



NOMINATION FOR ALUMNI ACHIEVER'S AWARD

1. Name of Alumni:

2. Course Completed: D. Pharm. / B. Pharm. / M. Pharm.
(Please strikethrough)

3. Pass-out year:

4. Category of the award:
(Please ✓ in the box)

- Alumni Achiever's in
- Hospital Pharmacy
- Community Pharmacy
- Production
- Q.C. & Q.A.
- Research & Development
- Academics
- Miscellaneous

5. Present Designation with company's name:

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6. Experience in the respective field with timeline (Please give details of your work experience):

Year	Designation

7. Contribution in the respective field that justifies the award:

- a)
- b)
- c)

Signature of Alumni: