



Pravara Rural Education Society's

COLLEGE OF PHARMACY (FOR WOMEN)



Chincholi, Tal. Sinnar, Dist. Nashik 422103, Maharashtra, India
Ph.No. (02551)271178, Fax No. : (02551)271178

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Approved by A.I.C.T.E., Pharmacy Council of India, New Delhi and recognized by Govt. of Maharashtra
Affiliated to Savitribai Phule Pune University, Pune

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Criteria No: 5

Key Indicator: 5.1 Student Support

Metric No: 5.1.4

File Name: (QnM) *Average percentage of students benefitted by guidance for competitive examinations and career counselling offered by the institution during the last five years*

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Number of outgoing students placed in 2020-21 year

Sr. No.	Name of Students	Organization	Package(In lakhs)	Position
1	Ahire Kartika Shantaram	Glenmark Pharmaceuticals Nashik.	1.44	Trainee Production Officer
2	Avhad Sonal Shivaji	Advantmed LLP Gujrat.	1.80	Trainee Data Analyst
3	Awari Shraddha	Advantmed LLP Gujrat.	1.80	Trainee Data Analyst
4	Bhabad Sonali	Aditya Medical & general Store , Sinnar	1.5	Pharmacist
5	Bhamre Ashwini	IKS Healthcare Mumbai	1.90	Trainee data Analyst
6	Bodke Vrushali	N.V Pharma,Sinner	1.44	Quality Assurance Officer, Sinnar
7	Borade Vaishnavi Sopan	Medical Coder	2.8	Meril Lifescience Pvt. Limited, Gujrat.
8	Borse Swati	Ipca Silvasa,	1.44	Trainee, QC officer.
9	Gaikwad Neha Balasaheb	Genome Biotech Pvt. Ltd.	1.50	Microbiologist
10	Gajare Swapnali Vikram	Labcorp,Pune	06.00	Data analyst
11	Gavhane Komal	Episource: Payer Healthcare Analytics & Technology Solutions	1.5	Data analyst
12	Govardhane Sakshi Balu	Iks health care solutions	1.9	Data analyst
13	Jadhav Komal Vasantrao	Gebbs Healthcare solutions, Aurangabad.	1.5	Medical Coding
14	Jadhav Puja Satish	Dhanvantari medical	1.44	Pharmacist
15	Kadre Yogita Jitendra	Mankind Lab Mumbai	1.8	Medical Representative
16	Landage Akshada	Mitrasen Medical.Rahata	1.44	Pharmacist
17	Pawar Pratiksha Dilip	Shree Generic	1.5	Pharmacist

		Medical, Nashik		
18	Rathod Divya Ravindranath	MacLeod's pharma, Mumbai.	1.8	Associate Research Analyst.
19	Sadgir Urmila Rambhau	Advantmed LLP Gujrat.	1.66	Medical Coding
20	Salve Tejal Sanjay	Retail Pharmacy Shop	1.5	Pharmacist
21	Sarde Bhakti Gahininath	Gebbs healthcare solution, Aurangabad	1.9	Medical coding
22	Shinde Pratibha Sanjay	Medical coding	1.44	Medical Coder
23	Somwanshi Gayatri Sanjay	Medical shop - Swami medical	1.44	Pharmacist
24	Temrikar Sana	Data analyst	1.8	IKS health care solutions
25	Vartak Manali	Pharmacist	1.5	Chirayu Super Speciality Hospital Chemist
26	Tajanpure Harshali	Medical Shop	0.72	Pharmacist
27	Donde Harsha Kailas	Pharmacist	1.44	Sanjivani Retail Pharmacy, Nashik
28	Rangrez Sadaf Arshad Gafur	MedicalCoder	5.00	Covance India, Mumbai
29	Mane Sushama Sarjerao	Assistant professor	2.5	Ideal College of Pharmacy, Kalyan.
30	Lonare Mayuri Kiran	Assistant professor	2.0	Assistant Professor, Shriram dnyan Shikshan Sanstha Vaijapur.
31	Sonam Raghunath Sanap	Pharmacist	1.44	Pharmacist Officer, Lasalgaon
32	Pawar Swapna	Assistant professor	2.5	Ideal College of pharmacy, Kalyan.




Bhangale



Dr. C. J. Bhangale
Principal



One Purpose, One Mission, One Dream.

Principal
College of Pharmacy, Chincholi
Tal. Sinnar, Dist. Nashik 422102

Name of Students	Organization	Proof
Avhad Sonal Shivaji	Advantmed LLP Gujrat.	
Awari Shraddha	Advantmed LLP Gujrat.	

<p>Bhabad Sonali</p>	<p>Aditya Medical & general Store , Sinnar</p>	
<p>Bhamre Ashwini</p>	<p>IKS Healthcare Mumbai</p>	

<p>Borade Vaishnavi Sopan</p>	<p>Medical Coder</p>	<p style="text-align: center;">CONSULTANCY SERVICES CONTRACT BETWEEN VAISHNAVI BORADE AND MERL LIFE SCIENCES PVT LTD</p> <p>The service agreement is made as of the 17th day of January 2022 between:</p> <p>Merl Life Sciences Private Limited, a company registered under the applicable laws of India having its registered office at following address: Bhikhur House, Mukund Marg, Chola, Vengal-398191, Gujarat, India (hereinafter referred to as "Client Organization")</p> <p>And:</p> <p>Vaishnavi Borade having her principal place of business at, At Post - Mangalpur Khamb, Gramk Nagar Tal, Dist - Nadiad, Pin Code - 422609 India (hereinafter referred to as "Consultant")</p> <p>1. DUTIES:</p> <p>Client hereby retains Consultant to render services (hereinafter referred to as "Services") to them subject to the terms and conditions of this agreement and Consultant hereby under Services.</p> <p>Such services to be rendered under the supervision and direction of the Management of Client Organization or any other personnel nominated for the purpose by the management of Client Organization (hereinafter referred to as "Client Organization Point of Contact or client POC")</p> <p>The Consultant is obligated to complete the allocated tasks as per mandated timelines as mentioned in the mode of communication (e-mail/department document).</p> <p>1. TERM AND TERMINATION:</p> <p>Services under this agreement shall be deemed to have commenced from 01st February 2022 and will continue till 31st January 2025, subject to earlier termination or renewal thereof (hereinafter referred to as "Term").</p> <p>The services shall be extended at the discretion of Client Organization for a further period, which will be mutually agreed upon and shall be based on solely on the performance of the consultant and the business requirement of the Client Organization.</p> <p>This agreement can be terminated by either side on giving two month's notice.</p> <p>A. Compensation:</p> <p>The fees to be paid to the consultant for Consultancy services under this agreement shall be INR 25,000/- per Monthly Basis. Any other additional services if required will be considered through an addendum to this agreement.</p> <p>Consultant will send a monthly invoice to Client Organization. This amount is payable by Client Organization within 10 days of submitting completed and accurate invoice as approved by Client's finance team.</p> <p style="text-align: right;">Page 1 of 3</p>
<p>Gajare Swapnali Vikram</p>	<p>Labcorp,Pune</p>	 <p>PLACED IN  labcorp</p> <p>★★★★★</p> <p>"IT WAS THE BEST DECISION I MADE AFTER B.PHARMA TO BE IN CLINICAL TRAIL DATA ANALYTICS. HERE I AM PLACED WITH LABCORP. THANKS KITE-AI FOR THE OPPORTUNITY"</p> <p>MS. SWAPNALI GAJARE B.Sc. (Hons) of Pharmacy, 2022 Presently, Graduate of Pharmacy, Gujarat</p> <p>KITE AI An initiative of KITE AI Technologies Contact: 020-28184343 Email: info@kiteai.com</p> <p>READ FULL SWAPNALI'S STORY</p>

<p>Gavhane Komal</p>	<p>Episource: Payer Healthcare Analytics & Technology Solutions</p>	 <p>The image shows the cover page of a document from Episource. At the top left is the 'epi' logo with 'EPISOURCE' in smaller text. At the top right is the Indian national flag. Below the logo, there is a date '26th 2022' and 'Episode ID: EPISOURCE'. The main body of the page contains a letter from the Episource team, mentioning a meeting on 26th 2022 and a meeting on 28th 2022. It also includes a signature and the name 'Manish Khosla'. At the bottom right, it says 'Komal Gavhane Page 2 of 2'.</p>
<p>Govardhane Sakshi Balu</p>	<p>Iks health care solutions</p>	 <p>The image shows the cover page of a document from IKS. At the top left is the 'IKS' logo. Below it, there is text identifying the document as a 'Request Letter of Appointment'. The main body of the page contains a letter from the IKS team, mentioning a meeting on 26th 2022 and a meeting on 28th 2022. It also includes a signature and the name 'Manish Khosla'. At the bottom right, there is a small circular logo.</p>

Jadhav Komal Vasantao

Gebbs Healthcare solutions, Aurangabad.

CONTRACT OFFER

1. **PROVISIONS OF REGISTRATION:** The Applicant hereby declares that he/she is a resident of India and is eligible for registration as a pharmacist in the State of Maharashtra.

2. **REGISTRATION FEE:** The Applicant shall pay a registration fee of Rs. 10,000/- (Ten thousand rupees only) to the Registrar of Pharmacy, Maharashtra, at the time of registration.

3. **VALIDITY:** The registration shall be valid for a period of five years from the date of registration.

4. **RENEWAL:** The registration shall be renewed for a period of five years at a time before the expiry of the current registration.

5. **TERMINATION:** The registration shall be terminated if the Applicant fails to renew it within the stipulated time or if he/she is found to be ineligible for registration.

6. **APPLICANT'S DECLARATION:** I, the undersigned, hereby declare that I am a resident of India and am eligible for registration as a pharmacist in the State of Maharashtra. I have read and understood the above provisions and agree to comply with them.

7. **SIGNATURE OF APPLICANT:** _____

8. **DATE:** _____

Kadre Yogita Jitendra

Mankind Lab Mumbai

Advertisement Letter

Dear Ms. Yogita Jitendra,

We are pleased to inform you that your application for registration as a pharmacist in the State of Maharashtra has been received. We are processing your application and will contact you once the registration is complete.

The registration fee of Rs. 10,000/- has been received. We will issue you a receipt for the same. Please retain this receipt as it will be required for the renewal of your registration.

We request you to provide the following documents at the time of registration:

- 1) Two passport size photographs.
- 2) Certificate of educational qualification and experience certificate.
- 3) Affidavit from the State of Maharashtra.
- 4) Certificate in support of date of birth.
- 5) PAN CARD & AADHAR Card Copy.
- 6) Copy of passport size photograph.
- 7) Medical Certificate of fitness only signed by a qualified Doctor (not less than 4 MBBS).

We look forward to your registration and welcome you to Mankind Pharmaceuticals Limited. Thank you.

For Mankind Pharmaceuticals Limited
Authorized Signatory

Ms. YOGITA JITENDRA KADRE

Rathod Divya Ravindranath

MacLeod's pharma, Mumbai.

MACLEOD'S PHARMACEUTICALS LIMITED

Advertisement Letter

Dear Ms. Divya Ravindranath Rathod,

We are pleased to inform you that your application for registration as a pharmacist in the State of Maharashtra has been received. We are processing your application and will contact you once the registration is complete.

The registration fee of Rs. 10,000/- has been received. We will issue you a receipt for the same. Please retain this receipt as it will be required for the renewal of your registration.

We request you to provide the following documents at the time of registration:

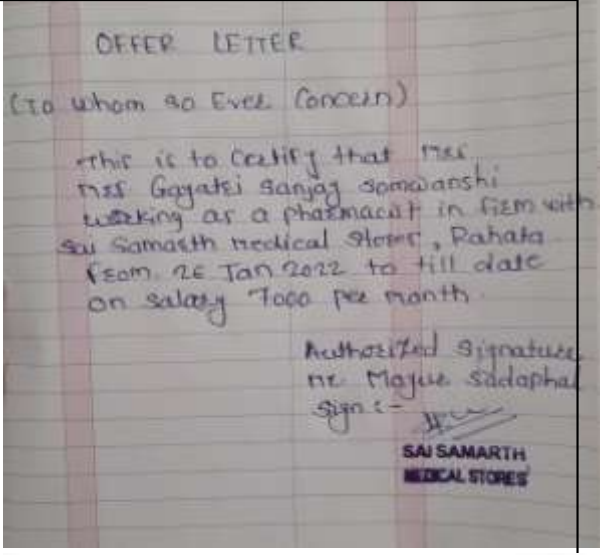




- 1) Two passport size photographs.
- 2) Certificate of educational qualification and experience certificate.
- 3) Affidavit from the State of Maharashtra.
- 4) Certificate in support of date of birth.
- 5) PAN CARD & AADHAR Card Copy.
- 6) Copy of passport size photograph.
- 7) Medical Certificate of fitness only signed by a qualified Doctor (not less than 4 MBBS).

We look forward to your registration and welcome you to Macleod's Pharmaceuticals Limited. Thank you.

For Macleod's Pharmaceuticals Limited
Authorized Signatory

Ms. DIVYA RAVINDRANATH RATHOD

MACLEOD'S PHARMACEUTICALS LIMITED
101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

Somwanshi Gayatri Sanjay	Medical shop - Swami medical	 <p style="text-align: center;">OFFER LETTER</p> <p style="text-align: center;">(To whom so Ever Concern)</p> <p>This is to certify that Mrs. Gayatri Sanjay Somwanshi working as a pharmacist in firm with Sai Samarth Medical Stores, Rahata from 26 Jan 2022 to till date on salary 7000 per month.</p> <p style="text-align: right;">Authorized Signature Mr. Mayur Sadaphal Sign :-  SAI SAMARTH MEDICAL STORES</p>
Temrikar Sana	Data analyst	 <p style="text-align: center;">OFFER LETTER OF APPOINTMENT</p> <p style="text-align: center;">Ms. Sana Temrikar</p> <p style="text-align: center;">Department of Health, Government of Maharashtra</p> <p style="text-align: center;">Post: Data Analyst</p> <p style="text-align: center;">Date: 26/01/2022</p> <p style="text-align: center;">To: Ms. Sana Temrikar</p> <p style="text-align: center;">Address: [Address details]</p> <p style="text-align: center;">[Official Stamp]</p>
Vartak Manali	Pharmacist	 <p style="text-align: center;">CHIRAYU SUPER SPECIALITY HOSPITAL Patient First - "Always"</p> <p style="text-align: center;">B-101/102, 2nd/3rd/Floor, Mira Road, Ground Floor, Vimal Deep, Sarvodaya Paradise, Near Golden Nest, Mira Bhayander Road, Dist. Thane - 401 102. Tel: Ph. 022-26120015/16</p> <p style="text-align: center;"></p> <p style="text-align: center;">MANALI VARTAK Designation: Pharmacist DOB: 18.08.1988 Blood Group: B+VE</p> <p style="text-align: center;">www.chirayuhospital.com</p>

Donda Harsha Kailas	Pharmacist	<p>OFFER LETTER (To Whom So Ever Concern) This is to certify Mrs. Harsha Kailas Donda working as a Pharmacist in firm Sahajevan medical and general store Nashik from may 2021 to a date on the salary of ₹ 10000/- per month.</p> <p>SAHAJEVAN MEDICAL & GENERAL STORES ASL-57, Sahyadri Nagar CIDCO, Nashik-09 Authorized sign</p>
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C. J. Bhangale

**Dr. C. J. Bhangale
 Principal**

**Principal
 College of Pharmacy, Chincholi
 Tal. Sinner, Dist. Nashik 422102**