-	<b>Admission Date</b>	06-08-2018
<b>Other Fees (₹)</b>	0/-	<b>Admission Type</b>	CAP Round 1
<b>Total Fees (₹)</b>	20000/-		
<b>Remark</b>	OK		

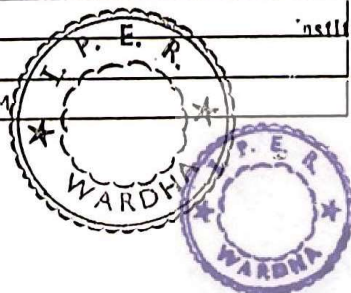
**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

<b>Date:</b> 06-08-2018	 <b>Signature of The Candidate</b> (UMATE MINAL GANESH) 
<b>Place :</b>	

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

<b>Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha</b>	<b>Signature of Institute Officer (4160)</b> 
<b>Reported On:</b> 06-08-2018 05:18:36 PM	<b>I/O. PRINCIPAL</b>
<b>Printed On :</b> 06-08-2018 05:18:49 PM	<b>Reported By:</b> 4160
<b>Last Modified On :</b> 06-08-2018 05:18:36 PM	<b>Printed By:</b> 4160
	<b>Last Modified By:</b> 4160



**(Dr. R. O. Ganjivale)**  
Principal  
**PRINCIPAL**  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha



State Common Entrance Test Cell, Maharashtra State, Mumbai  
5th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-Form-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full  
Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Registration ID : MPH18102227 Mode of Admission : Non Sponsored

**Personal Details**

Full Name	ZOTING MONIKA RAJENDRA		
Nationality	Indian	Gender	Female
Date of Birth	27-05-1996	Annual Family Income (₹)	4,50,001 - 5,00,000
Category-Caste	OBC -Kanabi		
Religious	N.A		
Majority/Linguistic Minority	N.A		
PWD Type	N.A		
Type of Candidature	Maharashtra State Candidate - Type A		

**Allotment Details**

All India Merit Number : 1540

**Reporting Details**

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	10000/-	Course	416012610-Quality Assurance Techniques
Development Fees (₹)	0/-	Admission Date	16-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	10000/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules presented by the college/institute/university/Government and the undertaking given above.

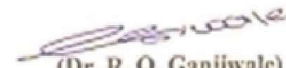
Date: 16-08-2018	 Signature of The Candidate (ZOTING MONIKA RAJENDRA)
Place :	




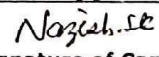

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. This candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	Signature of Institute Officer (4160)
Reported On: 16-08-2018 02:34:58 PM	 <b>DR. PRINCIPAL</b> Institute of Pharmaceutical Education & Research Borgaon (Meghe), Wardha
Printed On : 16-08-2018 02:35:08 PM	Reported By: 1160 Last Modified By: 1160
Last Modified On : 16-08-2018 02:34:58 PM	



  
 (Dr. R. O. Ganjivale)  
 Principal  
**PRINCIPAL**  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha

 सत्यमेव जयते					
<b>State Common Entrance Test Cell, Maharashtra State, Mumbai 8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai- 400001.(M.S.)</b>					
<b>Receipt-cum-Acknowledgement of Institute Level Admission as for Admission to First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate) ) for the year 2019 - 2020</b>					
<b>Application ID : MPH19205140</b>					
<b>Personal Details :</b>					
<b>Full Name</b>	SHEIKH NAZISH USMAN				
<b>Nationality</b>	Indian	<b>Date of Birth</b>	28-04-1995		
<b>Gender</b>	Female	<b>Annual Family Income (₹)</b>	50,001 - 1,00,000		
<b>Category-Caste</b>	OBC - Pinjarl				
<b>Applied For EWS</b>	No				
<b>PH Type</b>	N.A.				
<b>Type of Candidature</b>	Maharashtra State Candidate - Type A				
<b>English Medium</b>	No				
<b>Graduation Institute</b>					
<b>Graduation Course</b>					
<b>Seat Acceptance Fee is filled by online payment of Rs. 1000/-</b>					
<b>Paid Amount (₹ )</b>	₹ 1000/-	<b>Payment Status</b>	Successful	<b>Transaction Id</b>	ba12b3b5d40bf9b79f5c
<b>Institute Details :</b>					
<b>Institute Name</b>	4160 - Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha(Un-Aided - Non-Autonomous - Non-Minority)				
<b>Tuition Fees (₹)</b>	5000/-	<b>Course Name</b>	416082110-Pharmacology		
<b>Development Fees (₹)</b>	0/-	<b>Admission Date</b>	20-08-2019		
<b>Other Fees (₹)</b>	0/-	<b>Admission Type</b>	Against CAP		
<b>Total Fees (₹)</b>	5000/-	<b>Remark</b>	OK		
<b>Declaration by Candidate :</b> I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.					
<b>Date:</b>	20-08-2019		 <b>Signature of Candidate (SHEIKH NAZISH USMAN)</b>		
<b>Place :</b>					

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy /-Pharm. D. (Post Baccalaureate) ) for the year 2019-2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

<b>Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha</b>	<b>Signature of Institute Officer (4160) I/c. PRINCIPAL</b>
<b>Reported On:</b> 20-08-2019 01:50:48 PM	<b>Institute of Pharmaceutical Education &amp; Research Borgaon (Meghe), Wardha</b> Reported By: 4160 (Dr. R. O. Ganjivale) Principal 8/20/2019, 1:51 PM Institute of Pharmaceutical Education & Research Borgaon (Meghe), Wardha



Jayawant Shikshan Prasarak Mandal's  
**CHARAK COLLEGE OF PHARMACY  
AND RESEARCH**

Gat No. 720/1 & 2, Wagholi Tal Haveli Pune 412207  
Ph.No. 020-27021171 Web: [www.jspm.edu.in](http://www.jspm.edu.in)




**Urkude Radhika Pramod**

Dept. : Pharmacy  
Class : F.Y.M.Pharm  
Regd. Dt. : 08/09/2018


I-Card No : 4217



  
Librarian Sign.

  
Principal



  
(Dr. R. O. Ganjivale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borguon (Bicgho), Wardha



State Common Entrance Test Cell, Maharashtra State, Mumbai  
 5th Floor, New Excelsior Building, A.E. Nayak Marg, Fort, Mumbai-400001 (M.S.)  
 Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full  
 Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Mode of Admission : Non Sponsored

Application ID : MPH18101427

Personal Details

Full Name	GAWANDE RUCHIKA VIJAY		
Nationality	Indian	Gender	Female
Date of Birth	08-01-1996	Annual Family Income (₹)	15,001 - 50,000
Category-Caste	SC - Mahar		
Religious Minority/Linguistic Minority	N.A.		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		



Allotment Details

All India Merit Number	1976
Allotted Choice Code	416082110
Allotted Seat Type	GSC
Preference No.	1

Reporting Details

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	0/-	Course	416082110-Pharmacology
Development Fees (₹)	0/-	Admission Date	13-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	0/-		
Remark	OK		

**Declaration by Candidate** : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 13-08-2018

Place :

*Ruchika Gawande*  
 Signature of the Candidate  
 (GAWANDE RUCHIKA VIJAY)



INSTITUTE USE ONLY

**Declaration by the College/Institute** : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha

Reported On: 13-08-2018 04:18:20 PM

Printed On : 13-08-2018 04:18:20 PM

Last Modified On : 13-08-2018 04:18:20 PM



*R. O. Ganjivale*  
 Signature of Institute Officer (4160)

I/A. PRINCIPAL

Institute of Pharmaceutical Education & Research,  
 Borgaon (Meghe), Wardha

Printed By: 4160  
 Last Modified By: 4160





*R. O. Ganjivale*  
 (Dr. R. O. Ganjivale)

Principal

I/A. PRINCIPAL  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Level Admission as Additional Round for Admission to**  
**First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

Application ID : MFH18103458		Sponsorship Status : Non Sponsored		
<b>Personal Details :</b>				
Full Name	BANDGAR SONALI ASHOK		 	
Nationality	Indian	Date of B...		13-09-1995
Gender	Female	Annual Family Income (₹)		50,001 - 1,00,000
Category-Caste	NT 2 (NT-C) - Dhangar			
Applied For EBC	No			
PH Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type Maharashtra State Candidate - Type A			

<b>B-Pharmacy Details</b>			
B.Pharmacy Status	Passed	B. Pharmacy University	Rashtrasant Tukadoji Maharaj Nagpur University

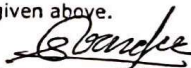
<b>Qualification Details:</b>			
Examination	Marks Obtained	Out of	Percentage
B.Pharmacy Final Year/Semester	2680	4400	60.91
12th/H.S.C. Aggregate	281	600	46.83
10th/S.S.C. Aggregate	389	500	77.8

<b>Institute Details :</b>			
Institute Name	4160 - Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha(Un-Aided - Non-Autonomous - Non-Minority)		
Tution Fees (₹)	25000/-	Course Name	416082110-Pharmacology
Development Fees (₹)	0/-	Admission Date	25-08-2018
Other Fees (₹)	0/-	Admission Type	Against CAP
Total Fees (₹)	25000/-	Remark	OK

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by the Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have the right to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:25-08-2018

Place :

  
**Signature of The Candidate**  
 (BANDGAR SONALI ASHOK)



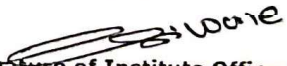
**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018-2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

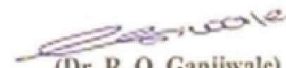
**Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha**

Reported On:25-08-2018 12:19:31 PM  
 Printed On : 25-08-2018 12:19:32 PM  
 Last Modified On :25-08-2018 12:19:31 PM



  
**Signature of Institute Officer (4160)**  
**I/c. PRINCIPAL**  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha  
 Printed By: 4160  
 Last Modified By:4160



  
 (Dr. R. O. Ganjivale)  
**Principal**  
**I/c. PRINCIPAL**  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full**  
**Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

Application ID : MPH18100370

Mode of Admission : Non Sponsored

**Personal Details**

<b>Full Name</b>	PATEKAR SWATI ASHOK		
<b>Nationality</b>	Indian	<b>Gender</b>	Female
<b>Date of Birth</b>	01-02-1996	<b>Annual Family Income (₹)</b>	50,001 - 1,00,000
<b>Category-Caste</b>	OBC -Kunabi		
<b>Religious Minority/Linguistic Minority</b>	N.A.		
<b>PWD Type</b>	N.A.		
<b>Type of Candidature</b>	Maharashtra State Candidate - Type A		



*Statekar*

**Allotment Details**

**All India Merit Number** 687

**Reporting Details**

<b>Institute</b>	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
<b>Tution Fees (₹)</b>	40000/-	<b>Course</b>	416012610-Quality Assurance Techniques
<b>Development Fees (₹)</b>	0/-	<b>Admission Date</b>	08-08-2018
<b>Other Fees (₹)</b>	0/-	<b>Admission Type</b>	CAP Round 1
<b>Total Fees (₹)</b>	40000/-		
<b>Remark</b>	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the Institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 08-08-2018

Place : Wardha

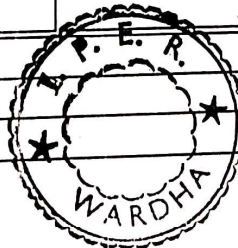
*Statekar*  
**Signature of The Candidate**  
 (PATEKAR SWATI ASHOK)



**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

<b>Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha</b>	<b>Signature of Institute Officer (4160)</b> M. PRINCIPAL
<b>Reported On: 08-08-2018 03:40:15 PM</b>	<b>Institute of Pharmaceutical Education &amp; Research, Borgaon (Meghe), Wardha</b>
<b>Printed On : 08-08-2018 03:40:23 PM</b>	<b>Reported By: 4160</b>
<b>Last Modified On : 08-08-2018 03:40:15 PM</b>	<b>Printed By: 4160</b>
	<b>Last Modified By: 4160</b>



*Statekar*  
 (Dr. R. O. Ganjivale)  
 Principal  
 PRINCIPAL  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha



State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of  
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D.  
(Post Baccalaureate) ) for the year 2019 - 2020

Application ID : MPH19202283

Mode of Admission : Non Sponsored

Personal Details

Full Name	DHURVE SWATI ULHASRAO	
Nationality	Indian	Gender
Date of Birth	26-03-1993	Female
Category-Caste	ST -Gond / Rajgond	Annual Family Income (₹)
Religious		2,00,001 -2,50,000
Minority/Linguistic Minority	N.A	
PWD Type	N.A.	
Type of Candidature	Maharashtra State Candidate - Type A	



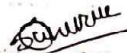
Allotment Details	
All India Merit Number	923
Allotted Choice Code	416082110
Allotted Seat Type	GOPEN
Preference No.	3

Reporting Details	
Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha
Tuition Fees (₹)	0/-
Development Fees (₹)	0/-
Other Fees (₹)	0/-
Total Fees (₹)	0/-
Remark	OK
Course	416082110-Pharmacology
Admission Date	23-07-2019
Admission Type	CAP Round

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 23-07-2019

Place :

  
Signature of The Candidate  
(DHURVE SWATI ULHASRAO)



INSTITUTE USE ONLY

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate) ) for the year 2019 - 2020 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.


Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha

Reported On: 23-07-2019 03:23:21 PM

Printed On : 23-07-2019 03:23:45 PM

Last Modified On : 23-07-2019 03:23:21 PM




  
Signature of Institute Officer (4160)  
I/c. PRINCIPAL

Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha By: 4160

Last Modified By: 4160

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(Dr. R. O. Ganjiwale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha



State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two  
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18102875 Mode of Admission : Non Sponsored

**Personal Details**

Full Name	SHETE TINA GAJANANRAO			 <i>T. Shete</i>
Nationality	Indian	Gender	Female	
Date of Birth	17-11-1995	Annual Family Income (₹)	2,50,001 - 3,00,000	
Category-Caste	OBC -Kunabi			
Religious Minority/Linguistic Minority	N.A			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			

**Allotment Details**

All India Merit Number	381
Allotted Choice Code	416012610
Allotted Seat Type	GOPEN
Preference No.	3

**Reporting Details**

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tution Fees (₹)	18000/-	Course	416012610-Quality Assurance Techniques
Development Fees (₹)	0/-	Admission Date	16-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	18000/-		
Remark	Valid NCL certificate submitted		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that as long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:16-08-2018

Place : *Wardha.*

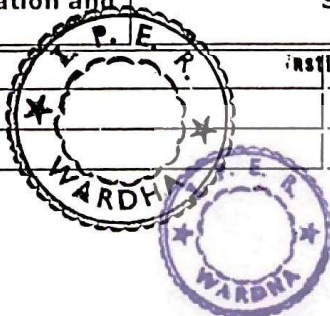
*T. Shete*  
Signature of The Candidate  
(SHETE TINA GAJANANRAO)



**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity.The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	Signature of Institute Officer (4160) <i>R. Ganjivale</i> I/c. PRINCIPAL
Reported On:16-08-2018 12:48:05 PM	Institute of Pharmaceutical Education & Research Borgaon (Meghe), Wardha
Printed On :16-08-2018 12:48:17 PM	Reported By:4160 Printed By:4160
Last Modified On :16-08-2018 12:48:05 PM	Last Modified By:4160



(Dr. R. O. Ganjivale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha






State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of  
Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D.  
(Post Baccalaureate) ) for the year 2019 - 2020

Mode of Admission : Non Sponsored

Application ID : MPH19200239

Personal Details

Full Name	KOWE UJWALA PRABHAKARRAO	Gender	Female	 <i>Kowe</i>
Nationality	Indian	Annual Family Income (₹)	1,00,001 - 1,50,000	
Date of Birth	13-03-1997			
Category-Caste	ST -Pardhan			
Religious				
Minority/Linguistic Minority	N.A			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			

Allotment Details

All India Merit Number	2236
Allotted Choice Code	416012610
Allotted Seat Type	GST
Preference No.	1

Reporting Details

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tution Fees (₹)	0/-	Course	416012610-Quality Assurance Techniques
Development Fees (₹)	0/-	Admission Date	22-07-2019
Other Fees (₹)	0/-	Admission Type	CAP Round
Total Fees (₹)	0/-		
Remark	OK		

Declaration by Candidate : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:22-07-2019

*Kowe*  
Signature of The Candidate  
(KOWE UJWALA PRABHAKARRAO)

Place :



INSTITUTE USE ONLY

Declaration by the College/Institute : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate) ) for the year 2019 - 2020 on verification of Candidate's Identity.The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha

Reported On:22-07-2019 03:20:47 PM

Printed On :22-07-2019 03:21:22 PM

Last Modified On :22-07-2019 03:20:47 PM

Signature of Institute Officer (4160)  
I/c. PRINCIPAL

Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha  
Reported By:4160  
Printed By:4160

Last Modified By:4160

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*Dr. R. O. Ganjivale*  
(Dr. R. O. Ganjivale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full**  
**Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

Application ID : MPH18100406 Mode of Admission : Non Sponsored

**Personal Details**

<b>Full Name</b>	MUDE YOGEEETA SANJAYRAO			 <i>Yogeeeta</i>
<b>Nationality</b>	Indian	<b>Gender</b>	Female	
<b>Date of Birth</b>	11-09-1996	<b>Annual Family Income (₹)</b>	50,001 - 1,00,000	
<b>Category-Caste</b>	OBC -Kunabi			
<b>Religious Minority/Linguistic Minority</b>	N.A			
<b>PWD Type</b>	N.A.			
<b>Type of Candidature</b>	Maharashtra State Candidate - Type A			

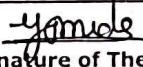
**Allotment Details**

<b>All India Merit Number</b>	1202
<b>Allotted Choice Code</b>	416012610
<b>Allotted Seat Type</b>	GOBC
<b>Preference No.</b>	1

**Reporting Details**

<b>Institute</b>	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
<b>Tuition Fees (₹)</b>	10000/-	<b>Course</b>	416012610-Quality Assurance Techniques
<b>Development Fees (₹)</b>	0/-	<b>Admission Date</b>	08-08-2018
<b>Other Fees (₹)</b>	0/-	<b>Admission Type</b>	CAP Round 1
<b>Total Fees (₹)</b>	10000/-		
<b>Remark</b>	OK		

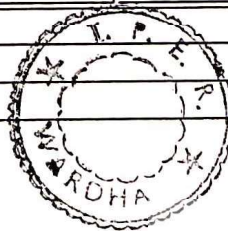
**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

<b>Date:</b> 08-08-2018	 <b>Signature of The Candidate</b> (MUDE YOGEEETA SANJAYRAO)
<b>Place :</b> <i>Yogeeeta</i>	

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

<b>Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha</b>	<b>Signature of Institute Officer (4160)</b> <b>I/c. PRINCIPAL</b>
<b>Reported On:</b> 08-08-2018 02:59:24 PM	<b>Institute of Pharmaceutical Education &amp; Research, Borgaon (Meghe), Wardha</b>
<b>Printed On :</b> 08-08-2018 03:06:48 PM	<b>Reported By:4160</b> <b>Printed By:4160</b>
<b>Last Modified On :</b> 08-08-2018 02:59:24 PM	<b>Last Modified By:4160</b>




*Dr. R. O. Ganjivale*  
(Dr. R. O. Ganjivale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha



State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two  
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18100192 Mode of Admission : Non Sponsored

**Personal Details**

Full Name	GAIKWAD ANIKET ANIL			 Aniket
Nationality	Indian	Gender	Male	
Date of Birth	18-07-1996	Annual Family Income (₹)	50,001 - 1,00,000	
Category-Caste	SC -Mahar			
Religious Minority/Linguistic Minority	N.A			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			

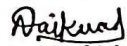
**Allotment Details**

All India Merit Number	843
Allotted Choice Code	416081710
Allotted Seat Type	GSC
Preference No.	5

**Reporting Details**

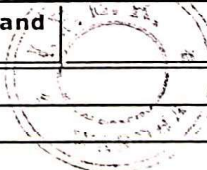
Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tution Fees (₹)	0/-	Course	416081710-Pharmaceutics
Development Fees (₹)	0/-	Admission Date	07-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 2
Total Fees (₹)	0/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

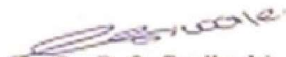
Date:07-08-2018	 <b>Signature of The Candidate</b> (GAIKWAD ANIKET ANIL)
Place :	

**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity.The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		Signature of Institute Officer (4160) Institute of Pharmaceutical Education & Research Borgaon (Meghe), Wardha
Reported On:07-08-2018 05:49:33 PM		Reported By:4160
Printed On :07-08-2018 05:49:43 PM		Printed By:4160
Last Modified On :07-08-2018 05:49:33 PM		Last Modified By:4160



  
(Dr. R. O. Ganjivale)  
Principal  
PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha



State Common Entrance Test Cell, Maharashtra State, Mumbai  
8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)  
Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two  
Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019

Application ID : MPH18102483

Mode of Admission : Non Sponsored

**Personal Details**

Full Name	SABALE ASHISH AMBADAS		
Nationality	Indian	Gender	Male
Date of Birth	20-02-1994	Annual Family Income (₹)	50,001 - 1,00,000
Category-Caste	SC -Mahar		
Religious Minority/Linguistic Minority	N.A		
PWD Type	N.A.		
Type of Candidature	Maharashtra State Candidate - Type A		



**Allotment Details**

All India Merit Number	158
Allotted Choice Code	416012610
Allotted Seat Type	GOPEN
Preference No.	1

**Reporting Details**

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tution Fees (₹)	0/-	Course	416012610-Quality Assurance Techniques
Development Fees (₹)	0/-	Admission Date	18-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	0/-		
Remark	B. Pharm final year marksheet not available and hence not verified.		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:18-08-2018

Place :

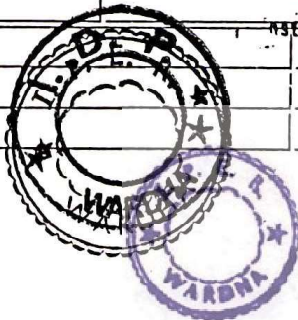
Signature of The Candidate  
(SABALE ASHISH AMBADAS)



**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019 on verification of Candidate's Identity.The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	Signature of Institute Officer (4160) H. PRINCIPAL
Reported On:18-08-2018 01:46:28 PM	Institute of Pharmaceutical Education & Research, Borgaon (Meghe), Wardha
Printed On :18-08-2018 01:46:40 PM	Reported By:4160
Last Modified On :18-08-2018 01:46:28 PM	Printed By:4160
	Last Modified By:4160



(Dr. R. O. Ganjivale)  
Principal  
H. PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Borgaon (Meghe), Wardha

NO.: 20- 0208925

# SAVITRIBAI PHULE PUNE UNIVERSITY

(formerly University of Pune)

GANESHKHIND PUNE 411 007



## Passing Certificate

This is to certify that -

Shri MRINAL BODHRAJ ITANKAR

Mother's Name: -VARSHA

has appeared for the

MASTER OF PHARMACY (Rev. 2018)

examination held in month of April 2020 and declared to have passed

the examination with 'A' grade.

This is further to certify that his special subject at the said examination is PHARMACEUTICS. He is eligible for

the aforesaid Degree Certificate, whenever he applies for the same at the University Convocation.

Seat No. : 11448

P.R.No. : 2411800058

College code: 0325

DATE: 20 NOVEMBER 2020

Mahesh Kukade  
Director  
(Dr. R. O. Ganjivane)  
Board of Examinations & Evaluation




PRINCIPAL  
Institute of Pharmaceutical Education & Research  
Bhosur (Bhamburda), Warananagar



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K.Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of Two Year Full**  
**Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018 - 2019**

Application ID : MPH18102551 Mode of Admission : Non Sponsored

**Personal Details**

Full Name	GUJAR NIKHIL JAGDISH			
Nationality	Indian	Gender	Male	
Date of Birth	07-10-1995	Annual Family Income (₹)	4,00,000 - 4,50,000	
Category-Caste	DT/VJ NT(A) -Bhamati			
Religious Minority/Linguistic Minority	N.A.			
PWD Type	N.A.			
Type of Candidature	Maharashtra State Candidate - Type A			

**Allotment Details**

All India Merit Number	627
Allotted Choice Code	416082110
Allotted Seat Type	GOPEN
Preference No.	1

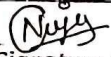
**Reporting Details**

Institute	Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha		
Tuition Fees (₹)	8000/-	Course	416082110-Pharmacology
Development Fees (₹)	0/-	Admission Date	07-08-2018
Other Fees (₹)	0/-	Admission Type	CAP Round 1
Total Fees (₹)	8000/-		
Remark	OK		

**Declaration by Candidate :** I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute, I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date: 07-08-2018

Place : WARDHA

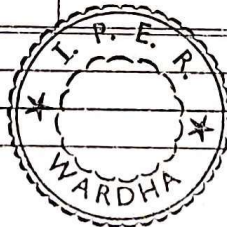
  
**Signature of the Candidate**  
 (GUJAR NIKHIL JAGDISH)




**INSTITUTE USE ONLY**

**Declaration by the College/Institute :** We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharm.) for the year 2018'- 2019 on verification of Candidate's Identity. The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	Signature of Institute Officer (4160) <b>I/c. PRINCIPAL</b>
Reported On: 07-08-2018 03:55:01 PM	Institute of Pharmaceutical Education & Research Borgaon (Meghe), Wardha
Printed On : 07-08-2018 03:55:15 PM	Reported By: 4160 Printed By: 4160
Last Modified On : 07-08-2018 03:55:01 PM	Last Modified By: 4160



  
 (Dr. R. O. Ganjivale)  
**Principal**  
**I/c. PRINCIPAL**  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha



**State Common Entrance Test Cell, Maharashtra State, Mumbai**  
**8th Floor, New Excelsior Building, A.K. Nayak Marg, Fort, Mumbai-400001.(M.S.)**  
**Receipt-cum-Acknowledgement of Institute Reporting for Admission to First Year Of**  
**Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D.**  
**(Post Baccalaureate) ) for the year 2019 - 2020**

Application ID : MPH19201461

Mode of Admission : Non Sponsored

**Personal Details**

Full Name SAURABH  
 Nationality Indian  
 Date of Birth 05-08-1995  
 Category-Caste OBC -Teli  
 Religious  
 Minority/Linguistic N.A  
 Minority  
 PWD Type N.A.

Gender Male  
 Annual Family Income (₹) 2,00,001 -2,50,000



Type of Candidature Maharashtra State Candidate - Type A

**Allotment Details**

**All India Merit Number 538**

**Reporting Details**

Institute Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha	
Tuition Fees (₹) 5118/-	Course 416082110-Pharmacology
Development Fees (₹) 0/-	Admission Date 02-08-2019
Other Fees (₹) 0/-	Admission Type CAP Round
Total Fees (₹) 5118/-	
Remark OK	

**Declaration by Candidate** : I hereby agree to conform to rules, acts and laws enforced by Government. I hereby undertake that so long as I am student of College/ Institute. I will not behave in a manner which may result in compelling the authorities to take disciplinary action against me. I fully understand that the Principal/Director of the institute/college will have rights to expel, rusticate me from the institute, for any infringement of the rules prescribed by the college/institute/university/Government and the undertaking given above.

Date:02-08-2019

*S. Satone*  
 Signature of The Candidate  
 (SAURABH)

Place :



**INSTITUTE USE ONLY**

**Declaration by the College/Institute** : We hereby declare that, we are admitting this Candidate to our College / Institute for First Year Of Two Year Full Time Post-Graduate Course In Pharmacy (M. Pharmacy / Pharm. D. (Post Baccalaureate) ) for the year 2019 - 2020 on verification of Candidate's Identity.The candidate has paid the Fees mentioned in this receipt. We also declare that the admission of Candidate is confirmed in presence of the Candidate.

Seal of Institute of Pharmaceutical Education and Research, Borgaon (Meghe), Wardha



*R. O. Ganjivale*  
 Signature of Institute Officer (4160)  
 I/c. PRINCIPAL

Reported On:02-08-2019 01:43:38 PM

Printed On :02-08-2019 01:44:02 PM

Last Modified On :02-08-2019 01:43:38 PM

Institute of Pharmaceutical Education & Research 4160  
 Borgaon (Meghe), Wardha

Printed By:4160  
 Last Modified By:4160

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*R. O. Ganjivale*  
 (Dr. R. O. Ganjivale)  
 Principal  
 PRINCIPAL  
 Institute of Pharmaceutical Education & Research  
 Borgaon (Meghe), Wardha

600137



राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान  
हेक्टरबाद, तेलंगाणा, भारत

विद्यया परिशीलक समिति की अनुशंसा पर चांद्रपुर हेक्टरबाद की स्तरगत मंजूर प्राप्ति

विज्ञान स्नातकोत्तर (फार्म.)

की उपाधि

औषधीय प्रशासन विज्ञान में

माझे तैयार शंकरराव

को जिन्होंने इस उपाधि की अर्जा हैतु विविध विहित अपेक्षाओं को सन् 2020 में सफलतापूर्वक पूरा कर लिया है, पुरतः तारी प्रदान किया है।

इस उपाधि के लिए 10 अंकीय मापक में प्रत्येक श्रेणी में निम्न सीमा 9.00 है।

भारतीय गणराज्य के अंतर्गत हैक्टरबाद में आज दिनांक 24 जुलाई 2020 को संस्थान की मुद्रा बंधित यह उपाधि दी गई।

**National Institute of Pharmaceutical Education and Research**

Hyderabad, Telangana, India

Upon the recommendation of the Academic Monitoring Committee, the Board of Governors of NIPER Hyderabad hereby confers the degree of

**Master of Science (Pharm.)**

*in Medicinal Chemistry*

on

**Marde Vallbhav Shukarrao**

Who has successfully completed in the year 2020 the requirements prescribed under the regulations for the award of this degree with a Cumulative Grade Point Average of 9.00 on a 10 point scale.

Given this day the 24<sup>th</sup> of July 2020 under the seal of the Institute at Hyderabad in the Republic of India.

कलेक्टर  
Registrar

संयोजक  
Dean

निदेशक  
Director

अध्यक्ष, शासन बोर्ड  
Chairman, Board of Governors



(Dr. R. O. Ganjivale)

Principal

PRINCIPAL

Institute of Pharmaceutical Education & Research  
Borgaon (Moghe), Wardha