

To,  
The Manager/Director,  
Maha Kailash Institute, Faculty College of Pharmacy,  
Village: Padmapada, District: Anantnag, Jammu & Kashmir.

**LETTER OF CONSENT**

Sir,  
In reference to your appointment letter No. 1022/2018, I hereby give my  
consent to join your institution Maha Kailash Institute Faculty College of Pharmacy  
after getting approval from PCI for the post DM/Phd.

Thanks & Regards,  
Date: 25/02/2019 Your Sincerely

Signature: [Signature]  
Name: Rajendra Kumar Mishra

[Signature]  
Manager  
Maha Kailash Institute  
Village: Padmapada, Anantnag