



# SIJARIYA EDUCATIONAL SOCIETY

Head office - 70, B.N. Pawan Pochin, Post Silandur- Datta Road, Agre (T) 5210000

www.sijariya.org.in (E-mail: [sijariya@rediffmail.com](mailto:sijariya@rediffmail.com))

Contact: 981706411, 945889552

Ref No: SCS/APP/1/2011-13/57A

Date: 22/01/2012

MEMORANDUM

To,  
Dr. Shrinidhi Prabhu  
Shrinidhi Nagar Club  
Shrinidhi Agre

Subject: Appointment as Principal in the Department Pharmacy "A" & Institute of Pharmacy in the Institute.

With reference to your application dated 28/10/2011 has been directed to review that after your interview for the post of Principal in the Department C. & Institute of Pharmacy has been considered and you are being appointed on the vacant post in the Institute on one year provisional period with effect from date you joined here. Your gross salary is Rs 10000/- (Ten thousand) This are directed here that all condition should be follow.

1. You will not leave the Institute in the middle of the term.
2. You will serve one month notice in advance if you leave the Institute. Similarly, the Trust management will have the right to terminate your services by giving one month's notice.
3. You will never engage in any Institute activity at any period.
4. You will subjected to such rules, regulations and policies as may be decided by the Trust management from time to time.
5. The terms of appointment is further subject to the finding.

- A. That your appointment is approved by a duly constituted selection committee as per the norms of AICTE Or APJ Kalam University Lucknow B.T.E or Other Govt body.
- B. That you are found medically fit by the Trust's Doctor.
- C. That character reference is in order.
- D. That you will be governed by code of ethics and disciplinary rules of the Trust management.

Subject to fulfilling of above mentioned conditions, you are requested to join the Institute within 15 days from the date of this order after date this order will be received.

  
Principal  
SIJARIYA EDUCATIONAL SOCIETY  
AGRE, A.P.

  
Trustee  
SIJARIYA EDUCATIONAL SOCIETY  
AGRE, A.P.



# SS College of Pharmacy

Approved by All India Council for Technical Education, and Pharmacy Council of India, New Delhi  
Recognized by Govt. of Uttar Pradesh

No. SSC/Col/Ad/2022-23/603

Date 20/11/2022

## TO WHOEM SOEVER IT MAY CONCERN

This is certified that Dr. Dhimtra Prakash D/O Shri H.O.P. Nigam worked as Director in this Institute from 20-08-2019 to 30-11-2022 with our entire satisfaction. He is sincere, honest & hardworking, dedicated employ with a professional attitude and very good job knowledge. He is amiable in nature and character as well.

His gross pay at the time of referring this Institute is Rs 48000.00 (Forty Eight thousand only)

We wish him for

  
Director  
SS College of Pharmacy  
Aurangabad, Uttar Pradesh  
202001

  
Director  
SS College of Pharmacy  
Aurangabad

Principal  
S.S.C. College of Pharmacy  
Aurangabad, Uttar Pradesh

Ref.No. DC/P/Exp.Ord/2019/158

Date: 15/03/2019

**TO WHOM IT MAY CONCERN**

*This is to certify that Mr. Dharendra Prakash also Sir H.O.P.Nigam worked as Director in this Institute from 1 August-2017 to 10-March-2019 with our entire satisfaction. He is sincere, honest, hard working, dedicated employee with a professional attitude and very good job knowledge. He is amiable in nature and character is well.*

His Gross Pay at the time of reliving this Institute is Rs 50000.00-Viable+Convince only

We wish him.

Sincerely,  
  
Chandan  
Divya College of Pharmacy  
Mathura

  
Rajendra Kumar  
Mathura, 2019



Ref No: DCE/HR/2019/20066

Date: 15/02/2019

**TO WHOM IT MAY CONCERN**

This is to certify that *Dr. Dhivendra Prakash S/o Shri H.O. P. Jigam* worked as Director in this institute from **1 August 2017** with our entire satisfaction. During his working period we found him a sincere, honest, hard working, dedicated employee with a professional attitude and very good job knowledge. He is amiable in nature and character as well. We have no objection to allow him in any better position & have no liability in this institute.

We wish to inform that your resignation has been accepted & you are being relieved from your duties as Director post which are months notice effect from **25 Feb 2019**.

We would also want to confirm that your full & final settlement would be cleared in the next 30 days with the organization. We appreciate your contribution made to the organization & wish you all the best for your future endeavors.

His Gross Pay at the time of leaving this institute is Rs.50000.00 only.

We wish him very success in his life.

  
Director

Divya College of Education  
Mathura

  
Director  
Divya College of Education  
Mathura



# Agra Public Group of Institutions

MS-2, Industrial Park, Ashok Road, Agra - 202002 (U.P.)

Ref. No. AC/11/10/2017/10/10/10


Date 10/10/2017

## TO WHOM IT MAY CONCERN

This is to certify that Mr. Chandra Prakash son of H.O.P. Nigam worked as Asst. Professor/ Associate Professor and Director in this institute from 16 May 2006 to 13 July 2017 with our entire satisfaction. He is sincere, honest, hard working, dedicated employee with a professional attitude and very good job knowledge. He is amiable in nature and character is well.

His Gross Pay at the time of retiring this institute is Ru. 18000.00 only

We wish him.

Sincerely,  
  
Chairman  
Agra Public pharmacy college  
Agra

  
Mr. Chandra Prakash

• B. Tech • B. Pharm • M. Pharm • M.B.A. • B.E.D.

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E-mail : agrapublic@gmail.com Website : www.agrapublic.com

APPD. BY AICTE / P.C.I. & AFE, 30 U.P.T.U. LUCKNOW

0088733 0200304  
**BUNDELKHAND UNIVERSITY, JHANSI**



TOTAL ENROLLMENT SHEET

Serial of the Roll No. : **2488888888** Date : **10/10/2018**  
 Full Name : **SHYAM**  
 Category / Reservation : **SC**  
 Examination : **WINTER SEMESTER, DEGREE IN B.A. POLITICAL SCIENCE**

ROLL NO.	MARKS	GRADE	STATUS
2488888888	40	C	Pass
2488888888	40	C	Pass
2488888888	40	C	Pass
2488888888	40	C	Pass
2488888888	40	C	Pass
<b>TOTAL</b>	<b>200</b>	<b>100</b>	<b>100</b>
<b>GRAND TOTAL</b>	<b>200</b>	<b>100</b>	<b>100</b>

ROLL - 2488888888

Signature of the Candidate: \_\_\_\_\_  
 Signature of the Controller: \_\_\_\_\_  
 Date: \_\_\_\_\_