

Annexure-C

1. Susmita Ghoshal give my consent to join as teaching faculty
(Name of faculty member)

in Baranathi Mahavidyalaya Pharmacy, Ambala Road, Sahyadri, Ghaziabad
(Name of institution with full address)

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

2. My qualifications are as under -

• B.Pharm

• M.Pharm
(Indicate specialisation)

• Ph.D

3. Rakesh Mathia certify that the above consent letter is genuine and true
(Name of Principal)

and I understand that providing false information by Principal may result in -

- action against me under regulation (a) and (x) of "Minimum Qualification for Teachers in Pharmacy Institutions Regulations, 2014"
- rejection of the application of institution for approval and PCI in no way will be responsible.

4. Rakesh Mathia be duty bound to inform the PCI my having relieved
(Name of Principal)

from the previous institution upon joining the present institution.

Signature of faculty

Susmita Ghoshal

Signature of Principal

Date

28.05.2023

Rakesh Mathia

Principal
Baranathi Mahavidyalaya
Pharmacy