HMS College of Pharmacy

ValNama Bhagat Singh Sclarts
1(a) Name <u>Ehagat Singh Solauti</u> . 1(b) Date of Birth & Age 24 101/1992 (31 3r)
1(c) Recent Passport size photo of the Employee
Signed by Dean / Principal of the college.
1(d) Submit Photo ID proof issued by Govt. Authorities:
Photo ID submitted: Passport copy / Driving License /PAN Card / Voter ID/MCI Smart ID Card / State Pharmac Council ID. Number EQXPS 9498 Qissued by Election Com of Fudia Photograph
Without Photo ID, Declaration form will be rejected and will not be considered as teaching faculty.
1(e) Whether of belongs to: SC/ST/OBC/ Ex-service /Others.
1(f) Residential Address of Employee:
UTTage - Chachoi Roofwas Pachpays

thurga - Bouland shehr

1(g) Copy of Passport /Voter Card/Ration Card/Electricity Bill/ Driving License Attached as a proof of residence.

1(h) Phone & Fax Number with Code:

Office: E-mail address: Chagatsingh salanki2600 quail Com Mobile Number: <u>9536262592</u> Residence:

Sen. Leeturer. in HMS College of

I, hereby provide my consent to join as a _____ Pharmacy Village Roopwas Pachgayi Bulandshahr, in case the Institution is granted Affiliation for the session 2022-23

Pushanhy Signature of

Head of Institution