

Annexure-C

1. Lata Mohanlal Kulkarni  
(Name of faculty member)  
Arachna College of Pharmacy, Punebhani, Borant  
(Name of Institution)  
Prayagraj

2. He is qualified in the order -

- a. B.Pharm
- b. M.Pharm
- c. Ph.D

3. Pradi Kumar Jha  
(Name of Principal)  
I hereby certify that the above named faculty member is qualified and is working in the institution mentioned by the faculty member.

4. According to the latest regulations of Council of Technical Education, Bihar, in the year 1987, the institution is approved by the Council.

5. In relation to the application of regulations for approval and the same will be responsible.

6. Pradi Kumar Jha  
(Name of Principal)  
I hereby certify that the above named faculty member is qualified and is working in the institution mentioned by the faculty member.

Signature of Faculty: [Signature]

Signature of Principal: [Signature]

Date: 27/12/22

[Signature]  
Director  
Arachna College of Pharmacy  
Punebhani, Borant, Prayagraj, U.P.

[Signature]  
Principal  
Arachna College of Pharmacy  
Punebhani, Borant, Prayagraj, U.P.