

Annexure-C

1. I, Mr. Neeraj Kumar give my consent to join as teaching faculty
(Name of faculty member)

In Kopal Institute of Pharmacy, Navabganj, Bardiya
(Name of institutions with full address)

In case, the said institution gets approval from the PCI

2. My qualifications are as under

• B.Pharm

• M.Pharm

(Indicate Specialization) M.Pharm Pharmacetics

• Ph.D

3. I, Mr. Sanjeev Kumar certify that the above consent letter is genuine and true
(Name of Principal)

and I understand that providing false information by Principal may result in-

- a) Action against me under regulation (ix) and (x) 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, Mr. Sanjeev Kumar shall be duty bound to inform the PCI my having relieved
(Name of Principal)

from the previous institution upon joining the present institution.

Signature of faculty : Neeraj Kumar

Signature of Principal : [Signature]

Date : 16/02/2023



KRITIKA PHARMACY COLLEGE

Khalkheda Near Kandu Ka Pul, Pilibhit Road, Rithora, Nawabganj, Bareilly (U.P.) 243122

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Ref. KPC/2023/NOC/14

Date 14/02/2023

NO OBJECTION CERTIFICATE

To whom it may concern

This is certify that Mr. Neeraj Kumar S/O Mr. Mohan Swaroop is working as a Lecturer in Kritika Pharmacy College, Bareilly from 23/01/2023. He has experience in Teaching and guiding the pharmacy students during Lab Practical.

He is sincere and dedicated to his duties. During the services his performance and behaviour was found good. The institute has no objection, if he join anywhere.

We wish to him, every success in future.

