



एक कदम स्वास्थ्य की ओर

राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान

HYDERABAD

National Institute of Pharmaceutical Education & Research, Hyderabad
Department of Pharmaceuticals
Ministry of Chemicals & Fertilizers, Govt. of India
STUDENT IDENTITY CARD

Name : ADITI AWASTHI
Registration No : PM/2021/402
Course : M.B.A. [PHARM]
Date of Birth : 28 JANUARY 1998
Valid : 2021-2023

Registrar





HYDERABAD

एक कदम स्वच्छता की ओर राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान
National Institute of Pharmaceutical Education & Research, Hyderabad
Department of Pharmaceuticals
Ministry of Chemicals & Fertilizers, Govt. of India
STUDENT IDENTITY CARD

Name : AASTHA SINGH
Registration No : PE/2021/301
Course : M.S.(Pharm.) Pharmaceutics
Date of Birth : 15 November 1997
Valid : 2021-2023

Registrar





C.S.J.M. UNIVERSITY, KANPUR

Identity Card

Name : Deeksha Sonkar
Desig./Course : M.Pharm - 2K21
Department : Pharmacy
Contact No. : 7905088486
Validity : 6/30/2023
Address : D/o Ajay Sonkar, SH-
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Proctor



DAYANAND DINANATH COLLEGE INSTITUTE OF PHARMACY

Approved by AICTE, PCI, Ministry of HRD
Affiliated to UPBTE, Lucknow
Hamirpur Road, Ramaipur, Kanpur Nagar
Phone No.: 7524900444, www.ddckanpur.edu.in

STUDENT ID CARD



Name : Harshit Sharma

Father's Name: Mr. Narendra Kumar Sharma

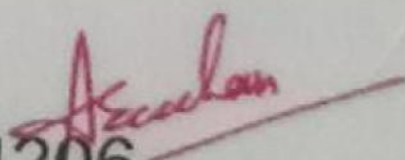
Course : M.Pharma

Valid up to : 2021-23

D.O.B. : 25.12.1998

Address : LIG 133 Sector -B
Jaruli Phase-2
Kanpur

Phone No. : 7800769953, 9696324206


Director

BABASAHEB
BHIMRAO
AMBEDKAR
UNIVERSITY



प्रजा सोम काशी
ESTABLISHED 1996

बाबासाहेब भिमराव अम्बेडकर विश्वविद्यालय

(केन्द्रीय विश्वविद्यालय), रायबरेली रोड, विहा विहार, लखनऊ - 226025

Babasaheb Bhimrao Ambedkar University

(A Central University), Raebareli Road, Lucknow – 226025

www.bbau.ac.in



IDENTITY CARD

(Session:- 2021-2023)

ID No.

PG01768

NAME

KUNAL AGAM KANAUIA

COURSE

M.Pharm (Pharmaceutics)

Proctor



C.S.J.M. UNIVERSITY, KANPUR

Identity Card

Name : Madhup Ojha
Desig./Course : M.Pharm - 2K21
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N 15/555 A-3 Sudamapur Varanasi



Proctor



DELHI PHARMACEUTICAL SCIENCES & RESEARCH UNIVERSITY
(The First University dedicated to Pharmaceutical Sciences in India)
DELHI INSTITUTE OF PHARMACEUTICAL SCIENCES & RESEARCH
Post Graduate Programme (Session 2021-22)



Registration No. 600828
Candidate's Name MONIKA
Course(s) Applied Master of Pharmacy, Pharmaceutical Management (MBA)
Candidate's Name PAWAN KUMAR
Date of Birth 14/11/1996
Gender FEMALE
Blood Group B-
Category GENERAL
Person with Disability NO
Migrant NO
Kashmiri Migrant YES
Race Category NO
Nationality Indian
Permanent Address SHANTI BHAWAN, NAGLADEH UDHAR MAT, RAYA, MATHURA, UTTAR PRADESH, 281204.
Correspondence Address SHANTI BHAWAN, NAGLADEH UDHAR MAT, RAYA, MATHURA, UTTAR PRADESH, 281204.
E-mail No. 9636627137
II ID pacheramonika@gmail.com
Parent's/Guardian Mobile No. 9460615889



Affix
Photograph

04.02.2017

सिद्धि

Contact Information

Qualifying Exam Information

Name of University		Enrollment No.	Year of Passing
CHJATRAPATI SAHUJI MAHARAJ UNIVERSITY KANPUR		CSJMA1700130053	2021
Name of the Institute/University		State Council	
CHJATRAPATI SAHUJI MAHARAJ UNIVERSITY		No	
Pradesh	Yes	GPAT Valid upto	
Qualified	Max. Marks	2023	General
Score (Marks Obtained)	500	Marks Obtained	
3850		% of Marks	
87.66		3375	
87.66		87.66	

Certificates / Documents Uploaded

DOB Certificate, Marksheet Certificate 1, Marksheet Certificate 2, Marksheet Certificate 3, Marksheet Certificate 4, Marksheet Certificate 5, Marksheet Certificate 6, Marksheet Certificate 7, Marksheet Certificate 8, Aadhar Card, GPAT Score Card/Certificate

Application Fee Details

Reference No.	Transaction Date	Application Fee	Fee Status
731606	20/09/2021	1000.00	Confirmed

Declaration

I, **MONIKA**, hereby declare that all the information given above is true to the best of my knowledge. In case it is detected at any stage of admission process that I do not fulfil the eligibility criteria and / or do not comply with other requirements as per Prospectus and / or I have furnished any incorrect / false information or have suppressed any material facts, my admission is liable to be rejected at any stage.

Signature of the Candidate



HYGIA INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH

Sitapur Hardoi Bypass Road, Opposite Sahara City Homes, Pr

Phone : 0522 2851202 E-mail : hiperindia@gmail.com W

LIBRARY CARD

Non-Transferable

Session 20...²¹... - 20...²²...

Library Card No. **MPH/16/14**

Name of Student **Nitika**

Year **Ist** yr.

Branch **Ph. Chemistry
(HIPER)**

Issue Date **21/10/21**

Address **Eldico - 2, Lucknow.**

Nitika
Sign. of Student



Sign & Seal of
Librarian

21/10/21



**DAYANAND DINANATH COLLEGE
INSTITUTE OF PHARMACY**

Approved by AICTE, PCI, Ministry of HRD
Affiliated to UPBTE, Lucknow

Hamirpur Road, Ramaipur, Kanpur Nagar

Phone No. : 7524900444, www.ddckanpur.edu.in

STUDENT ID CARD

Name

: Nitin Kumar

Father's Name

: Mr. Surjeet Kumar

Course

: M.Pharma

Valid up to

: 2021-23

D.O.B.

: 05.07.1997

Address

: Khapperpur
Post-Raya Mathura



Phone No.

: 7014728970, 7014728979

(Signature)
Director



एक कदम स्वच्छता की ओर

राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान

HYDERABAD

National Institute of Pharmaceutical Education & Research, Hyderabad

Department of Pharmaceuticals

Ministry of Chemicals & Fertilizers, Govt. of India

STUDENT IDENTITY CARD

Name : PRIYANKA

Registration No : MC/2021/14

Course : M.S.(Pharm.) Medicinal Chemistry

Date of Birth : 21 March 1998

Vaild : 2021-2023

Registrar





C.S.J.M. UNIVERSITY, KANPUR

Identity Card

Name : Shweta Yadav
Desig./Course : M.Pharm - 2K21
Department : Pharmacy
Contact No. : 9369071433
Validity : 6/30/2023
Address : D/o Ashok KUMar Yadav
Rawatpur Amethiya Lar Deoria



Proctor



एशिया विश्व कर्णिय विद्यापीठ

CENTRAL UNIVERSITY OF SOUTH BIHAR

ID No. : BM/104/12

Room No.

104

Valid Up to :

05/12

BOYS HOSTEL - IDENTITY CARD

Name : ...TITIKSHA KUMAR SAGAR

Name : ...OM PRAKASH SAGAR

Programme : ...M. PHARM

Enrollment No. : ...LUSB.0012392 Blood Gr. : ...B+

Student's Signature :

[Handwritten Signature]



[Handwritten Signature]



**HYGIA INSTITUTE
OF PHARMACEUTICAL EDUCATION & RESEARCH**

Sitapur Hardoi Bypass Road, Opposite Sahara City Homes, Prabandh Nagar, Lucknow - 13

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LIBRARY CARD

Non-Transferable



Session 20²¹... - 20²²...

Library Card No. **MPH12111**

Name of Student **Vaishnavi Lahu**

Year **1st** Branch **2021-2023**

Issue Date **20/10/21**

Address **Mankeengay, Than Lalpur**

Eshtapur

Vaishnavi Lahu

Sign. of Student

Sign & Seal of
Librarian

21/11



C.S.J.M. UNIVERSITY, KANPUR

Identity Card

Name : Vandita Vishwakarma
Desig./Course : M.Pharm - 2K21
Department : Pharmacy
Contact No. : 7985501807
Validity : 6/30/2023
Address : D/o Harikesh
Vishwakarma Anand Nagar Maharaj Ganj
Gorakhpur



Proctor



C.S.J.M. UNIVERSITY, KANPUR

Identity Card

Name

: Adarsh Kumar

Desig./Course : B.Pharm - 2K20

Department

: Pharmacy

Contact No.

: 8009991067

Validity

: 6/30/2024

Address

: S/o Prem Narayan, Vill-

Antapur, Post- Hathooma Kanpur Dehat



Proctor

IIEIT

ISO 9001:2015 Certified

HARIOM NAGAR, CIVIL LINES,
GORAKHPUR ☎ (0551) 2203245

IDENTITY CARD

Name... Ajeet Kumar

Father's Name... Mr. Rakesh Kumar

Course... BMLT Yr... 1st

Address... Vill & post Deisand

Thana ledging Bankati

Basti Ph/Mob... 751854



Valid upto... 30/6/22

Director
Hariom Nagar Civil Lines
Gorakhpur U.P.
With Signature



Naraina Group of Institutions

Affiliated to AKTU, CSJM & UP State Medical
Faculty, Approved by AICTE, PCI, INC & NCTE

STUDENT ID CARD



KM ANJALI TIWARI

B.PHARM - (2020-21)

Student ID : s13757


Auth. Sign.





Aishwarya

Name of
Candidate :

AISHWARYA SACHAN

Father's Name :

MANOJ KUMAR

Mother's Name :

KIRAN DEVI

Date Of Birth :

1999-08-15

Gender :

FEMALE

Category :

OBC

Course :

BACHELOR OF EDUCATION (B Ed)

Semester :

1

College Name :

(KN91) SANT VIRAGI BABA MAHAVIDYALAYA, MUIYA, SRINAGAR,
KANPUR

Exam Center :

(KN06) HALIM MUSLIM P.G. COLLEGE, CHAMANGANJ, KANPUR

PAPER CODE

PAPER NAME

DATE

TIME

09:00 AM TO 10:30



RAMA UNIVERSITY

FACULTY OF AYURVEDIC MEDICAL SCIENCES



Abhishek Katiyar

BAMS



RUM2220034



name (नाम)	EM KACHH
name in Hindi (हिंदी में नाम)	कु शब्दी
father's Name (पिता का नाम)	DEEPAK PUL SINGH
father's Name (माँ का नाम)	NEELAM SINGH
gender (लिंग)	F
DOB (जन्म की तारीख)	10-07-1999 00:00:00
blood Group (रक्त वर्ग)	
division Session (प्रवेश सत्र)	2023-22
division Semester (प्रवेश सत्र)	3
academic Status (पैदाशिक स्थिति)	REGULAR
institute's Code and Name (संस्थान का कोड और नाम)	0591 / VARANA VIDYAPITH " GROUP OF INSTITUTIONS" FACULTY OF PHARMACY,VARANASI
course Name (कोर्स का नाम)	B.Pharm
branch Name (शाखा का नाम)	Bachelor of Pharmacy
semester (सत्र)	1
Mobile No. (मोबाइल नंबर)	8756690659
mail id (ईमेल आईडी)	KACHH1111111111@GMAIL.COM
current Address (वर्तमान पता)	D/O DEEPAK PUL SINGH, KACHH, VARANASI, UP, INDIA
City/Village (शहर/ग्राम)	Varanasi
State (राज्य)	Uttar Pradesh
Country (देश)	India
Pincode (पिन कोड)	221001



Phology अर्थ (आयाचन)

No Signature
Attached

Signature: _____

[illegible]



MAHARANA PRATAP College of Pharmacy

Affiliated to AKTU, Lucknow &
Approved By AICTE & PCI, New Delhi



Valid Upto 2024

SHADDHI SHARMA
B. PHARM.
DAY SCHOLAR

Contact No : 7355407214,
7309243502



20BP17 / 200


Principal