

UTTAR PRADESH PHARMACY COUNCIL

Flat No. 204, Arif Ashiyana Complex
Chowk, Lucknow U.P. (INDIA)



Registration No. 41743

Date of Registration

This is to certify that within sign of [Arif Ali]



has been duly registered u/s 32(2) of the Pharmacy Act as a
Registered Pharmacist

and is entitled to all the privileges granted under the
Pharmacy Act 1948 (XIX of 1948). In witness whereof an
herein affixed the seal of the Uttar Pradesh Pharmacy
Council and the signature of the registrar of the said
Pharmacy Council.

D.O.B. _____

Qualification _____

Arif Ali
Registrar

Note: This Certificate is the property of the Uttar Pradesh Pharmacy Council. Copies are to be sent to the concerned
Government authorities with the State of Uttar Pradesh Pharmacy Council files.

NOTICE

1. Every Registered Pharmacist should send to the Registrar, Lucknow within 15 days of the change in the
registered address and other essential particulars the necessary forms for update with the Registrar to be sent to the
Registrar, Lucknow.
2. All persons who are registered are legally qualified for the practice of Pharmacy.
3. Every Registered Pharmacist should observe the regulations prescribed for the practice of Pharmacy, as laid down
according to the provisions of section 32 of the Pharmacy Act, 1948.



माध्यमिक शिक्षा परिषद, उत्तर प्रदेश

कक्षा 10 वीं के अंकों का प्रमाणपत्र (Certificate) वर्ष 2018

एन सी ई आर नं. 1112/0000/2018/18

सीट नं. - Mark Sheet

3543658

विद्यार्थी का नाम (Candidate Name)

1112/18

22/07/18 1160111

विद्यार्थी का पता (Candidate Address)

विद्यार्थी का स्कूल का नाम (Candidate School Name)

पारदर्शी छात्र परिषद (Parent's Name)

कुल/2018 EXAM REGULAR

विषय (Subject)	अंकों में (Marks)	कुल अंकों में (Out of)	प्रतिशत (Percentage)	वर्ग (Grade)	टिप्पणी (Remarks)	
HINDI	100	1/24	2/21	040	12 PASSED	
ENGLISH	100	1/21	2/28	059	C1	
MATHEMATICS	100	1/08	2/14	021	E1 MATHS	
SOCIAL SCIENCE	100	1/24	2/24	N/A	040	C2
SCIENCE	100	1/07	2/14	021	D CAT MERE-2	
DRAWING	100	1/20		050	C2	
GRACE/CLOSE-08.						

विद्यार्थी का हस्ताक्षर (Candidate Signature)

[Signature]

विद्यार्थी का स्कूल का नाम (Candidate School Name)

[Signature]
PRINCIPAL

मुख्य निर्देशक (Chief Inspector)



IITM UNIVERSITY

Moradabad (U.P.) INDIA
Telephone No. Moradabad: 1
110024, 110025, 110026, 110027, 110028

110029, 110030, 110031, 110032

Dr. No. : 110000
Ead. No. : 110000
Enrollment No. : 110000

Name of Candidate: **IAIR AII**
Father's Name : **MR. HARSH KISHOR**

STUDENT ID NO: **110000**

1 YEAR

Budget Code will be

Maximum Marks: 100
Pass Marks: 33

THEORY

1. Explain the following:
a) The role of the state in the development of the economy.
b) The role of the state in the development of the environment.
c) The role of the state in the development of the social services.
d) The role of the state in the development of the infrastructure.

ANSWERS:

1. Explain the following:
a) The role of the state in the development of the economy.
b) The role of the state in the development of the environment.
c) The role of the state in the development of the social services.
d) The role of the state in the development of the infrastructure.



01	01	100	33	01	01
02	02	100	33	02	02
03	03	100	33	03	03
04	04	100	33	04	04
05	05	100	33	05	05
06	06	100	33	06	06
07	07	100	33	07	07
08	08	100	33	08	08
09	09	100	33	09	09
10	10	100	33	10	10

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110000

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City Code of IITM

Group Marks of Part

Group (General - Maximum Marks)

Group Marks

Roll No.

Registration No.

Year

Session

Group

Exam

Year

Group

Year

Session

Group

Exam

Signature

Date

Signature of Examiner





भारत सरकार
GOVERNMENT OF INDIA



उत्तर प्रदेश

AAK 81

आर डीए : 008 2507 1880

UP AAKS



2971 7141 7334

मेरा आधार, मेरी पहचान



आरक्षण विभाग
IDENTIFICATION AUTHORITY OF INDIA

पता
S/O अशोक कुमार शर्मा,
पंजाब,
फ़ोन - 244102

Address:
S/O Ashok Kumar Sharma,
Punjab, Mohalad, Jhansi,
Phon - 244102



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