

1. I, Jatin Jaiswal give my consent to join as ^{Principal}~~teaching faculty~~ in Mandawar College of Pharmacy

in case, the said institution gets approval from the PCI.

2. My qualifications are as under:

- B.Pharm
- M.Pharm
(Indicate Specialization)
- Ph.D

3. I certify that the above consent letter is genuine and true and I understand that providing 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 application of Institution for approval and PCI in no way will be responsible.

4. I Jatin Jaiswal shall be duly bound to inform the PCI my having relieved from the previous institution upon joining the present institution.

Signature of faculty : 

Signature of Chairman : 

Date : 10/04/2023