

1. I Sugam Kaurav give my consent to join as teaching faculty in Shri Gauri Shankar College, Kutukpur Chanora, Firozabad (U.P.) in case, the said institution gets approval from the PCI.

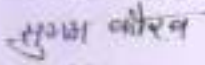
2. My qualifications are as under.

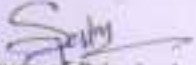
- B. Pharm

3. I Shubham Jain, Principal 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) 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 Sugam Kaurav shall be duty bound to inform the PCI my having relieved from the previous institution upon joining the present institution.


Signature of faculty :


Signature of Principal :

Date 13-9-2022