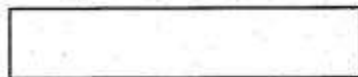




We,  
the Chancellor, Vice-Chancellor  
and Members of the Management Council of  
**Dr. Babasaheb Ambedkar Marathwada University,**  
Aurangabad (Maharashtra State), India

Certify that the withinsigned



*Amit Kumar*

Student of *Govt. College of Pharmacy, Aurangabad*  
having been examined and found duly qualified for the  
Degree of Master of Pharmacy and placed in the *First*  
Division in *May/June 2010*. The Degree of

# Master of Pharmacy

has been conferred on *him* at Aurangabad, on the  
*twenty third* day of the month of *September* in the year  
*two thousand eleven*.

In Testimony whereof are set the Seal of the said University  
and the signature of the said Vice-Chancellor.

Seat No. *mcx31001*

Place: Aurangabad

Date of issue of the

Degree Certificate *5 JAN 2012*

*B. Achopade*

Vice-Chancellor