## SHREE EDUCATIONAL & WELFARE TRUST

H.O.: House No. 81, Amroha Green, Distt. Amroha (U.P.) Tel.: 05922252110

E-mail: shreetrustamroha@gmail.com

ROL NO. SGWT 24

Dated 9/08/22

To,

Mr.Devdutt Vill-Maheshra Gajraula, Distt.Amroha -244235

Subject:-Appointment /Offer Letter for the Post of Assistant Professor / Lecturer in AIMS Pharmacy College Gajraula Amroha (U.P.)

Dear Sir,

With reference to your Bio-Particulars and application, we are pleased to inform you that on the basis of testimonials, we are pleased to appointment you as Post of Assistant Professor / Lecturer in AIMS Pharmacy College Gajraula Amroha (U.P.) on regular basis. The appointment is subject to the conditions given below:-

1. Your will be entitled for the salary with the basic of Rs. 15600-39100 with AGP or Rs. 8000

2. TDS, any other statutory tax, if applicable will be deducted at source. You are advised to keep the account officer informed of your savings and Investments for the purpose of calculation of TDS.

3. The appointee may be permitted to resign with one month prior notice or by paying one month's

4. The appointee shall be full time employee of this institute and such shall not engage his / her in any private tuition nor shall involve in any private business, trade or profession. You will have to work exclusively for our college and you will not take up any assignment even on part-time basis. You will be diligently and faithfully work for our college/hospital.

5. You will be allowed weekly off and other holidays, as may be prescribed by the institute.

6. You will be abiding by the rules/order/regulations of the institute/State government.

7. You will be maintaining college timings and other rules, which are in force, as on today & which will be applicable from time to time in future.

8. Increment / salary revision or any addition will be made at the time of annual review at the discretion of management on the basis of performance of the duty.

9. The management reserves the right to terminate your services in the event of indiscipline or working against the interest of institution. 10. Relieving certificate from the institution where candidate has been working or proof of

superannuation, whichever is applicable.

If the above-mentioned terms & conditions are acceptable to you. Then send acceptance letter to us

Secretary

Secretary Shree Educational & Welfare Trust Amroha, (U.P)

## Annexure-C

		- 1-2-VOV//	give my consent to Join as teaching faculty	
		(Name of faculty member	4	
		In Aims PHARM A	CY CONEGE, VLL BHAGWAN PUR, KHODER, I	AM Pati
		In case, the sold institution get	s approval from the PCt.	05
23		2. My qualifications are as under		
	*	D.Pharm		
	-	<ul> <li>M.Pharm (indicate specialization)</li> </ul>		
		• Ph.D		
14)		3. HARIENDRA SIN	(g) tribitily that the above consent letter is genuine and true	
	**	and I understand that provide	ng false information by Principal may result in -	
		a) action against me under	regulation (ix) and (x) of "Minimum Qualification for Teachers	
	in Pharmacy Institutions Regulations, 2014"			
		b) rejection of the applica	ation of institution for approval and PCI in no way will be	
		responsible.		
	*	All	Virtal To duty bound to inform the PCI my having relieved	
		from the provious institution	n upon joining the present institution.	
		Signature of faculty :	Qu Vdustot_	
e-7		Signature of Principal ;		
		Date : i	9/08/2022	
		30)		
	¥	9	For Shri Educational & Welfare Trust	
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