



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

*23/05/2012*

..... *Masim Ahmad Mustaf Hussain* .....

Student of *H. B. Charan College of Pharmacy, A. U.*  
having been examined and found duly qualified for the  
Degree of Master of Pharmacy and placed in the First  
Division with distinction in *May/June 2012*  
The Degree of

Master of Pharmacy

(*Quality Assurance*)

has been conferred on *him* at Aurangabad, on the  
*tenth* day of the month of *March* in the year  
*two thousand thirteen*  
In Testimony whereof are set the Seal of the said University  
and the signature of the said Vice-Chancellor.

• Seat No. *MGX 33610*  
Place: Aurangabad  
Date of issue of the  
Degree Certificate *23/05/2012*

*M. P. ...*  
Vice-Chancellor