



Tel: 0866-2479775

**Kommareddy Venkata Sadasiva Rao
Siddhartha College of Pharmaceutical Sciences**

Siddhartha Nagar, Vijayawada - 520010, AP, INDIA
(Sponsors : Siddhartha Academy of General & Technical Education)
ISO 9001:2015, ISO 14001:2015 & ISO 50001:2011 CERTIFIED INSTITUTION
Affiliated to Krishna University, Machilipatnam
Approved by AICTE, PCI, New Delhi and Govt. of Andhra Pradesh

E-mail :kvsrsiddharthapharma@gmail.com

Web: www.kvsrsiddharthapharma.edu.in

LIST OF PLACEMENTS OF OUTGOING STUDENTS

A.Y: 2019-20

S.No.	Name of the Student	Program Graduated From	Name of the Company Joined	Salary
1.	Kadimella Allauddin Raju	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
2.	Kali Rajesh	B-Pharm	Episource, 54-15-5A, Srinivasa Nagar Bank Colony, Vijayawada	1,80,000/Annum
3.	Akumalla Khan Babu	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
4.	Chakka Durga Pravallika	B-Pharm	WISSEN INFOTECH, 176,4th Floor, Adarsh Eco Place, KIADB EPIP 2nd phase, Whitefield, Bengaluru	2,20,000/Annum
5.	Damarla Phanideep Naidu	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
6.	Desu Venkat Hari Kumar	B-Pharm	MITOCON BIOPHARMA, PVT LTD, Begumpet, Hyderabad, Telangana - 500016	1,81,200/Annum
7.	Gouru Akhil	B-Pharm	ARENE LIFESCIENCE LTD, 48-50 Pashamylaram Industrial Estate (IDA-II, behind Hyderabad Chemicals, Hyderabad	1,80,000/Annum
8.	Katru Poojitha	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum

9.	Kurra Sindhu Priya	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
10.	Mohammed Nizamuddin	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
11.	Narayanam Ooha Sessa Sai	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
12.	Nunna Navya Sree Sai	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
13.	Pavani Talasila	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
14.	Surayya Zabeen	B-Pharm	AUROBINDO PHARMA LTD, Unit IV, Phase III, Pashamylaram, Patancheruvu Revenue Md, Telangana	1,80,000/Annum
15.	Thota Jasmine	B-Pharm	AUROBINDO PHARMA LTD, Unit IV, Phase III, Pashamylaram, Patancheruvu Revenue Md, Telangana	1,80,000/Annum
16.	Vanka Jogendra Babu	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
17.	Vardhini Akash	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/ Annum
18.	Vemuru Tejaswi Venkata Nagasai Vishnupriya	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
19.	Jaliparthi Venkata Alekhya	B-Pharm	DIVI'S LABORATORIES LTD, Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum

20.	Jirra Indrajaja	Pharm-D	Duty Doctor, Royal Hospitals, Kasturibaipet, Vijayawada, Ph. No: 0866-2441778	2,20,000/Annum
21.	Kancharla Chandana Sri	Pharm-D	Crossiance Clinical Research, Miypur, Hyderabad	2,20,000/Annum
22.	Singam Mallikarjuna Reddy	Pharm-D	Office of the Divisional Forest Officer, Wildlife Management, Atmakur	2,20,000/Annum
23.	Bolla Bhavani	Pharm-D	Arun Kidney Centre, Governorpet, Vijayawada	2,20,000/Annum
24.	Geda Doli Sowmya	Pharm-D	HCL Technologies Ltd, Vijayawada	2,57,501/Annum
25.	Mallavarapu Likhitha	Pharm-D	Clinical Pharmacist, Emp id: AKC001199616, Arun Kidney Centre, Governorpet, Vijayawada	2,20,000/Annum
26.	Reddy Praveen	Pharm-D	Drug Saftey Associate, Vigilare Biopharma Ltd, Kukatpally, Hyderabad, Ph:7207056515	1,80,000/Anum
27.	Shaik Lal Saheeb	Pharm-D	Vijaya Orthopedic and Accident Care, Governorpet, Vijayawada	2,20,000/Annum
28.	Borra Tejasri	Pharm-D	Ravi American Cancer Care, Moghalarajpuram, Vijayawada, Ph: 0866-6667000	2,20,000/Annum
29.	Gadamsetti Veera Venkata Naga Manideep	Pharm-D	Sri Swarupa Super speciality Hospital, Suryaraopet, Vijayawada, Ph: 8886461236	360000/Annum
30.	Ramya Sree Pavuluri	Pharm-D	PPD Pharmaceutical Development India Pvt Ltd, Kadubesanahalli, Bangalore	4,05,000/Annum
31.	Thananki Divya	Pharm-D	Ravi American Cancer Care, Moghalarajpuram, Vijayawada, Ph: 0866-6667000	2,20,000/Annum
32.	Chanumolu Hari Prakash	M-Pharm Analysis	DIV'S LABORATORIES LTD, Chippada Village, Annaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
33.	Jampana Deekshita	M-Pharm Ceutics	Dr YSR Aarogya Sri Healthcare Trust, Govt. of AP	1,44,000/Annum
34.	Jampani Bhanu Prakash	M-Pharm Analysis	DIV'S LABORATORIES LTD, Chippada Village, Annaram Post, Bheemunipatnam Mandal, Visakhapatnam Dist, Andhra Pradesh – 531 162.	1,92,000/Annum
35.	Khairunnisa Khatoon	M-Pharm Analysis	PERSOLKELLY India Pvt.Ltd., Durga Tower, Unit No.301, third Floor, Raj Bhavan Road, Somajiguda, Hyderabad,	3,80,004/Anum

			Telangana-50082, India.	
36.	Kondaveeti Mrudula	M-Pharm Analysis	KVSR Siddhartha College of Pharmaceutical Sciences, Siddhartha Nagar, Vijayawada	2,16,000/Annum
37.	Chalapati Sravani	M-Pharm Analysis	Sri Vijaya Bhaskara Pharmaceuticals, Challamrajuvari Street, Vijayawada-520001, Ph. No.: 9848263080	1,20,000/Annum
38.	Borra Hima Bharathi	M-Pharm Ceutics	InVitro Research Solutions Pvt. Ltd, Kodigehalli Main Road, Sahakar Nagar, Hebbal, Bangalore	3,00,000/ annum
39.	Kottala Lalitha	M-Pharm Ceutics	spiProPAT Intellectual Property Solutions, Madeenaguda, Hyderabad-5000049	2,16,000/Annum
40.	Maturi Susmitha	M-Pharm Ceutics	Innodata India Pvt Ltd, Stellar IT Park, Sector-62, Noida	2,16,000/Annum
41.	Meesala Pavan Kumar	M-Pharm Ceutics	Casper Pharma Pvt Ltd, GMR Hyderabad Aviation SEZ Limited, Mamidipally Village, Hyderabad	2,16,000/Annum
42.	Parasa Gayathri	M-Pharm Ceutics	Optival Health Solutions Pvt Ltd, Door no: 55-17-4, Industrial Estate, Auto Nagar, Vijayawada	1,30,000/Annum
43.	Potla Kauvery	M-Pharm Ceutics	Axis Clinicals Ltd, Miyapur, Hyderabad, Ph. No.: 040-4040408081	2,16,000/Annum
44.	Sai Ramya Srikakulam	M-Pharm Ceutics	Omics Group, Raheja IT park, Mind Space, Hitech city, Hyderabad	1,92,000/Annum
45.	Uppuganti Maha Lakshmi	M-Pharm Ceutics	Gravity Pharma Pvt.Ltd, Cooperative Housing Society, Panjagutta, Hyderabad	1,80,000/Annum
46.	Battula Jhancy	M-Pharm Chemistry	Symed Labs Limited, Road No. 14, Banjara Hills, Hyderabad-500034, Telangana. Ph. No.8123686472	2,52,240/Annum
47.	Kameswari Priyanka Devarakonda	M-Pharm Chemistry	Symed Labs Limited, Road No. 14, Banjara Hills, Hyderabad-500034, Telangana. Ph. No.8123686472	2,52,240/Annum
48.	Patibandla Sirisha	M-Pharm Chemistry	Symed Labs Limited, Road No. 14, Banjara Hills, Hyderabad-500034, Telangana. Ph. No.8123686472	2,52,240/Annum




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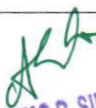
LIST OF STUDENTS PROGRESSED FOR HIGHER EDUCATION

A.Y: 2019-20


S.No.	Name of the Student	Program Graduated from	Name of the Program Joined	Name of the Institution Joined
1.	Maradani Brahmi	Pharm-D	Masters in Information Science/studies	University of North Texas
2.	Alam Mounika	Pharm-D	Masters in Information science/studies	University of North Texas
3.	Arangi Divya	Pharm-D	Masters in Healthcare Administration and Service Management	Conestoga College Institute of Technology and Advanced Learning
4.	Bendu Dileep Naidu	Pharm-D	Masters in Information Science/studies	University of North Texas
5.	Kancherla Hindola	Pharm-D	Masters in Medical Informatics	Indiana University
6.	Kavuri Pavani Jyothi	Pharm-D	Masters in Medical Informatics	Indiana University
7.	Vineetha Kilaru	Pharm-D	Masters in Information Science/studies	University of North Texas
8.	Kolli Haneesha	Pharm-D	Masters in Information Science/studies	University of North Texas
9.	Nimmagadda Sree Lakshmi	Pharm-D	Masters in Information Science/studies	University of North Texas


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10.	Paladugu Nikhila	Pharm-D	Masters in BioInformatics	Grand Valley State University
11.	Madala Naga Lakshmi Tanuja	Pharm-D	Masters in Information science/studies	University of North Texas
12.	Garimella Harika	B-Pharm	M.Pharmacy, Pharmaceutical Analysis	KVSR Siddhartha College of Pharmaceutical Sciences
13.	Pilla Sivani	B-Pharm	M.Pharmacy, Pharmacology	Chalapathi Institute of Pharmaceutical Sciences
14.	Agarathi Naga Abhinav	B-Pharm	Masters in Pharmaceutical Sciences	University of Greenwich
15.	Bathula Sirisha	B-Pharm	M.Pharmacy, Pharmaceutical Analysis	Dr Samuel Geoga Institute of Pharmaceutical Sciences
16.	Boddu Meher Ravindranath	B-Pharm	Masters in Pharmaceutical Sciences	University of Greenwich
17.	Bommareddy Haneesh Reddy	B-Pharm	M.Pharmacy, Pharmaceutics	GITAM University
18.	Boothapati Sudha Rani	B-Pharm	M.Pharmacy, Pharmaceutics	JNTUK, Kakinada
19.	Chanumolu Harsha Sai	B-Pharm	Masters in Health Systems Managaement	Fanshawe University, London
20.	Devireddy Sirisha	B-Pharm	M.Pharmacy, Pharmaceutical Chemistry	AU College of Pharmaceutical Sciences
21.	Gannavarapu Rohit	B-Pharm	M.Pharmacy, Pharmaceutical Chemistry	Birla Institute of Technology, Ranchi
22.	Garikapati Sai Teja	B-Pharm	Masters in Pharmaceutical Sciences	University of Greenwich
23.	Gugulothu Haris Chandra Naik	B-Pharm	M.Pharmacy, Pharmaceutical Chemistry	JNTU Ananthapur
24.	Gullapalli Yamini	B-Pharm	Masters in Health Systems Management	Fanshawe, London
25.	Guntupalli Thanu Sri	B-Pharm	M.Pharmacy	AU College of Pharmaceutical Sciences


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26.	Jasti Ganesh Kumar	B-Pharm	Masters in Pharmaceutical Sciences	University of Greenwich
27.	Kalavakollu Naga Malleswari	B-Pharm	M.Pharmacy, Pharmaceutics	Sri Padmavathi School of Pharmacy
28.	Kalluri Vijayasree	B-Pharm	Masters in Healthcare Administration	SAULT College, Canada
29.	Kambhampati Rohith	B-Pharm	M.Sc Pharmaceutical Sciences	University of Greenwich
30.	Kolli Suhas Reddy	B-Pharm	M.Pharmacy, Pharmaceutics	JSS College of Pharmacy, Mysuru
31.	Komarabattina Buela Grace	B-Pharm	M.Pharmacy, Pharmaceutical Analysis	Sri Padmavathi School of Pharmacy
32.	Komarala Narendra Babu	B-Pharm	M.Pharmacy, Analysis & Quality Assurance	Shri Vishnu College of Pharmacy
33.	Manne Navya Teja Sree	B-Pharm	Masters in Healthcare Administration Management	Fanshawe, London
34.	Meda Sravya	B-Pharm	Masters in Health Systems Management	Fanshawe, London
35.	Mekala Alekhya	B-Pharm	M.Pharmacy, Pharmaceutics	SKU College of Pharmaceutical Sciences
36.	Munnangi Sukanya	B-Pharm	M.Pharmacy, Pharmaceutics	KVSR Siddhartha College of Pharmaceutical Sciences
37.	Murapala Vivek	B-Pharm	M.Pharmacy, Pharmaceutics	GITAM UNIVERSITY
38.	Pallem Santhi	B-Pharm	M.Pharmacy, Pharmacology	JNTU, Ananthapur
39.	Palutla Sai Pravallika	B-Pharm	M.Pharmacy, Pharmaceutics	Shri Vishnu College of Pharmacy
40.	Patiballa Venkata Naga Sai Bindu Madhavi	B-Pharm	M.Pharmacy, Pharmaceutics	Sri Venkateswara College of Pharmacy
41.	Penchikala Naga Pavani	B-Pharm	M.Pharmacy, Pharmacology	Shri Vishnu College of Pharmacy


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42.	Pidugu Venkata Ravi Kiran	B-Pharm	M.S. Pharmaceutical Engineering & Technology	Indian Institute of Technology
43.	Podili Runesh	B-Pharm	M.Pharmacy, Medicinal Chemistry	NIPER, Guwahati
44.	Powduri Tharun	B-Pharm	Masters in Information Science/studies	University of North Texas
45.	Punugupati Roja	B-Pharm	M.Pharmacy, Pharmaceutical Analysis	Vignan Institute of Pharmacy
46.	Susmith Manindra Kunduru	B-Pharm	M.Pharmacy, Pharmaceutics	Manipal Academy of Higher Education
47.	Tabeti Ratna Deepika	B-Pharm	M.Pharmacy, Pharmaceutical Analysis	Sri Padmavathi School of Pharmacy
48.	Uppalapati Karthik	B-Pharm	Masters in Healthcare Administration	SAULT College, Canada
49.	Vaseemunnisa Mohammad	B-Pharm	M.Pharmacy, Pharmaceutical Chemistry	KVSR Siddhartha College of Pharmaceutical Sciences
50.	Vemuri Lakshmi Poojitha	B-Pharm	M.Pharmacy, Drug Regulatory Affairs	AU College of Pharmaceutical Sciences
51.	Vemuri Rupa Sree Devi	B-Pharm	M.Pharmacy, Pharmaceutics	KVSR Siddhartha College of Pharmaceutical Sciences

Signature of Training & Placement Officer



Signature of the Principal

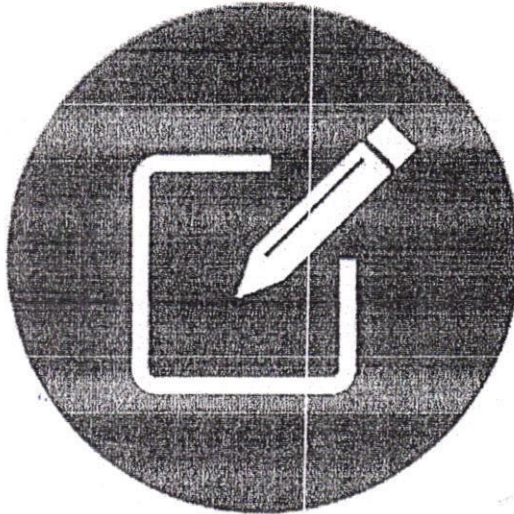
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Episource Joining Confirmation

- 15th November 2021 Inbox



Rajesh Sunkara 11 Nov
to Rajesh ▾



Dear All,

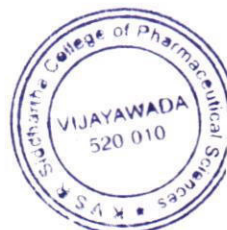
We are excited to welcome you to the Episource Family.

Please read through this mail for details about your joining date, time and venue details.

JOINING

Date of Joining	15 th November 2021 (Monday)
Reporting Time	09:30 AM
Office Address for Reporting	Episource India Pvt. Ltd., #54-15-5A, Lakshmi Avenue, 3rd floor Srinivasa Nagar Bank Colony Vijayawada, Andhra Pradesh – 520008 Phone no.: 0866-6683223 Mobile no.: 9840271078/ 7842119653 Landmark: Sweet Magic restaurant, Mahanadu road
Dress Code	Business Casuals
Point of Contact	Rajesh

Rajesh
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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



15

V16 BPH-09

Date:17.03.2020,

To,
Mr. Akumalla Khan Babu
S/o Badhulla
HNO :Block No:5FF-6,
LandMark : JNNURM Colony,
Post : Jakkampudi,
Mandal : Vijayawada Rural,
District : KRISHNA-520012.

V16 BPH-09


Sub : Letter for Training

We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in Production Department, at Unit-1, situated at Lingo jigudem Village , Choutuppal Mandal , Yadadri Bhuvanagiri District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisonal certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization,depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules,regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act,1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

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10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.S.C, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining.

We take this opportunity to welcome you to the organization and wish you good luck.

Yours sincerely,

For DIVI'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)

(Handwritten Signature)
PRINCIPAL
E.V.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
KHAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingojjudem - Autos available.

☎ :08694-257001



(Faint stamp)
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PHARMACEUTICAL SCIENCES
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.....44113.....



Naveen Babu Kilaru <naveenbabukilaru@gmail.com>

416 BPK

Fwd: Employment Intiamtion

1 message

khan babu <khanbabuakumalla@gmail.com>
To: naveenbabukilaru@gmail.com

Thu, May 21, 2020 at 2:17 PM

----- Forwarded message -----

From: **Veerabhadram N** <nvbhadram@divislabs.com>

Date: Sat, 18 Apr, 2020, 2:31 PM

Subject: Employment Intiamtion

To: khanbabuakumalla@gmail.com <khanbabuakumalla@gmail.com>

Cc: Sree Divya Sajja <divya.sajja@divislabs.com>, Srinivas P&A <srinivas@divislabs.com>, Siva Prasad Kari /P&A/U1 <sivap@divislabs.com>, Chilukuri Veeraiah/P&A/U1 <CVE1909@divislabs.com>

Dear Mr. AkumallaKhan Babu,

Greetings from Divi's Laboratories Limited !

We hope you are doing good and taking all necessary precautions to battle the current emergency situation prevailing nation-wide due to COVID-19.

We would like to inform you that you have been selected for employment with us and we look forward to having you join us at the earliest.

Keeping in mind the current situations, we shall post you your appointment letters soon as the postal services resume their full operations.

We will review the state-wide and nation-wide situations soon after the lockdown is lifted and confirm you your joining date through emails and telephone calls.

Please note that you can join us ONLY after we give you an official joining intimation.

Until then, please be indoors , stay safe and healthy !

Best Regards,

For Divi's Laboratories Limited

K. Subba Rao

General Manager - Personnel & Administration



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Ms. Chakka Durga Pravallika

LETTER OF OFFER

19-20 passed out

Dear Pravallika,

With reference to the discussions you had with us, we are very pleased to offer you an appointment in our organization

as "Trainee-Research Associate"

Details of the terms and conditions of offer are as under:

1. Your date of commencement of Employment will be on or before 15th February 2021.
2. Your joining location will be Wissen Infotech Bangalore. However your services can be transferred/ deputed to any other Intra-client location depending upon the Project requirements. Also because of the current COVID situation all your joining formalities will be done remotely.
3. Your annual salary (CTC) will be Rs 2,20,000/- The breakup of salary is attached here with as in Annexure - A.
4. Your employment with us will be governed by Terms & Conditions referred in Annexure - B.
5. Please submit all the listed documents mentioned in Annexure - C on the day of your joining online. However you need to submit all the originals for verification once we resume our operations from our office.
6. You are requested to report at our office situated at Wissen Bangalore, Adarsh Leo Place, 4th Floor, No 176 KIADB, IPIP 2nd Phase, Whitefield, Bangalore - 560 085 once we resume our operations.
7. This Employment stands valid initially for a period of one year however it can be extended based on client's approval of your performance.
8. As a token of your acceptance of this offer, you are requested to sign on the copy of the offer and confirm by return email.

In case of further clarifications, please communicate with Ms. Smitha Nair (email: 'smitha.nair@wisseninfotech.com')

We welcome you to Wissen and look forward to a long and mutual beneficial relationship.

With Best Wishes
For Wissen Infotech Pvt Ltd

M. Shilpa

Silpa Moola
Manager - Talent Acquisition

Encl. : Annexure - A (Salary Structure)
Annexure - B (Terms & Conditions of Employment)
Annexure - C (Check list of Documents to be submitted)

[Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Corporate Office
04, 9th Floor
Cyber Towers, H.No 135
Shilpama, Madhavai
Telangana - 500 081
India Tel: 01-45-6823300

U.S. Office
20, Parkside Dr. Suite 20
Basking Ridge, NJ 07005, USA
Tel: 201-221-2200

Bangalore Office
Adarsh Leo Place
4th Floor, No. 176
IPIP 2nd Phase, Whitefield
560 085 - Bangalore
India Tel: 01-10-45-6823300

www.wissen.com

WISSEN *W*
KNOWLEDGE . INSIGHT . ACTION

ANNEXURE-A COST TO COMPANY(CTC)	
EMP Name Chakka Durga Pravallika	
Designation Trainee - Research Associate	
Monthly Components (In Rs.)	
Basic Salary	9,167

14
Y16 BPH-22

Y16 BPH-22

Date:17.03.2020.

To.
Mr. Damarla Phanideep Naidu
S/o Srinivasa Rao
HNO :3-137,
LandMark : Kummari Bazar, Opp. Vishnupuram Colony,
City/Village : Poranki,
Post : Penamaluru,
Mandal : Penamaluru,
District : KRISHNA-521137.

Sub : Letter for Training

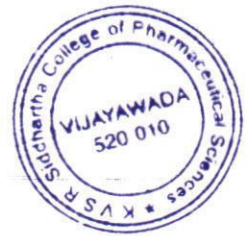
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in Production Department, at Unit-1, situated at Lingojigudem Village , Choutuppal Mandal , Yadadri Bhuvanagiri District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your 3.Pharmacy provisonal certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization,depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules,regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act,1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44174.....


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining.


We take this opportunity to welcome you to the organization and wish you good luck.

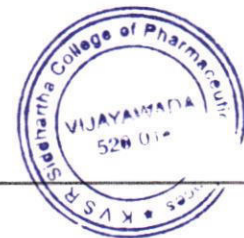
Yours sincerely,

For DIVI'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

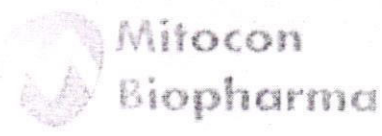
Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingo jigudem - Autos available.

☎:08694-257001

Y16BPH-24
Y16BPH-24



Mitocon Biopharma Pvt Ltd

First Floor, Vasant Towers,
Begumpet, Hyderabad 500016,
Telangana, India.
Contact : 040-48583855
Email : hr@mitoconbiopharma.com
Website : www.mitoconbiopharma.com

Ref Letter no.: MBPL/2019/0001

Date: 18 NOV 2020

OFFER LETTER

Dear Mr. Venkat Hari Kumar Desu,

With reference to your application, the management is pleased to offer you the Designation as Drug Safety Associate-I in Cadre O-1 with MITOCON BIOPHARMA PVT LTD.

As discussed, your cost to company will be as per the agreed terms and conditions i.e. INR 1,81,200/- (One Lakh Eighty One Thousand Two Hundred Rupees only) P.A. A formal "Appointment Letter" detailing the break-up of CTC will be issued on the Date of Joining.

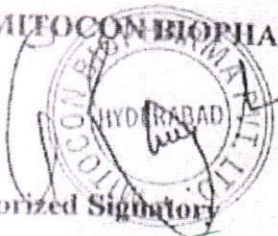
You are requested to report at below mentioned corporate office on or before DOJ i.e. 18 NOV 2020.

Reporting Address:
H. No: 1-11-251/1B
First floor, Vasant Towers, Begumpet,
Hyderabad-500016

We look forward for a mutually beneficial association with you.

Thanking you,

For MITOCON BIOPHARMA PVT LTD.



Authorized Signatory

[Handwritten Signature]

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 020.



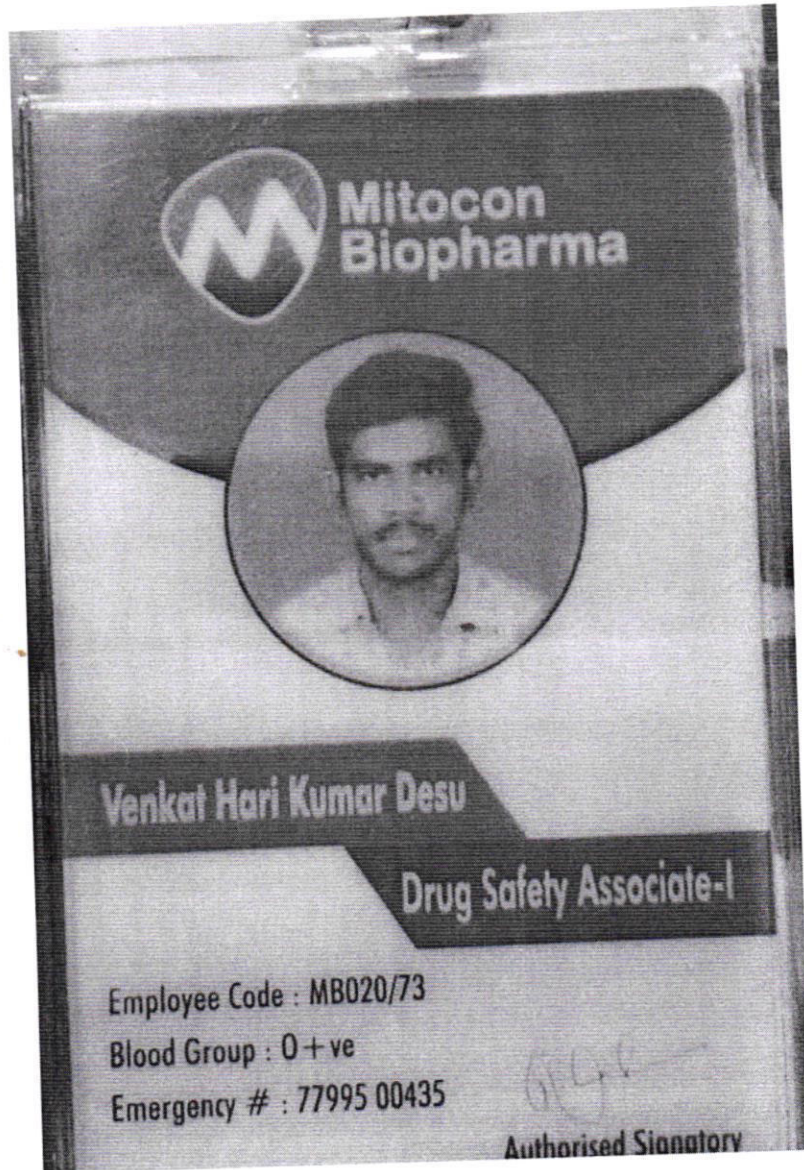
Name: Desu Venkat Hari Kumar


Signature: *[Handwritten Signature]*

Mitocon
v. dasu hari kumar

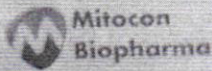
(24)

Y16BP1124




PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





Mitocon Biopharma Pvt Ltd

First Floor Vasant Towers,
Begumpet Hyderabad 500016
Telangana, India
Contact: 040-46673554
Email: hr@mitoconbiopharma.com
Website: www.mitoconbiopharma.com

Ref Letter no.: MBPL/2019/0001
Date: 18 NOV 2020

OFFER LETTER

Dear Mr. Venkat Hari Kumar Desu,

With reference to your application, the management is pleased to offer you the **Designation as Drug Safety Associate-I in Cadre O-I with MITOCON BIOPHARMA PVT LTD.**

As discussed, your cost to company will be as per the agreed terms and conditions i.e. INR. 1,81,200/- (One Lakh Eighty One Thousand Two Hundred Rupees only) P.A. A formal "Appointment Letter" detailing the break-up of CTC will be issued on the Date of Joining.

You are requested to report at below mentioned corporate office on or before **DOJ i.e. 18 NOV 2020.**

Reporting Address:
H. No: 1-11-251/1B
First floor, Vasant Towers, Begumpet,
Hyderabad-500016

We look forward for a mutually beneficial association with you.


Thanking you,

For MITOCON BIOPHARMA PVT LTD.

Name: Desu venkat Hari Kumar

Authorized Signatory

Signature: D.V. Hari Kumar


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





Arene Lifesciences
Limited

3 - 58, S R Chambers, Ramachandrapuram
Hyderabad - 502 032, Telangana, India.
Tel : + 91 8455 - 241148, 285730, 244489
E-mail: info@arenelife.com
CIN : U24239TG2004PLCO44199

G. Akhil

31

Y16BPH31

10 Feb, 2021

Ref: Off HR/Rec/Feb 21

CONFIDENTIAL

G Akhil,
Hyderabad

Dear G Akhil,

Sub: Letter of Offer

This has reference to your application form and the discussions we had with you, we are pleased to offer you the position of **Trainee in A R&D Department** of our organization on the following terms & conditions:

1. We are pleased to offer you the employment with us for the same position as mutually agreed terms and conditions in interview.
2. You will be posted at **Arene R&D, Ramachandrapuram.**
3. A formal letter of appointment will be issued at the time of joining.
4. You will be governed by the Rules & Regulations of the company that will be in force from time to time.
5. You are required to sign a separate confidentially agreement with the company, which will form part of this appointment letter.
6. You are requested to undergo pre-employment medical check-up, which will be conducted either by the company or by an individual. **This offer of appointment is subject to your medical fitness.**
7. The Probationary Period of the Company shall be Six (6) Months and the Company reserves the right to extend the probationary period at its sole discretion. During the end of the period of probation or any extension thereof, employment may be terminated at any time by either party giving to the other party one month(1) notice without assigning any reasons whatsoever.
8. You may be deputed to **SR Group of companies** (Arene Units, SR Drugs, Surabi, AVR Organics, etc.) during your probation period depending on the organization needs.
9. You are requested to bring the photocopies of the following documents for submission and originals of the same for verification at the time of reporting for duty at Corporate Office:
 - a. Proof of date of birth / SSLC / HSC certificate stating date of birth.
 - b. Education Qualification Certificates
 - c. Relieving letter from the previous employer and all experience certificates
 - d. Form No 16 from previous employer
 - e. Salary slips of last 2 months
 - f. Two references (from previous employer)
 - g. Passport, Driving license, Aadhar Card and PAN Card copies
 - h. Three pass port and four stamp size photographs. Stamp size photographs of dependents – Two each (dependent – parents, spouse & children)

We request you to join the organization at the earliest, however not later than **15'Feb-2021**.


Kindly sign the duplicate copy of this offer as an acceptance and confirm the date by which you will be joining the organization. We look forward to having you in our team.


Please confirm your acceptance on or before Feb'12, 2021 otherwise your offer would stand void.

Thanking you,

Yours faithfully,

For Arene Lifesciences Ltd,


M Sreetarama Rao
General Manager-HR


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VAYAWADA-520 010.





Naveen Babu Kilaru <naveenbabukilaru@gmail.com>

Fwd: Report for Training

2 messages

Poojitha Pooje <poojithapooje@gmail.com>
To: naveenbabukilaru@gmail.com

Thu, May 21, 2020 at 11:58 AM

----- Forwarded message -----

From: **Veerabhadram N** <nvbhadram@divislabs.com>
Date: Wed, May 20, 2020, 11:46 AM
Subject: Report for Training
To: poojithapooje@gmail.com <poojithapooje@gmail.com>
Cc: Sree Divya Sajja <divya.sajja@divislabs.com>

Dear Ms. KatruPoojitha,

Greetings from Divi's Laboratories Limited!

Hope you are doing well and taking all necessary precautions to battle the current emergency situation due to COVID-19.

In continuances of our earlier mails, you may report for training immediately along with appointment letter, which has sent earlier to you in mail / Post.

Awaiting to see you at our manufacturing facility.

Best Regards,

For Divi's Laboratories Limited

K. Subba Rao

General Manager - Personnel & Administration

M/s Divis Laboratories Limited,

Gachibowli, Hyderabad-500032,

Telangana, India.

040-66966400.


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



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Naveen Babu Kilaru <naveenbabukilaru@gmail.com>
To: Poojitha Pooje <poojithapooje@gmail.com>

Fri, Jun 12, 2020 at 11:27 AM

3/15/2021

Gmail - Fwd: Report for Training

Dear Poojitha
Please send the scanned copy of your offer letter
With Best Wishes
Naveen Babu Kilaru

[Quoted text hidden]

--

NAVEEN BABU KILARU
PROFESSOR
KVSR SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES

Divi's K. Sindhu Priya

Date: 17.03.2020,

To,
Miss. Kurra Sindhu Priya
D/o Srinivasa Rao
HNO : 1-82,
City/Village : Chinnabadi,
Post : Appikatla,
Mandal : Bapatla,
District : GUNTUR-522310.

47

YIB BPHG

Sub : Letter for Training

We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in QC Department, at Unit-1, situated at Lingojugudem Village , Choutuppal Mandal , Yadadri Bhuvanagiri District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisonal certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization, depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules, regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act, 1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44156.....

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
WADDA-520 010



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining.

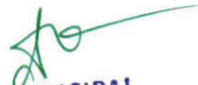
We take this opportunity to welcome you to the organization and wish you good luck.

Yours sincerely,

For DIVI 'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)


PRINCIPAL
K.V.S.R. SIDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingojigudem - Autos available.

 :08694-257001



Divi's Laboratories Limited-DC SEZ

Lingojigudem(Village), Choutuppal(M), Yadadri-Bhuvanagiri(CDist) - 508 252
Telangana (State), Tel-(08664) 257031

Form - K (See Rule 70)

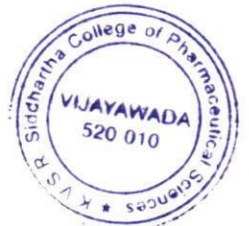


Name : K Sindhu Priya
 Emp.No. : T24470
 Department : QC
 Date of Issue : 02.11.2020
 Valid Upto : 10.06.2021
 Blood Group : B+VE

Authorized Officer (SEZ)

Head of the Depart.

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Date:17.03.2020,

To,
Mr. Mohammed Nizamuddin
S/o Shakeel
HNO :78-7-483/1,
City/Village : Lalapet,
Mandal : Guntur,
District : GUNTUR-522003.

Sub : Letter for Training

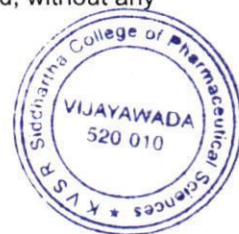
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in Production Department, at Unit-2, situated at Chippada Village, Bhemmuniapatnam Mandal, Visakhapatnam District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisional certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization,depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules,regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act,1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44170.....

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-52



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining .

We take this opportunity to welcome you to the organization and wish you good luck.

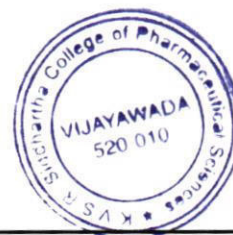
Yours sincerely,

For DIVI 'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)

(Handwritten Signature)
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Vizag to Tagarapualasa - Bus available. Tagarapualasa to Chippada - Autos available.

:08922 248917/927

Date:17.03.2020,

To,
Miss. Narayanam Ooha Seshasai
D/o Venkata Muralidhar
HNO :54-16-1/37, Flat No 49,
LandMark : Street No-2, Veterinary Colony,
City/Village : vijayawada,
Mandal : Vijayawada,
District : KRISHNA-520008.

Sub : Letter for Training

We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in Production Department, at Unit-1, situated at Lingojigudem Village , Choutuppall Mandal , Yadadri Bhuvanagiri District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisonal certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization,depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules,regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act,1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44188.....


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining .


We take this opportunity to welcome you to the organization and wish you good luck.

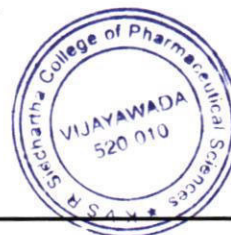
Yours sincerely,

For DIVI'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingo jigudem - Autos available.

 :08694-257001

Y16 BPH 58

Date:17.03.2020,

To,

Miss. Nunna Navya Sree Sai

D/o Papa Rao

HNO :AF-4, City Towers,

LandMark : Road No:2, Gazzitted Officers colony,

City/Village : Gurunanak Colony,

Mandal : Vijayawada,

District : KRISHNA-520010.


Sub : Letter for Training

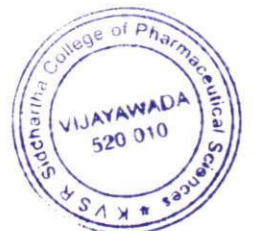
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in QC Department, at Unit-1, situated at Lingojigudem Village , Choutuppal Mandal , Yadadri Bhuvanagiri District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisional certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization, depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules, regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act,1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44133.....


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



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11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining.


We take this opportunity to welcome you to the organization and wish you good luck.

Yours sincerely,

For DIVI 'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingojigudem - Autos available.

☎:08694-257001

416Bph



Divi's Laboratories Ltd.

Factory : Lingojigudem (V)
Choutuppal (M), Yadadri-Bhuvanagiri (Dt.)
Telangana State - 508 252
Tel : (08694) 257001.



NAME : N.NAVYA SRISAI
I.D. No. : D.O.J. 16/06/2020
Dept. **Q.C**
[Signature]
Personnel Dept. *[Signature]* Dept. Incharge

PRINCIPAL
KMS.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010

31
Y16BPH163

Y16BPH163

Date:17.03.2020,

To,
Miss. Talasila Pavani
D/o T B Purna Chandra Rao
HNO : 31-17-6, 1-B, Sri Surya Residency,
LandMark : Kutumbarao Street,
City/Village : Machavaram Down,
Mandal : Vijayawada,
District : KRISHNA-520004.


Sub : Letter for Training

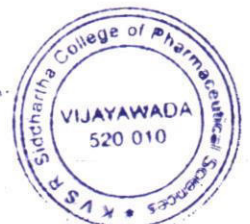
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in QC Department, at Unit-2, situated at Chippada Village, Bhemunipatnam Mandal, Visakhapatnam District on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.15000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisonal certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to underç o periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
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9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44160.....


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520010



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
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 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
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We take this opportunity to welcome you to the organization and wish you good luck.

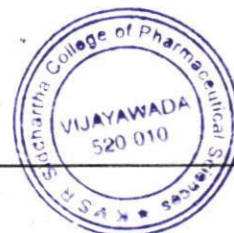
Yours sincerely,

For DIVI'S LABORATORIES LTD


K.SUBBA RAO

GENERAL MANAGER (P&A)


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Vizag to Tagarapavalasa - Bus available. Tagarapavalasa to Chippada - Autos available.

☎ : 08922 248917/927

.....44160.....





Naveen Babu Kilaru <naveenbabukilaru@gmail.com>

Y 16 BPA

Fwd: Report for Training

1 message

Thu, May 21, 2020 at 2:11 PM

pavani talasila <pavanitalasila98@gmail.com>
To: "naveenbabukilaru@gmail.com" <naveenbabukilaru@gmail.com>

----- Forwarded message -----

From: **Veerabhadram N** <nvbhadram@divislabs.com>
Date: Wed, 20 May 2020 at 11:46 AM
Subject: Report for Training
To: pavanitalasila98@gmail.com <pavanitalasila98@gmail.com>
Cc: Sree Divya Sajja <divya.sajja@divislabs.com>

Dear Ms. TalasilaPavani,

Greetings from Divi's Laboratories Limited!

Hope you are doing well and taking all necessary precautions to battle the current emergency situation due to COVID-19.

In continuances of our earlier mails, you may report for training immediately along with appointment letter, which has sent earlier to you in mail / Post.

Awaiting to see you at our manufacturing facility.

Best Regards,

For Divi's Laboratories Limited

K. Subba Rao

General Manager - Personnel & Administration

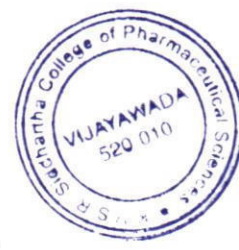
M/s Divis Laboratories Limited,

Gachibowli, Hyderabad-500032,

Telangana, India.

040-66966400.

(Handwritten signature)
**PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.**



DISCLAIMER: Privileged/Confidential Information may be contained in this message and is intended only for the use of the addressee. Any use, distribution, printing, retransmission, dissemination, copying, disclosure or other use of this email by any other person is strictly prohibited and may be illegal. If you receive this message in error, please delete the message and notify the sender(Divis labs) immediately by reply Email. The sender does not accept liability for any data corruption, interception, unauthorized amendment, viruses, delays or the consequences thereof.

Date: 01/Feb/2021
Ref.: APL/ UNIT/HR/Appointment/2020

To
Ms SURAYYA ZABEEN

Dear Ms SURAYYA ZABEEN

Appointment Order

With reference to your application, interview you had with us and our subsequent offer letter dated 28 Jan 2021 we have pleasure in appointing you for the position of **Trainee in Quality Control_UNIT - IV** in our company on the following terms and conditions.

1. This appointment is subject to all other terms and conditions mentioned in your offer letter dated 28 Jan 2021.
2. The place of the posting will be at our Aurobindo Pharma Limited, Unit IV, Plot No.4 in Sy. No.151 and Plot Nos.34 to 48 in Sy. Nos. part of 146, 150, 151, 152, 153 and 154 situated in Phase III, APIIC, EPIP, IDA, Pashamylaram, Patancheru Revenue Mandal, Medak District 502 307, Telangana.
3. **In addition to the CTC.** You are also eligible for following benefits (which has not been costed)
 - a) Coverage under Group Mediclaim policy (Self & Dependents-(Spouse, parents and two children) Maximum 6 people including self. 50% of premium is born by employee and remaining 50% is payable by the company)
 - b) ESI coverage for employees whose gross salary is less than or equal to Rs. 21000
 - c) Coverage under Group Personal Accident Policy.
 - d) Gratuity as per the provision of Gratuity Act, 1972.

You are required to return the copy of this letter of appointment duly signed by you as a taken of your acceptance of all the terms and conditions.

Wishing you a happy rewarding career with us.

For AUROBINDO PHARMA LIMITED

K. Nagesh

K. NAGESH
SENIOR GENERAL MANAGER-HUMAN RESOURCES

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



DECLARATION BY THE EMPLOYEE

I accept the offer and appointment along with all the terms and conditions mentioned

Date:

Signature of the Employee:

(CIN : L24239TG1986PLC015190)

AUROBINDO PHARMA LIMITED

PAN No AA9CA7366H

Corp. off. The Water Mark Building, Plot No. 11, Survey No. 9, Hitech City, Hyderabad. 500 091 T.S., INDIA. Tel. +91 40 6572 5000-1200 Fax. +91 40 6572 5001
Regd. off. Plot No. 2, Madhavarao, Amberpet, Hyderabad. 500 039 T.S., INDIA. Tel. +91 40 2373 6370 Fax. +91 40 2374 7340 Email. info@aurobindo.com

Note: This is system generated Appointment Letter and do not require Authorized signature

Date: 01/Feb/2021
Ref.: APL/ UNIT/HR/Appointment/2020

To
Ms T. JASMINE

Dear Ms T. JASMINE

Appointment Order

With reference to your application, interview you had with us and our subsequent offer letter dated 22 Jan 2021 we have pleasure in appointing you for the position of **Trainee in Quality Control_UNIT - IV** in our company on the following terms and conditions.

1. This appointment is subject to all other terms and conditions mentioned in your offer letter dated 22 Jan 2021.
2. The place of the posting will be at our Aurobindo Pharma Limited, UnitIV, Plot No.4 in Sy. No.151 and Plot Nos.34 to 48 in Sy. Nos. part of 146, 150, 151, 152, 153 and 154 situated in Phase III, APIIC, EPIP, IDA, Pashamylaram, Patancheru Revenue Mandal, Medak District 502 307, Telangana.
3. **In addition to the CTC.** You are also eligible for following benefits (which has not been costed)
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 - d) Gratuity as per the provision of Gratuity Act, 1972.

You are required to return the copy of this letter of appointment duly signed by you as a taken of your acceptance of all the terms and conditions.

Wishing you a happy rewarding career with us.

For AUROBINDO PHARMA LIMITED

K. Nagesh

K. NAGESH
SENIOR GENERAL MANAGER-HUMAN RESOURCES

T. Jasmine
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



DECLARATION BY THE EMPLOYEE

I accept the offer and appointment along with all the terms and conditions mentioned

Date: 01-2-21

Signature of the Employee: *T. Jasmine*

(CIN : L24239TG1986PLC015190)

AUROBINDO PHARMA LIMITED

PAN No. AABCA7366H

Corp off.: The Water Mark Building, Plot No 11, Survey No 9, Hi-Tech City, Kondapur, Hyderabad 500 084 T.S., INDIA Tel.: +91 40 8872 5000 / 1200 Fax: +91 40 8707 4059
Regd. off.: Plot No 2, Madhavaram, Arrempet, Hyderabad 500 038 T.S., INDIA Tel.: +91 40 2373 8370 Fax: +91 40 2374 7340 Email: info@aurobindo.com

www.aurobindo.com

Note: This is system generated Appointment Letter and do not require Authorized signature

Date:17.03.2020,

To,
Mr. Vanka Jogendra Babu
S/o Siva Prasad
LandMark : Old Koneru Road,
City/Village : Chilakalapudi,
Mandal : Machilipatnam,
District : KRISHNA-520001.

Sub : Letter for Training

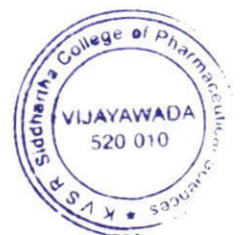
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in Production Department, at Unit-2, situated at Chippada Village, Bhemmunipatnam Mandal, Visakhapatnam District on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisonal certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



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 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
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We take this opportunity to welcome you to the organization and wish you good luck.

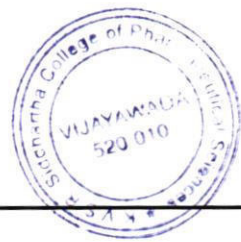
Yours sincerely,

For DIVI 'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)

(Handwritten Signature)
 PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Vizag to Tagarapuvalasa - Bus available. Tagarapuvalasa to Chippada - Autos available.

:08922 248917/927

To,
Mr. Vardhini Akash
S/o Narasimha Prasad
HNO :7-73-F3, Nagalakshmi Residency,
LandMark : President Street,
City/Village : Gollapudi,
Mandal : Vijayawada,
District : KRISHNA-521225.

Sub : Letter for Training

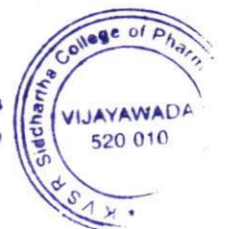
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in QA Department, at Unit-1, situated at Lingojugudem Village , Choutuppal Mandal , Yadadri Bhuvanagiri District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisonal certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization, depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules, regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act, 1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44177.....


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining .


We take this opportunity to welcome you to the organization and wish you good luck.

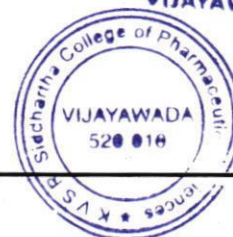
Yours sincerely,

For DIVI 'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 011



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingo jigudem - Autos available.

 :08694-257001

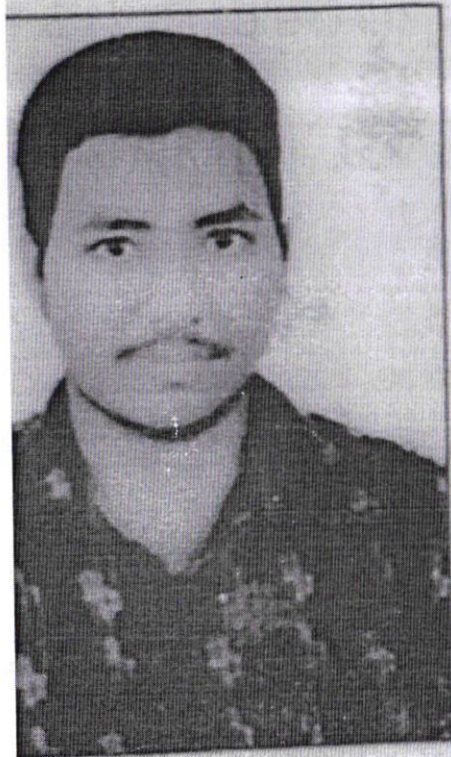
Y/16BPH/81



Divi's Laboratories Ltd.

Factory : Lingojigudem (V)
Choutuppal (M), Yadadri-Bhuvanagiri (Dt.)
Telangana State - 508 252
Tel : (08694) 257001.

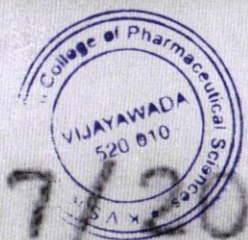
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



NAME : V. AKASH

I.D. No. : D.O.J. 06/07/2020

Dept. Q.A




[Handwritten signature]


Personnel Dept.

[Handwritten signature]


Dept. Incharge

Y16BPA 87

 **Divi's Laboratories Limited-DC SEZ**
Lingogudem(Village), Choutuppal(M), Yadadri Bhuvanagiri(Dist) -508 252
Telangana (State), Tel (08694) 257031
Form -K (See Rule 70)



Name	:	V.T.V.N.S.VISHNUPRIYA
Emp.No.	:	T24840
Department	:	BRS-1
Date of Issue	:	11/08/2020
Valid Upto	:	30/06/2021
Blood Group	:	O+ve



Authorized Officer (SEZ) Head of the Depart



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

To,
Miss. Vemuru T V N S Vishnupriya
D/o Venkata Ramana
HNO :76-5-5A,
LandMark : Balaji Home Street,
City/Village : Bhavanipuram,
Mandal : Vijayawada,
District : KRISHNA-520012.

Sub : Letter for Training

We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you , we are pleased to offer you a one-year training in Production Department, at Unit-1, situated at Lingo jigudem Village , Choutuppal Mandal , Yadadri Bhuvanagiri District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period . Your training will be terminated , if you are not found medically fit.
3. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
4. You shall be liable to be transferred/posted to any location,department & unit of the organization, depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules,regulations and other terms as applicable at such new place.
5. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
6. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
7. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act,1948.
8. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....46326.....


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



9. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
10. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
11. You shall forthwith intimate any change in your residential address as and when any change takes place.
12. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
13. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
14. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.S.C, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training in our organization on or before 20.06.2020. If you do not join the training before the stipulated date, this offer of training shall be deemed cancelled.

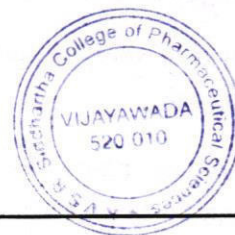
We take this opportunity to welcome you to the organization and wish you good luck.

Yours sincerely,

For DIVI 'S LABORATORIES LTD

K.SUBBA RAO
GENERAL MANAGER (P&A)

[Handwritten Signature]
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

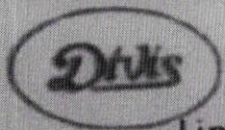
Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingojigudem - Autos available.

☎:08694-257001

YIGBph



K.M.S.R. SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Divi's Laboratories Limited-DC SEZ

Lingojigudem(Village), Choutuppal(M), Yadadri Bhuvanagiri(Dist.) -508 252
Telangana (State), Tel:(08694) 257031

Form -K (See Rule 70)



Name	:	V.T.V.N.S.VISHNUPRIYA
Emp.No.	:	T24840
Department	:	BRS-1
Date of Issue	:	11/08/2020
Valid Upto	:	30/06/2021
Blood Group	:	O+ve

Handwritten initials 'MD' with a signature line below.

Authorized Officer (SEZ)

Head of the Depart

30

Y16BPH-89

Date:17.03.2020

To,
 Mrs. Jaliparthi Venkata Alekhya
 D/o Bheema Rao
 HNO :4-111,
 City/Village : Tatakuntla,
 Mandal : Vissannapeta,
 District : KRISHNA-521215.

Sub : Letter for Training

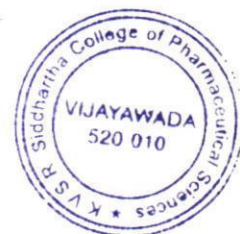
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you, we are pleased to offer you a one-year training in QC Department, at Unit-1, situated at Lingojigudem Village, Choutupal Mandal, Yadadri Bhuvanagiri District on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your B.Pharmacy provisional certificate you will be paid a stipend of Rs.16000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated, if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization, depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules, regulations and other terms as applicable at such new place.
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9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....44138.....

for
 PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
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 - a. For verification purpose, we need your original certificates of S.SC, Inter, & B.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training within a week after completion of your final year examination including practical's, provided if you cleared all the subjects in previous examinations. You may bring marks memo's as a proof of passed previous examinations at the time of joining .

We take this opportunity to welcome you to the organization and wish you good luck.

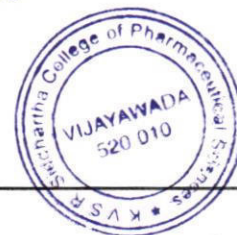
Yours sincerely,

For DIVI'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)

Handwritten signature
 PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in.

Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingo jigudem - Autos available.

:08694-257001

M16BPh



Divi's Laboratories Ltd.

Factory : Lingojigudem (V)
Choutuppal (M), Yadadri-Bhuvanagiri
Telangana State - 508 252
Tel : (08694) 257001.

PRINCIPAL
K.V.S. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VILVAWADA-500 010



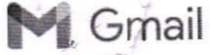
NAME : **J. VENKATA ALEKHYA**

I.D. No. : **D.O. J05/06/2020**

Dept. **Q.C**

[Signature]
Personnel Dept.

[Signature]
Dept. Incharge



List of selected candidates

2 messages

Wed, Feb 19, 2020 at 12:32 PM

Sree Divya Sajja <divya.sajja@divislabs.com>

To: "naveenbabukilaru@gmail.com" <naveenbabukilaru@gmail.com>

Cc: "Subba Rao K." <ksr@divislabs.com>, Veerabhadram N <nvbhadram@divislabs.com>, Rajesh S- P&A <s.rajesh@divislabs.com>, Chilukuri Veeraiah/P&A/U1 <CVE1909@divislabs.com>, Siva Prasad Kari /P&A/U1 <sivap@divislabs.com>

To

The Principal/Placement Coordinator,

KVSR Siddhartha Pharmacy College,

Vijayawada, Krishna District.

Dear Mr. Naveen,

Greetings from Divi's Laboratories Limited !

Please accept our sincere thanks for providing an opportunity to drive campus recruitments at your esteemed college on 25 January 2020.

We are now glad to inform you that the following candidates from your college have been selected for employment with our organization

The appointment letters will be sent to their individual addresses and email ids mentioned in their resumes and you may please inform the same to them.

Also, please be informed that we are processing the rest of the candidates and shall revert soon with details.

We congratulate everyone and welcome them to our World Class API manufacturing facilities.

SNo	Name of the candidate	Gender	Department	Location
1	Meda Sravya	F	QC	U1
2	I Pavani	M	Production	U1
3	Siddharthan Amrutharaj	M	Production	U2
4	Kadimela Allauddin Raju	M	Production	U1
5	Gannavarapu Rohit	M	Production	U2
6	Kunduru Susmith Maninora	M	Production	U2
7	Kolli Suhas Reddy	M	Production	U2
8	Vanka Jogendra Babu	M	Production	U2
9	Yandam Tagore Avinash	M	Production	U2
10	Garikipati Sai Teja	M	Production	U2
11	Murapala Vivek	M	Production	U2
12	Bommareddy Haneesh Reddy	M	Production	U1
13	Komarala Narendra Babu	M	Production	U1
14	Akumalla Khan Babu	M	Production	U1
15	K Sai Srikar	M	Production	U1
16	Boddu Meher Ravindranath	M	QC	U2

ofes
 PRINCIPLE
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.

17	Kambhampati Rohit	M	QC	U2
18	Jaṣṭi Ganesh Kumar	M	QC	U1
19	Vardhini Akash	M	QA	U1
20	Damarla Phanideep Naidu	M	Production	U1
21	Desu Venkat Hari Kumar	M	Production	U1
22	Chanumolu Harsha Sai	M	QC	U1
23	A Naga Abhinav	M	Production	U2
24	Mohammad Nizamuddin	M	Production	U2
25	Gouru Akhil	M	Production	U2
26	N.Navya Sree Sai	F	QC	U1
27	Jaliparthi Venkata Alekhya	F	QC	U1
28	Kurra Sindhu Priya	F	QC	U1
29	K.Poojitha	F	QC	U2
30	Mallenane Bhagya Lakshmi	F	QC	U2
31	Pavani Talasila	F	QC	U2
32	Gullapalli Yamini	F	QC	U2
33	V.Rupa Sree devi	F	QC	U2
34	G.Jyotsna Rani	F	QC	U1
35	Rayaprolu Lakuma	F	QC	U2
36	Patiballa Venkata Naga Sai Bindu Madhavi	F	Production	U2
37	Vaseemunnisa Mohammad	F	Production	U2
38	Narayanam Ooha Sesha Sai	F	Production	U1

Please note : Our manufacturing facilities, Unit 1 and 2 are situated at Lingojigudem Village, Choutuppal Mandal, Yadadri Bhuvanagiri District, Telangana-508252 and at Chippada Village, Annavaram Post, Bheemunipatnam Mandal, Visakhapatnam District, Andhra Pradesh - 531162 respectively.

Best Regards,

For Divi's Laboratories Limited

K. Subba Rao

General Manager - Personnel & Administration

Regards,

Divya

Sree Divya Sajja | HR Department

<https://mail.google.com/mail/u/0/?ik=2ffbc1fea1&view=pt&search=all&permthid=thread-f:1658947622524143253&simpl=msg-f:165894762252414...> 2/3

Handwritten signature
 FOUNDRY
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.

6/12/23, 3:19 PM

Gmail - List of selected candidates

Divi's Laboratories Limited | Hyderabad, India

Tel: +91-40-66966493 | Fax: +91-40-23786460

www.divislabs.com


DISCLAIMER: Privileged/Confidential Information may be contained in this message and is intended only for the use of the addressee. Any use, distribution, printing, retransmission, dissemination, copying, disclosure or other use of this email by any other person is strictly prohibited and may be illegal. If you receive this message in error, please delete the message and notify the sender (Divis labs) immediately by reply Email. The sender does not accept liability for any data corruption, interception, unauthorized amendment, viruses, delays or the consequences thereof.

Naveen Babu Kilaru <naveenbabukilaru@gmail.com>
To: Ravindra Pingili <ravindra.pingili@gmail.com>

Tue, Nov 10, 2020 at 11:04 AM

[Quoted text hidden]

—
NAVEEN BABU KILARU
PROFESSOR
KVSR SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

1. y14 phd140001

pharm.D (2014-20)

ROYAL HOSPITALS

33-25-45 Kasturibaipet, Vijayawada - 10

Ph: 0866 - 2441778, 2441779



NAME : J.INDRAJA

DESIGNATION : Duty Doctor

BLOOD GROUP : A+ ve

EMERGENCY NO : 7032274601

G. S. Sridhar
Chairman

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





Croissance™

Pharmaceutical Research



Chandana Sri. K

Biostatistics

Employee ID: 280

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



2. y14phd140002

pharm.D 2014-20

2:07 PM



On Wed, 25 Aug, 2021, 4:24 PM Nargis Jahan,
<hr@croissancecr.com> wrote:

Dear **Chandana Sri**,

Congratulations !!!

Subsequent to the Telephonic interview that you had with us. We are happy to confirm and offer you **internship for Statistical Analysis Programmer** at **Croissance Clinical Research**. The detailed Appointment letter will be issued to you on joining and on submission of all required documents.

Your Joining date is On Monday, 30th Aug 2021.

Reporting Time : 9 AM Sharp.

Contact Person : Rahula .P

We once again wish you all the best and welcome you on board. Kindly submit the following documents for our records.

- Copies of Educational Certificates of two highest education qualifications
- Relieving or experience letters from previous employers
- Copies of Photo ID and address proof
- 02 passport Size photos + Soft copy
- Any other training certificates

Kindly acknowledged within 24 hours with a reply email as a token of your acceptance for us to


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Sri Alan Chong Teron, I.F.S.,
Divisional Forest Officer

4) Y14PHD140004 (2019-20)

// NOTICE //

** ** *

Sub: -Establishment-Forest Department-Direct Recruitment-Filling of Forest Beat Officers posts in the Atmakur Wildlife Management Division - Produce original certificates and documents - Notice issued - Regarding.

Ref: - PCCF (HoFF) AP Guntur Rc.no. 701/2014/HR1, Dated. 27-09-2021.

** ** *

The following individuals are hereby informed that, as per the information furnished by the Andhra Pradesh Public Service Commission, Vijayawada you are selected to the category of Forest Beat Officer and allotted to Atmakur Wildlife Management Division, Project Tiger Circle, Srisaillam.

Hence, they are hereby directed to produce all the following original documents to this office for verification.

- 1) Academic Qualifications : - Intermediate
- 2) Age : - S.S.C. Certificate
- 3) Study Certificates : - IVth Class to Xth Class.
- 4) Others :- Produce if any other relevant documents available

All the above originals Certificates should be produced prior to **12-10-2021** to this office on any working day.

PRINCIPAL

K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010

Sd/-Alan Chong Teron,
Divisional Forest Officer,
Wildlife Management, Atmakur.

// By.R.P.A.D. //

To

- 1) Sri Singam Mallikarjuna Reddy, H. No.3-54, C. Suddapalli(VII), Peddamudium, Kadapa District, AP, 516634.
- 2) Ronaki Balaji, H.No.10-325, Siva Sankar Colony, Pathapatnam, Srikakulam District, AP, 532213.
- 3) Syed Karim, H.no.87/1103-P-671-B, Forth Circle Employees Colony, Ganesh Nagar-2, Kurnool District, AP, 518002.
- 4) Madabhushi Krishnakanth, H.No.2-47/31, Appalarao Street, Atmakur(MDL), Kurnool District, AP, 518422.
- 5) C. Raghavendra Reddy, H.NO. 11-199Reddy Street, Veldurthi(MDL), Kurnool District, AP, 218216.
- 6) Patra Sreeramulu, H.No.1-44,P.R. Palli(V), Peapully(MDL), Kurnool District, AP, 518221.
- 7) Shaik Ismail, H.NO. 3-50, Somapuram, Korrapoluru (VIL), Gadivemula (MDL), Kurnool District, AP. 518508.
- 8) Jana Naresh, H.NO.7-41, Konda Veedhi, DevanaKonda (VIL & MDL), Kurnool District, AP 518465.
- 9) Parumanchala Salam Ailla, H.NO. Totaveedhi, Orvakal (Post & MDL), Kurnool, District, AP.518010.
- 10) Kuruva Shankar, H.NO. 2-39/A Pandipadu (V) Kallur (M) Kurnool District AP-518003
- 11) Chowtapalle Pamuleti, H.No.4-112, Gollapeta, Gajulapalli(V), Mahanandi (M) Kurnool District AP 518583

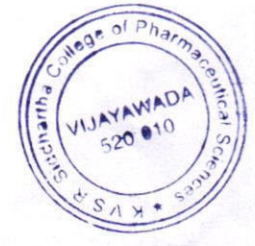
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ARUN KIDNEY CENTRE

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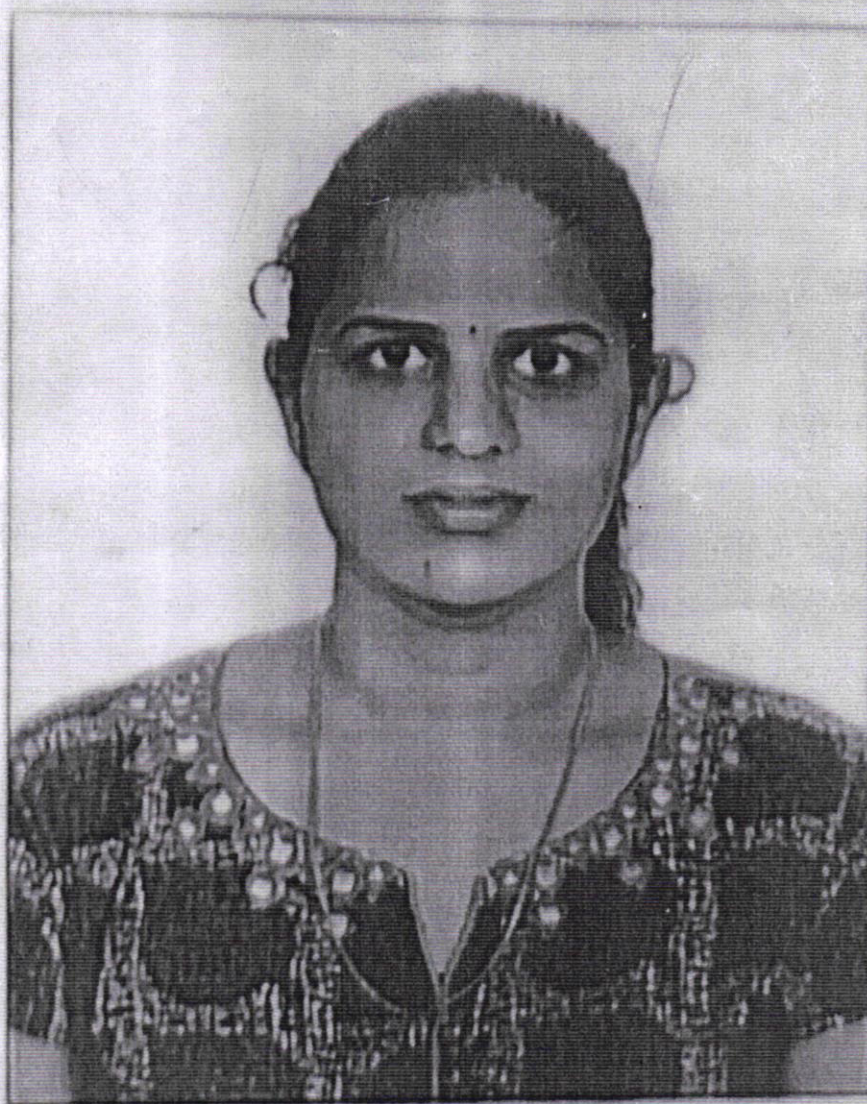
BOLLA BHAVANI

DUTY DOCTOR

ID : AKC001199422
Blood : B⁺ve
D.O.B. : 15-06-1995

12) NYU PHD140013 (14-20)

HCL

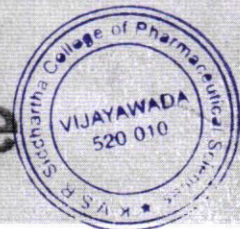


Geda Doli Sowmya

51918042

Blood Group: B -Ve

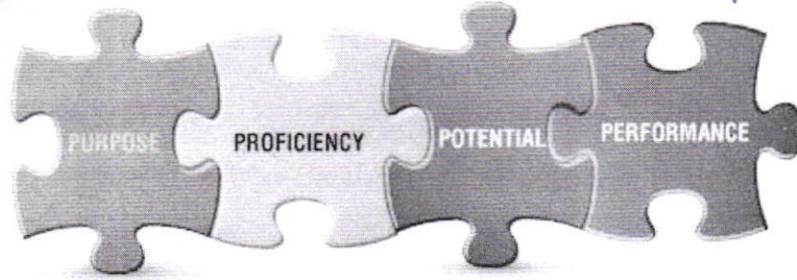
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2016-20 Pharm.D

Doli Sowmya



(13)
Rewarding
Performance

COST TO COMPANY(CTC) FOR G Doli Sowmya

Email: dolisowmya.geda@outlook.com

Band: E1

Designation: MEMBER TECHNICAL STAFF

Issued Date: Tuesday, January 5, 2021

Monthly Components (In Rs.)

Basic Salary	12875
House Rent Allowance/Company Leased Accomodation	3629
Advance Statutory Bonus	2254
TOTAL: Monthly (A)	18758
TOTAL: Monthly : Annualised (B)	225096

Annual Components (In Rs.)

Provident Fund	18540
ESIC Contribution	6437
Gratuity	7428
TOTAL: Annual : (C)	32405
COST TO COMPANY - per annum (B) + (C)	257501

\$ INSURANCE & MEDICAL BENEFITS (in Rs.)

MAX SUB-LIMITS (per annum)

Term life Insurance Cover##	2000000
Disability cover due to accident (upto)	1800000

The EDLI coverage of INR 602,000 is over & above the Term Life Insurance coverage defined above.

All personal tax liability arising out of compensation and joining expense (if any) will be borne solely by the employee.

NOTE :

All salary components are governed by the company policies and statutory guidelines.

This salary sheet is strictly confidential and must not be discussed with anyone other than your HCLT Reporting Manager

[Signature]
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OFFER & APPOINTMENT LETTER

Offer Release Date: January 5, 2021

**G Doli Sowmya
Vijayawada
Vijayawada
Vijayawada, Andhra Pradesh**

Dear G Doli Sowmya,

Congratulations! With reference to your application and subsequent interview with us for a career in our organization, we are pleased to inform you that you have been selected for employment in HCL Technologies Limited(2310) (herein referred as "HCL" or "Company") we are pleased to inform you that you have been selected for employment in our organization as **MEMBER TECHNICAL STAFF**.

In the coming year, keep aspiring for change and be known for your thoughts and your work; be the catalyst that this fast changing world needs; keep sharpening your skills and investing in yourself; and last but not the least – keep your work and life in perfect balance, because that is the prerequisite for success.

We take this opportunity to thank & appreciate your decision to join HCL. You are requested to join us on or before **January 13, 2021**.

You will be on probation for a period of **12 months** from the date of your joining. Your compensation would be as outlined in a separate document "**Salary Structure**". The general terms and conditions governing your employment are outlined in **Annexure II**.

On the date of joining, you would be required to furnish photocopies of the original documents and other listed information in **Annexure III**. Please note that the submission of all the documents is mandatory to facilitate joining, background verification / validation and appointment process at HCL. **Annexure I** provides details on the various compensation components and selected benefits that we offer you as a part of the HCL family.

As confirmation of your acceptance, please sign the duplicate copy of this Offer cum Appointment Letter and Annexure and submit the same within 7 days to at the address given below:

**Recruiter: Manisa Das
Recruiter Address: Bangalore**

This offer will be valid subject to successful clearance of your pre-employment background verification check conducted by HCL. Your written consent and requisite copies of documents is necessary to complete the pre-employment check. You are requested to complete the submission of requisite documents for pre-employment background check within two business days from the date of acceptance of our offer of employment. Your cooperation is solicited in this regard to enable us complete the necessary pre-employment check on time and enable you on-board us.

Any change in the date of joining needs to be communicated to the concerned recruiter at least one week in advance.

SIGNATURE OF EMPLOYEE:
[Handwritten Signature]
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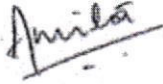
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Looking ahead, we see exciting times – we look up to you to provide impetus in accomplishing our mutual endeavor of being the best in the business of IT Services. Welcome to our Organization! We look forward to a mutually fruitful association.

For **HCL Technologies Limited(2310),**



Amrita Das

Vice President, Head-Global Rewards



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ANNEXURE I

EXPLANATION OF COMPENSATION STRUCTURE AND EMPLOYEE BENEFITS

To facilitate an easy understanding of your compensation structure (Cost to Company, CTC), the various components have been categorized under the following broad heads:

- ✦ Basic Salary
- ✦ Monthly Allowances
- ✦ Variable Pay
- ✦ Retirals & Insurances Benefit

The details for each component falling under these heads are explained as following:

BASIC SALARY

The Basic Salary is standard across organization and brought to a certain value of the CTC. Basic salary has an impact on various other components such as the PF contribution, medical insurance cover, Gratuity, HRA etc. and hence has to be balanced so as not to substantially reduce the employee's take home salary.

MONTHLY ALLOWANCES

- **House Rent Allowance (HRA):** The HRA is payable maximum Up to 100% of the Basic Salary and paid monthly. This includes the Company Leased Accommodation value. For those who are not staying in a rented accommodation, can declare the same in the system post joining and this amount would be paid as taxable component.
- **Holiday Allowance:** Holiday Allowance is payable maximum up to INR 50,000 spread over 12 months.
- **Advance Statutory Bonus:** Applicable where monthly gross does not exceed INR 21,000 (excluding variable component) as per the Payment of Bonus Act.
- **Food Wallet:** Food Wallet is a voluntary benefit and is applicable for payments related to food and non- alcoholic beverages only. Once enrolled, the benefit should be availed within HCL Cafeterias or food joints outside HCL campus which serves only food and non-alcoholic beverages. This Food Wallet cannot be used in any other outlet other than designated food outlet.
- **Compensatory Allowance:** Compensatory Allowance is a buffer component that adjusts the amount of CTC against all other fixed components.
- **VARIABLE PAY**

The scope of "Variable Pay" in your compensation structure will be governed based on your "employee group" in HCL.

SIGNATURE OF EMPLOYEE:

[Handwritten Signature]
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Performance Bonus (PB): You will be eligible to Performance bonus of << Currency >> < PB >> per annum. Performance Bonus (PB) is payable in accordance with the Company's Bonus Policy (sales / delivery / functional support) as applicable at that time. The quantum of pay-out will be subject to the current year's Bonus Policy and will be calculated based on your individual contributions against your Key Performance Parameters (KPP) as well as the company's performance.

PB is payable to you at the end of the performance review cycle. To be eligible for the bonus pay-out, you need to be active on the rolls of the company at the time of reward distribution as per our Performance review and Reward cycle.

Engagement Performance Bonus (EPB): Engagement Performance Bonus is a variable component payable on a monthly basis. This component allows employees to participate and take control of delivery excellence in their respective engagements. Payout of EPB will be based on EPB guidelines as applicable to the respective engagement.

RETIRALS & INSURANCES BENEFIT

You and your dependants will be covered under Social Security as per the law and Insurance Benefits policy offered by the company. The amount mentioned under 'Insurance and Medical Benefits' in your compensation structure is applicable towards various insurances (Medical Insurance, Term Life Insurance, Personal Accident Insurance).

Medical Insurance: Some of the salient features of the Group Health Medical Insurance policy are as follows

- The policy covers Hospitalization expenses and Maternity expenses.
 - By default the employees (who are not covered under the ESI Act, 1948] will be mandatorily covered under the benefit. The benefit will also be available to cover Spouse, dependent children, dependent parents/in-laws, dependent brothers who are unemployed but below the age of 25 and sisters (unmarried & unemployed), additionally, by declaring them as dependants and on confirming that they are NOT covered under any other employer-sponsored medical scheme (e.g., Central Government Health Scheme) and that they are wholly or substantially dependent on you for their medical needs.
 - The premium payable depends on the dependants declared.
 - The hospitalization coverage limit will be same as defined in compensation structure.
 - Company reserves the right to amend the benefit plan and shall keep all employees informed/updated.
 - You may refer 'Medical Insurance policy' for further details.
- **Coverage under ESI:** The employee will be covered under Employee State Insurance Scheme in accordance with the applicable norms and amendments made during time to time or any further amendment which may come into force during the employment tenure under **Employees' State Insurance Act, 1948.**

SIGNATURE OF EMPLOYEE:



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Employees covered under ESI would not be covered by default under HCL's medical insurance benefit. Option to enroll under medical insurance is available as well; however, in such a case, the additional cost of annual medical premium has to be borne by the employee as per terms and conditions elucidated under Medical Insurance policy.

*The employee & employer contribution will be payable as per current prescribed rates under ESI Rules.

- **Employer's contribution to Provident Fund:** As per statutory requirements, an employee has to contribute 12% of the basic salary towards Provident Fund (PF). HCL contributes matching amount to PF. Out of employer's contribution, 8.33% of monthly basic or INR. 1,250/- whichever is lower is remitted to PF authorities towards Employees' Pension Scheme (EPS). All employees are thereby eligible to draw pension after superannuation, except those who had opted out of EPS as per Form-11 declaration.

*The percentage and amount is in compliance with the current PF Act.

- **Gratuity:** As per statutory requirements, it is employer's statutory liability to pay 15 days Basic salary (15/26 of a monthly Basic) for every completed year of service to each of his employees on their exit, for any reason after five years of continuous service, subject to maximum limit of INR 20.00 lakhs.
- **Term Life Insurance (including EDLI):** At HCL, you will be covered under the Term-life Insurance which provides safety net to family in case of death of the employee due to any reasons. The applicable amount is mentioned in your offer letter.
- **Disability Insurance:** You are also covered against any permanent or partial disability that may arise due to an accident. The amount payable by Insurer for a disability shall depend on nature of the disability. The amount mentioned in your offer letter is the maximum amount paid by Insurer as per the nature of a disability. You may refer 'Personal Accident Insurance' policy for further details.

We look forward for you being an integral part of this arduous yet fulfilling journey towards excellence and growth and hope our relationship will go a long way!

Disclaimer

You will be liable to pay all applicable taxes on your income as per the local laws. You will also be responsible for filing your personal Income Tax returns. You acknowledge that the Company is not in any way influencing, guiding, suggesting on aspects of taxation or tax saving measures in any form and that the same is individual's decision / personal choice.

Please note that all components mentioned above may or may not be a part of your compensation structure. HCL reserves the right to alter, amend or withdraw the benefits extended either in part or in full based on management's discretion.

5

SIGNATURE OF EMPLOYEE:



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ANNEXURE II

Welcome aboard...

It is often said that an organization can grow only if it empowers its employees to grow! At HCL, we consciously realize this fact and have developed a five-fold path for individual enlightenment that not only covers basic monetary benefits for HCLites, but also takes care of their professional growth by providing empowerment, knowledge, recognition, transformation and support.

Following are the terms and conditions that refer to our offer of employment to you, this is to be read in conjunction with the offer letter as attached.

GENERAL TERMS AND CONDITIONS OF EMPLOYMENT

1. Location

As you are aware that HCL is coming up with IT/ITES SEZ Operating Units in some cities; till the time SEZ campus becomes operational, you may be assigned to another facility in the city of posting - Vijayawada.

2. Medical Check up

Your employment is subject to you being declared medically fit by the company doctor.

3. Increments and promotions

Your growth in terms of role, compensation etc. in the company will solely be based on your performance. Unless notified in writing, you will be deemed as "confirmed" on completion of your probation period i.e. 12 months from date of joining. Subsequently, your annual performance appraisal and compensation review will be aligned and effected from the first day of the subsequent quarter thereafter.

4. Notice Period/ Separation

Your employment with the Company can also be terminated either by the Company or by you by giving the other party **three months** advance notice. If the Company terminates the employment and decides to relieve you before the completion of the notice period, the "Basic" component of the salary for the balance notice period would be paid to you. If at your request, the Company agrees to relieve you before serving the full notice period, you will be liable to pay the Company the "Basic" component of the salary for the balance notice period. However, please note that accepting any such early relieving request would be entirely at the discretion of the Company. On termination of your employment for any reason, you shall comply with the Company's termination procedures, sign all documents and return all Company property. The Company will not be bound to pay the dues, if any, till you have completed all the separation procedures.

5. Agreements

You may be required to sign necessary agreements with the Company or any other client as required and complete various formalities as per the agreements at the time of joining and during the tenure with the company.

6

SIGNATURE OF EMPLOYEE:



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You may also be required to sign other Agreements with the Company, as the Company may decide from time to time, in order to secure the interests of the Company as also to ensure your performance and adherence to all terms, conditions, rules and regulations of the Company.

6. Background and Reference Check

- The company will undertake the background verification / validation process of employees in terms of education, previous employment(s), criminal verification, database and web searches, address verification, claims made against achievements in the resumes/CVs of the employees etc. with the help of a third party as and when required. You would be required to submit photocopies of documents detailed in Annexure III to facilitate the joining and background verification process.
- The company may also undertake reference check through at least two professional references submitted during the process of selection. In case the Prospective Employees fails to submit any document required for conducting background verification, they will not be considered for hiring. If the Prospective Employees fails the background verification, appropriate actions including withdrawal of offer of employment will be taken basis the recommendations given by the background verification team & in line with HCL policies.

7. Working Hours

You will be governed by the normal working hours as existing in the company. You may be required to work in shifts and/or in extended working hours, as permitted by law, if required as per business needs. The same are subject to change from time to time.

8. Mobility

The Company may require you to perform duties and undertake assignments for the Company in any part of India or abroad, whether at the Company's premises or that of its customers/clients. You are also liable to be transferred to any office or branch of the Company anywhere in India or abroad. During deputation to any customer/client's premises you shall abide by the terms and conditions pertaining to such premises.

9. Deputation/ Transfer

Company may also depute you to work with any of the Group Companies or transfer your services to any Group Company. On such transfer of your employment, the present terms and conditions will cease and the employment will be governed by the terms of employment of the Company you are transferred to. You shall however be entitled to continuity of service.

10. Retirement

You will retire from service on attaining superannuation at the age of 55 years.

11. Other benefits

You shall be eligible for other benefits related to leaves, perquisites etc. in accordance with the prevailing terms of employment in the Company. Notwithstanding the above, the Company reserves the right to change the above-mentioned benefits as and when it deems necessary and you will be notified accordingly.

12. Correctness of the Details Furnished

7

SIGNATURE OF EMPLOYEE:

HCL



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You have been appointed on the presumption that the particulars furnished in your application and resume are correct. In the event the said particulars are found to be incorrect or that you have concluded or withheld some other relevant facts, your appointment with the Company shall stand terminated/cancelled without any notice.

13. Data Protection:

- a. The Employee consents to the holding & processing of personal data provided to the Employer for all purposes of the administration and management of his/her employment and/or the Company's business.
- b. The Employee hereby agrees to his/her personal data being collected & the same being transferred, stored and processed by the Company in India and any other countries where the Company, its Group Company and Company Clients have offices, in accordance with the applicable laws.
- c. The Employee also agrees that the Company may make such data available to its advisors, other agencies, such as pension providers, medical, insurance providers, payroll administrators, background verification agencies and various regulatory authorities.
- d. During employment, the employee will have the right to amend/modify/alter his/her personal information. The employer will exercise all reasonable diligence for safeguarding personal information, as have been disclosed by the employee. It is clarified that the said obligation will not be applicable in case of legally compelled disclosures.
- e. The Employee further acknowledges and agrees that the Employer may, in the course of business, be required to disclose personal data relating to him/her, after the end of his/her employment to any group/statutory bodies/authorities as required under applicable law/requirements. However, any personal data, which is no longer required, will be deleted without undue delay.

14. Other Rules and Regulations of the Company

Your appointment will be governed by the policies, rules, regulations, practices, processes and procedures of HCL as applicable to you and the changes therein from time to time.

Further, during the period of your employment with HCL, you will be required to inter alia comply with the Company's Code of Business Ethics & Conduct, Anti Bribery & Anti Corruption, Business Gift and Entertainment Policy and failure to do so shall entitle HCL to take appropriate disciplinary action which may lead & include upto termination of your employment with HCL.

You agree not to undertake employment whether full time or part time, as the Director/ Partner/member/employee of any other organization or entity engaged in any form of business activity without the consent of HCL . The consent may be given subject to any terms and conditions that the company may think fit and may be withdrawn at the discretion of the company.

8

SIGNATURE OF EMPLOYEE:

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Annexure III**LIST OF DOCUMENTS/INFORMATION TO BE SUBMITTED ONLINE TO FACILITATE PRE-EMPLOYMENT BGV (BACKGROUND VERIFICATION / VALIDATION) AND APPOINTMENT PROCESS IN HCL**

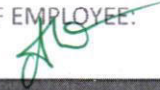
S.No.	Particulars (To be submitted to the Recruiter/Online of the BGV link)
1	Highest Qualification - Degree Certificate, All Years Mark sheets. Provisional Degree Certificate required for courses completed in the last 6 months from the current date
2	Permanent/Current Address Proof - Passport, Ration Card, Voter ID, Driving License, , Rental agreement or Lease agreement etc.
3	Previous Employer - Relieving and Experience Letter, latest salary slips & offer letter with Employee ID Number
4	A duly filled and signed copy of the BGV(Joining Form) Form and LOA (letter of authorization)
5	Identity Verification - Copy of valid passport and PAN card required
Additional documents (To be submitted on request - Only if required)	
<ol style="list-style-type: none"> Highest Qualification- Admit card, college and university official's (Registrar and Director) detail Previous Employer - Direct HR Contact, PF account details, bank statement showing salary transfer and Form 16, If company is active, employer's active address. 	
Things to Remember	
<ol style="list-style-type: none"> The information provided in Resume and background verification form must be same. Information provided in background verification form must be accurate. Period of stay mentioned in the background verification form should be correct and in continuation (without any GAP). Any Gap in Employment or Education must be informed explicitly to the recruiter. 	
Additional document can be requested to clear background verification therefore to avoid delay it is advisable to submit these documents along with the mandatory documents.	

List of Documents required for joining / induction day (Hard Copies)

S. No	Document Name	Number of Photocopies
1	Latest Offer/Appointment Letter with Cost to Company (CTC and ALL ANNEXURES)	1
2	Extension Letter (if the Date of Joining in the offer letter is past dated)	1
3	Passport -Front copy only - for Name & DOB proof.	1
4	10th Mark sheet, only if passport is not available.	1
5	PAN CARD as ID Proof (Only if passport is not available)	1

9

SIGNATURE OF EMPLOYEE:




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6	Passport Size Photographs (Only with white background)	3
Please Note –		
<ul style="list-style-type: none">• Please bring a copy of your Aadhar card on the Induction day, so that HCL onboarding team can ensure the right information is passed on for EPF (Employee Provident Fund) / EPS (Employee Pension Scheme) / UAN (Universal Account Number) account creation/porting etc.• HCL will only validate the accuracy of the Aadhar Card details for EPF/EPS/UAN and shall not store or use Aadhar card information for any other purposes.		

- Please ensure all documents are Self-attested (Photocopies).
- Please ensure that the photocopies are clearly visible as dark and hazy photocopies are not accepted.
- Please avoid clicking pictures of documents and taking printouts.
- Please do not send soft copies through Emails.
- Please keep your PF account number (immediate previous employment), UAN information handy as these details are required on the induction day.
- Induction Timings are 0900 to 1830 IST.
- Please ensure your BGV Status is Green, before the Date of Joining, check with your Recruiter on the progress/Status.
- All storage Media Devices e.g. laptop, Pen Drives etc. are not allowed inside the campus.


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Registered Office: 806 Siddharth, 96, Nehru Place, New Delhi-110019, India.

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www.hcl.com

Annexure IV

You are required to report to HCL Onboarding Team for completing joining formalities on the day of joining by 9:00 a.m. at your respective location of joining as following

Location of HCL Onboarding Team for joining formalities:

S. No	Location	Address
1	NOIDA	Mondays and Thursdays: Triveni Induction Room, First Floor, KNMA Tower, Gate number - 1, HCL Technology Hub, Plot No 3A, Sector 126, Noida - 201313. UP (India) Tuesdays, Wednesdays and Fridays: Akashi Induction Room, Ground Floor, Tower - 1, Gate number -1, HCL Technology Hub, Plot No 3A, Sector 126, Noida - 201313. UP (India)
2	CHENNAI	HCL Technologies Ltd,Sez Unit-2 (Sdb2 Buid), Eclot-Special Economic Zone, 602/3, Shollinganallur Village, Shollinganallur-Medavakkam High Road, Chennai-600119
3	BANGLORE	HCL Technologies Ltd, SAL (602), 6th Floor, Tower 4, Special Economic Zone (SEZ), 129, Jigani Industrial Area, Bommasandra-Jigani Link Road, Bangalore - 562 106
4	KOLKATA	HCL Technologies Ltd,Level-4, Building -A3 Unitech Infospace, Dh Street, Rajarhat, Kolkata-700091
5	HYDERABAD	HCL Technologies Ltd,Special Economic Zone, Phoenix Infocity Pvt Ltd, H-01, Level -2 , Hitec City 2-Survey No. 30,34,35 & 38, Madhapur, Hyderabad-500081
6	PUNE	HCL Technologies Ltd, Blue Bell, Tower-7, Level- Upper Ground Floor , Wing (A&B), Magarpatta, Sez, Pune-411013
7	MUMBAI	HCL Comnet Ltd,Arena Tower, Ground Floor, Road No 12, Midc, Andheri East, Opp Goldfinch Hotel, Mumbai-400093
8	LUCKNOW	HCL Technologies Ltd,Hcl It City, Sdc-01, Chack Gajaria Farms, Sultanpur Road, Lucknow, Uttar Pradesh-226002
9	MADURAI	HCL Technologies Ltd, Sez Unit-1, Tower-1, Elcot, Special Economic Zone, Survey No. 1/2, 1/3, 1/19, 1/20, 4/1, 2/1, 2/2, 4/2, & 5, Plot No. 5&7,Ilandhaikulam Village-Madurai-Tamil Nadu-625020
10	Nagpur	HCL Technologies Ltd, Plot No.5, Sector 12, Mihan SEZ, Nagpur
11	Coimbatore	State Street HCL Services Human Resources Module - 201, 202, 203, 204 And 206 - 2Nd Floor, Tidelpark Coimbatore Limited, Coimbatore - 641014,Extn : 04226657526
12	Vijayawada	State Street HCL Services Private LimitedMedha IT Towers,Third Floor,Kesarapalli,Gannavaram,Krishna District 521102

You shall agree that the expense(s) mentioned above, if committed during the recruitment process and incurred by the Company at the time of joining or thereafter, shall be treated in your name as an advance for a period of 2 (two) years from the date of your joining unless otherwise specified and will be recovered from you in case of your separation from the organization within two years from the date of joining. The taxability of the above components will be in accordance with the income tax rules applicable at the time of payment.

In event of you having to relocate from another city the Company will provide accommodation for yourself and immediate family at the company guest house for the initial 15 days, the cost of which will be borne by the company. Any extension of the guest house accommodation will be subject to availability of rooms and approval from the reporting manager. The cost for the extended days of stay will be borne by you.

11

SIGNATURE OF EMPLOYEE:



[Handwritten Signature]

HCL**PRINCIPAL**

**K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010**

HCL TECHNOLOGIES LTD.

Corporate Identity Number: L74140DL1991PLC046369

Technology Hub, Special Economic Zone

Plot No : 3A, Sector 126, NOIDA 201 304, UP, India.

T +91 120 6125000 F +91 120 4683030

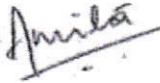
Registered Office: 806 Siddharth, 96, Nehru Place, New Delhi-110019, India.

www.hcltech.com

www.hcl.com

This offer and Appointment letter with all the enclosures of Annexures is completed in all respects and it is clearly understood and agreed that there is no other commitment or understanding. The above mentioned commitment will not be paid if it is not claimed within 6 months of joining/as specified under company policies.

For HCL Technologies Limited(2310)



Amrita Das

Vice President, Head-Global Rewards


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ARUN KIDNEY CENTRE



MALLAVARAPU LIKHITA

CLINICAL PHARMACIST

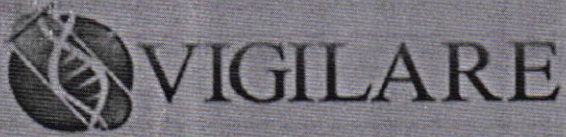
ID : AKC001199616

Blood : B⁺VE

D.O.B : 19-08-1996

Mobile :





APPOINTMENT LETTER

DATE : 17-02-2020

Mr. Reddy Praveen,

Dear Reddy Praveen,

This has reference to your application and subsequent interview had with you. We are pleased to appoint you as an **Drug Safety Associate - Trainee** on the following terms & conditions.

01. PLACE OF POSTING :

Your initial place of posting shall be at Hyderabad. However, during your employment with the Company, you may be posted/transferred to any of the offices/projects/divisions/departments/units of the Company existing, or to be set up at any other location in India or abroad, without any additional remuneration. Your date of joining will be with effect from the day you join the Company.

02. SALARY & ALLOWANCES

Your Annual cost to the company will be INR 1,80,000/- (Rs. One lakhs Eighty Thousand only) Please refer Annexure-A for details on the compensation and statutory deductions.

Your remuneration is strictly confidential between you and company, should not be discussed with anyone nor disclosed to anyone in any manner whatsoever.

03. PROBATION/CONFIRMATION

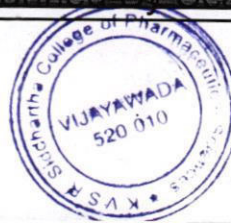
You shall be initially on probation for a period of six months, which may be extended or reduced at the sole discretion of the Management. During the period of probation, the employment is terminable by the Company without any notice and without assigning any reason whatsoever. During the period of probation, if you wish to terminate this contract, you have to give payment of salary in lieu thereof. On completion of your probation period, you shall be deemed to have been confirmed automatically, unless you receive intimation otherwise in writing, from the company.

R. Praveen

VIGILARE BIOPHARMA PVT. LTD.

Plot No. 52, 57, 1st Floor, Opp. Prerana Hospital, Balaji Nagar, Kukatpally, Hyderabad - 72, Telangana, India
+91 7207056515 info@vigilarebp.com www.vigilarebiopharma.com

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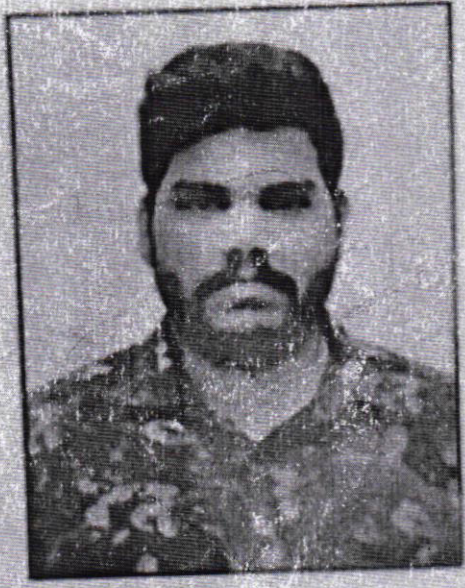


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VIJAYAWADA-520 010

26. 414phd 10027 Pharm.D 2014-20




Smt. Subba Lakshmi Memorial Vijay Orthopaedic & Accident Care



NAME : Dr.SK.LAL SAHEE
DESIGNATION : DUTY DOCTOR
EMP CODE : 74
D.O.J : 08.06.2019
BLOOD GROUP : O.POSITIVETIVE

KS
 PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.




 Authorised Signature

Near Government Hospital, Vijayawada-520010



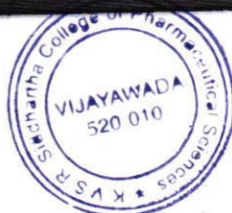
RAVI'S AMERICAN CANCER CARE

Opp. Siddhartha Public School,
Moghalrajpuram, VIJAYAWADA - 10.
Ph: 0866- 666 7000



Name : B. TEJA SRI
Designation : Pharmacist
Emp Code : 9
Blood Group : A+
Cell : +91 9030961313

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 030.



Authorized Signatory

3 LIA phd 10003 pharMD PB

2017-20

Letter of Appointment

Date: 21/06/2017

FROM
THE MANAGING DIRECTOR,
SRI SWARUPA SUPER SPECIALITY HOSPITAL,
VIJAYAWADA.

Dear Mr/Mrs/Ms G.V.V. N. MANDLEP

With reference to the discussion and interview conducted with Sri Swarupa Super Speciality Hospital. We have the pleasure of appointing you in our organization as **DUTY DOCTOR** at a salary of Rs. 30,000/- per month.

1. Payment of your remuneration will be subject to policies, rules and regulations of the Sri Swarupa Super Speciality Hospital, as applicable from time to time.
2. Your remuneration is confidential between you and the hospital and you are obliged to maintain absolute secrecy of the terms and conditions of your employment.
3. Your leave entitlement will be in accordance with the Sri Swarupa Super Speciality Hospital rules as applicable from time to time.
4. During the period of your probation, hospital reserves the right to terminate your services without assigning any reason.
5. The days of unauthorised absence and days on which you would be on leave without pay would be excluded and would not be taken in to consideration.
6. This appointment is subject to you being found medically fit by our medical consultant.
7. On leaving your services you shall not take with you any properties, formulae, drawing, blue print or other reproduction or any other data, of any nature what so ever pertaining to the business of the Hospital.
8. It is agreed that it shall be open to the Sri Swarupa Super Speciality Hospital from time to time, to add and/or to modify any remuneration, benefit, facility and perquisite that may have been extended to you.
9. If at any time, it is realised that the particular, testimonials and the information furnished by you at time of your selection are false, your services will be liable to be terminated on that ground.

You requested to please signify your acceptance of the terms and condition hereinabove by signing and returning to us.

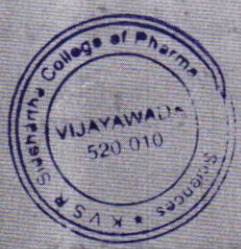
You are required to submit the Photo copies of the following on the date of reporting:

- 3 Latest passport size photographs.
- Address and ID proof (PAN Card/Voter ID/Ration Card/Bank Pass Book)
- Educational Qualification & service certificate of your previous jobs.
- Relieving letter and experience certificate from your past/present employer.
- Last drawn salary slip/Certificate showing monthly salary/annual.

P. Rama Krishna
Mr P. Rama Krishna
(Managing Director)



29-13-44, Near Pushpa Hotel, Kaleswararao Road,
Suryaraopet, Vijayawada
Signature of the employee: *G.V.V. N. Mandlep*
Signature of the employee: 2433979, 8886461236
E-mail: sriswarupahospitals@gmail.com



[Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

SRI SWARUPA SUPERSPECIALITY HOSPITAL

D.No. 29-13-47, Kaleswararao Road, Suryaraopet,
VIJAYAWADA-2. ☎: 888 646 1236.

IDENTITY CARD



Name : G V V N MANIDEEP
Emp. ID : 064
Design. : Doctor of Pharmacy
Dept. : PHARMACY
Blood Group : B +ve
Aadhaar : 6780 5249 2485
Address : One Town, Vijayawada-1
Mobile : 9398977480

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VIJAYAWADA-520 010.



B. LIF phd 140003 Pharm. D. PB 2017-20

PPD

LIAPHD14007

LIAPHARMDEPB)

EMPLOYMENT CONTRACT

Between

Ramya Sree Pavuluri

12-108, Saranu Vari Veedhi, Police Station Road, Amarthaluru (Post),
Amarthaluru (MD), Guntur, Tenali Andhra Pradesh 522325 India

And

PPD PHARMACEUTICAL DEVELOPMENT INDIA PRIVATE LIMITED

7th, 8th and 9th Floor, Valence Block, Prestige Tech Park-3, Sarjapur -
Marathahalli, Outer Ring Road, Kadubesanahalli, Bengaluru, 560103
India



**PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010**



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PPD Pharmaceutical Development India Private Limited

9th Floor, Valence Block Prestige Tech Park-3, Sarjapur-Marathahalli Outer Ring Road, Bengaluru 560 013, India.

Voice +91 80 6835 6000 efax +91 22 6645 9321 www.ppd.com Regn. U73100MH2004PTC144454

Regd. Office: 101-A wing, Fulcrum, Hiranandani Business park, Sahar Road, Andheri(E), Mumbai-400099, India voice +91 22 6880 4200 efax +91 22 6645 9321

EMPLOYMENT

This agreement (hereinafter referred to as the "Agreement") is entered into on 24.09.2021, by and between PPD PHARMACEUTICAL DEVELOPMENT INDIA PRIVATE LIMITED (hereinafter referred to as the "Company"), with its principal place of business at Bengaluru, India; and Ramya Sree Pavuluri (hereinafter referred to as the "Employee"), an Indian citizen resident as: 12-108, Saranu Vari Veedhi, Police Station Road, Amarthaluru (Post), Amarthaluru (MD), Guntur, Tenali Andhra Pradesh 522325

WHEREAS

- (A) The Employee is desirous of serving the Company and the Company is desirous of hiring the Employee; and
- (B) The parties have agreed to such appointment on the terms and subject to the conditions set out in this Employment Agreement.

The Company and the Employee shall hereinafter collectively be referred to as the "Parties" and individually as the "Party".

NOW, THEREFORE, in consideration of the premises and mutual promises and covenants set forth herein the parties hereby agree as follows:

ARTICLE 1: EMPLOYMENT AND TERM

1.1 Employment by the Company

Subject to the terms and upon the conditions set forth herein, the Company hereby agrees to employ the Employee for an unlimited term commencing on 04.10.2021

The title of the Employee within the Company shall be Clinical Trial Coordinator - C. The Employee shall report to Greeshma Kusumakar. The Company reserves the right to change such person at any time. The employment will be subject to the Company's Rules, Regulations and Policies in this regard which may be in force from time to time. The Company shall be entitled to modify or amend its Rules, Regulations and Policies.

Acceptance of Employment by the Employee

The Employee hereby accepts such employment and agrees to render the services and perform the duties envisaged by this Agreement. During the employment term, the Employee shall devote his/her best efforts to promote the business and the business interests of the Company and shall perform to the best of his/her ability the duties that shall be assigned to the Employee hereunder.

1.2 Probationary Period and Confirmation

1.2.1 The Employee shall be on a six months' probationary period during which time your employment can be terminated by the Company giving 30 Calendar days' notice in writing.

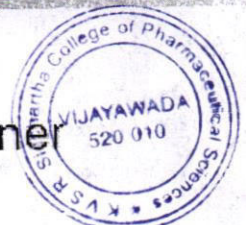
1.2.2 Subject to general assessments during the Probationary Period, Employee's appointment shall become permanent upon written confirmation from the Company, following the Probationary Period.

1.2.3 The Company further reserves the right to terminate the Employee during the Probationary Period; or, extend the Probationary Period should the Company not be certain whether the Employee's performance and/or compatibility are at acceptable levels.

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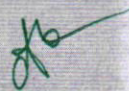


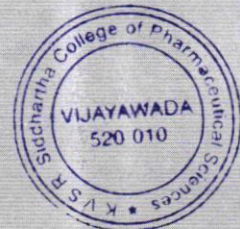
**SCHEDULE - I
BASIC SALARY AND PERQUISITES**

<u>Monthly Components</u>	
Basic	INR 18,563
House Rent Allowance (HRA)	INR 7,426
Special Allowance	INR 1,828
Leave Travel Allowance	INR 1,486
Total Gross Salary p.m	INR 29,303
Meal Allowance-Meal Card	INR 1,100
Total Gross Salary including Meal Allowance	INR 30,403
<u>Annual Components</u>	
PF PPD contribution	INR 21,600
Diwali Bonus*	INR 18,563
Annual Salary	INR 4,05,000
<p><i>The Gratuity contribution is not included in the above new break down. Employee will be eligible for gratuity as per the Gratuity act and the gratuity amount is paid over and above the Annual salary.</i></p>	

PPD Bonus (Discretionary paid in March): Based on individual & company performance.

*Bonus payments will be pro-rated if less than 12 months service at time of payment. Full details of eligibility can be found in the employee handbook.


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ARTICLE 2: PLACE OF WORK

The principal place of work will be the PPD office in Bengaluru, which would be the Employee's base location. The Employee hereby accepts in advance that he/she may be required to work in another location to meet the reasonable requirements of his/her position at the sole discretion of the Company, as the Company may reasonably require, from time to time.

ARTICLE 3: DUTIES AND RESPONSIBILITIES OF THE EMPLOYEE

- 3.1 The Employee shall at all times during the term of his/her employment faithfully and industriously perform all of the duties that may be required from the Employee due to his/her position, which may be extended or curtailed by the Company at its sole discretion.
- 3.2 The Employee accepts, declares and acknowledges that his/her working conditions and the personnel regulation shall be subject to the Company's rules and regulations in this regard, and may be changed by the Company from time to time.
- 3.3 The Employee shall not engage in activities that would be unsuitable with his/her capacity, as personnel of the Company and, under any circumstances, shall not act in a way that is in contradiction with the interests of the Company.
- 3.4 The Employee shall use his/her best endeavours to promote the interests of the Company giving at all times the full benefit of his/her knowledge, expertise, technical skill and ingenuity and shall provide his/her services and perform his/her duties and functions competently, proficiently and diligently to the standard that would be reasonably expected from an experienced employee of similar standing.
- 3.5 The Employee shall at all times conform to the reasonable instructions or directions of the Company.
- 3.6 The Employee shall perform his/her duties to the best of his/her ability, in a responsible manner, with due diligence and utmost care and he/she shall dedicate his/her full time and attention to his/her job duties during working hours as shall enable the Employee to diligently carry out such duties.
- 3.7 The Employee shall ensure that his/her conduct and that of the Company (to the extent that this refers to the duties and/or responsibilities of the Employee) abides in all cases and circumstances by the statutory and regulatory obligations imposed on the Company under the applicable laws and regulations in India.
- 3.8 The Employee shall treat all the tools, instruments, documents and equipment entrusted to the Employee by the Company in the discharging of his/her functions with due care.
- 3.9 The Employee may be expected to travel on behalf of the Company in order to accomplish his/her duties.
- 3.10 Without the prior approval of the Company, the Employee shall not be engaged in or involved in any other business not related to the Company.
- 3.11 The Employee shall not participate as shareholder, partner or in any other capacity in any other company, entity, business, undertaking, or organization, including any not for profit organization, without the prior approval of the Company in each and any instance.
- 3.12 The Employee may not work for any other employer in any capacity whilst employed by the Company unless permission has been granted by the Company.
- 3.13 Should the Employee have a grievance in connection with his/her employment he/she should

PPD Pharmaceutical Development India Private Limited

9th Floor, Valence Block Prestige Tech Park-3, Sarjapur-Marathahalli Outer Ring Road, Bengaluru 560 013, India.

Voice +91 80 6835 6000

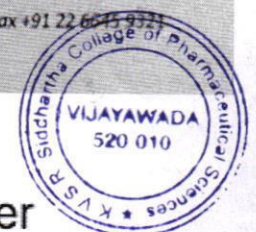
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first raise the matter with the Human resources department of the Company.
procedure are available from the Human resources department of the Company.

ARTICLE 4: WORKING HOURS

- 4.1 The working hours shall be 8 (eight) hours a day, 5 days per week and in total 40 (forty) hours per week. Subject to applicable law, the Employee in advance agrees and accepts to work overtime, on all days including during the official and general holidays and weekends, if the Company requires the Employee to work in order for the Employee to perform his/her duties and responsibilities in a proper manner and to conduct the work in a timely manner.
- 4.2 The Employee accepts and agrees to work in shifts, starting and finishing times of work and other working conditions may be regulated, determined and amended, in accordance with the operational needs of the Company, provided such modifications are made in accordance with the provisions of the law.
- 4.3 A one-hour lunch break shall be given during the working day.

ARTICLE 5: MONETARY AND OTHER BENEFITS

5.1 Remuneration

- 5.1.1 During the employment with the Company, the Company shall pay to the Employee a monthly gross remuneration of INR 29,303/-, which is broken down into Basic Salary and other perquisites as set out in Schedule I hereto. The Employee shall also be entitled to benefits and privileges set out in Schedule II hereto.
- 5.1.2 This Salary shall be paid to the Employee on 12 (twelve) months per year basis on the 27th day of each month and shall be inclusive of any fees receivable by the Employee in respect of any office he/she holds in the Company.
- 5.1.3 The remuneration of the Employee shall be reviewed on an annual basis commencing on 01 April 2023. Any increase in remuneration is related both to Company and individual performance of the Employee and shall be at the sole discretion of the Company.
- 5.1.4 Employees working in shift timings will be eligible for addition shift allowance based on the shift timings.
- 5.1.5 The Company shall be entitled at any time during the Employee's employment and, in any event, when his/her employment ends, to deduct from his/her remuneration, or from any other sums owed to the Employee by the Company any monies due from the Employee including, but not limited to, any outstanding loans, advances, overpayments, costs of repairing damage or loss to property caused by the Employee.
- 5.1.6 The Employee acknowledges and agrees that his/her remuneration is a confidential matter and he/she shall not disclose the same to other parties.
- 5.1.7 The remuneration of the Employee is subject to deduction of withholding taxes at source by the Company in accordance with the laws in force from time to time.

5.2 Employee Transport:

- 5.2.1 Employees working in shifts will be provided with company transport facility.

5.3 Travelling Expenses

The Employee, during the term of this Agreement, shall act in accordance with the Company's regulations in place with regard to travelling and expenses when travelling for business for the performance of his/her

PPD Pharmaceutical Development India Private Limited

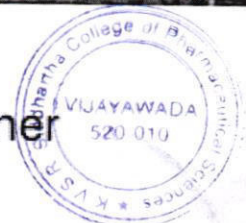
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Voice +91 80 6835 6000 efax +91 22 6645 9321 www.ppd.com Regn. U73100MH2004PTC144454

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expenses incurred in relation to travels that may be required for the purpose of the Company.
receipts and invoices.

ARTICLE 6: DISCIPLINARY POLICY

6.1 Disciplinary Policy

Details relating to the disciplinary procedure are available from the human resources department of the Company.

Offences that may lead to summary dismissal include, but are not limited to:

- physical violence or threatening behaviour to another while on duty or on the Company's property;
- theft of, or damage to the company's, its client's, contractor's, supplier's or other employee's property intentionally or through gross negligence;
- falsification of company documents or data, including expense claims;
- possession, consumption or being under the influence of drugs (except prescribed or patent medicines) or intoxicating liquor (except in places and on such occasions as shall be specified by a Director) on company premises;
- unauthorised disclosure of confidential information or client information;
- misuse of Company property including a company vehicle or credit/petrol fuel card;
- conviction under court proceedings which in the Company's opinion renders the employee unsuitable to continue the duties for which he or she is employed;
- inaccurate declaration on a Generic Drug Enforcement Act form;
- introduction to a site or use of unauthorised computers, software or media;
- any act of serious insubordination;
- using information gained as an employee of the Company for personal financial advantage or the advantage of third parties e.g. share trading;
- committing any serious breach of this Agreement or is guilty of any gross negligence or any wilful misconduct in the discharge of his/her duties.

6.2 Right to Suspend

The Company reserves the right to suspend the Employee if suspected of misconduct, on full pay, for a period of up to five working days while the circumstances of the complaint are investigated.

6.3 Background Verification

The employee represent and warrant that all the information provided to the Company is true, correct, accurate, and current as of the date the employee provide such information. False or misleading information given to the Company during the interviewing process are grounds for terminating this agreement or, if discovered after employment, for terminating employment.

ARTICLE 7: TERMINATION

7.1 Termination of Agreement by the Employee

The Employee may terminate this Agreement at any time, without being required to assign cause, by giving written notice of 60 Calendar days in a non-managerial category, 90 Calendar days in a managerial and above category and 30 Calendar days for employees on probation. In such event the Company reserves the right to pay or recover Gross salary before deduction of LTA in lieu of the notice period. Further, the company may at its discretion relieve the employee

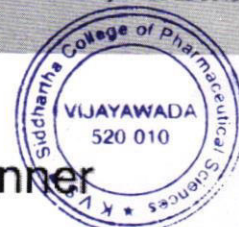
PPD Pharmaceutical Development India Private Limited

9th Floor, Valence Block Prestige Tech Park-3, Sarjapur-Marathahalli Outer Ring Road, Bengaluru 560 013, India.

Voice +91 80 6835 6000 efax +91 22 6645 9321 www.ppd.com Regn. U73100MH2004PTC144454

Regd. Office: 101-A wing, Fulcrum, Hiranandani Business park, Sahar Road, Andheri(E), Mumbai-400099, India voice +91 22 6880 4200 efax +91 22 6645 9321

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VIJAYAWADA-520 010.



the employee to continue the employment during the notice period, the employee shall do so.

7.2 Termination of Agreement by the Company

7.2.1 The Company may terminate the Agreement at any time, without being required to assign cause, by giving 90 Calendar days written notice to the Employee. Provided that the Company shall be entitled to terminate this Agreement with immediate effect by paying in advance the Gross salary before deduction of LTA of the Employee in lieu of the notice period.

7.2.2 Subject to applicable law, the Company may, forthwith and without the requirement of any notice or Gross salary before deduction of LTA in lieu thereof, terminate this Agreement with immediate effect if disciplinary action in terms of Article 6 of the Agreement is taken by the Company.

7.2.3 Upon termination of employment of the Employee, the Company shall make such severance payments to the Employee as may be required under law.

7.3 Forced Leave

The Company reserves the right to place an employee who is under notice, on to "Forced Leave" during the notice period following the serving of the termination notice. An employee on "Forced Leave" is no longer expected to attend for work but is still under contract to the Company and therefore in receipt of their usual contractual benefits and may be required to be available to answer questions relating to their position during this time. Further details are available from the human resources department of the Company.

ARTICLE 8: OBLIGATIONS ON TERMINATION

8.1 Upon termination of this Employment Agreement in whatever manner, the Employee shall immediately surrender to the Company all papers, books, manuals, keys, accounts and records (including all copies thereof) in his/her possession relating to the business of the Company and/or its affiliates.

8.2 During the term of this employment and for one (1) year thereafter, the employee will not encourage or solicit any employee of the Company to leave the Company for any reason or to devote less than all of any such employee's efforts to the affairs of the Company, provided that the foregoing shall not affect any responsibility that the employee may have as an employee of the Company with respect to the bona fide hiring and firing of the Company personnel.

ARTICLE 9: CONFIDENTIALITY

9.1 The Employee is required:

(a) not to disclose any aspects of the Company's work, its clients and contracts (past, present or future) either directly or indirectly to any person(s) or organisation without the consent of the Company whilst employed by the Company and at any and all times thereafter;

(b) whilst employed by the Company, to refrain from engaging or participating in any way, in any trade or business or activity, either on his/her own account or with one or more others, that is competitive with or related to the Company's work. Where any question arises as to whether or not such trade, business or activity is competitive with or related to the Company's work, the Company's consent in writing must first be obtained.

(c) to surrender to the Company before his/her employment terminates all documents, media or other materials of any form such as written, sketched, reproduced, printed, photographed or otherwise recorded products by himself/herself in the course of his/her employment. The Employee hereby agrees that such products shall be and remain the Company's exclusive property and no copies thereof may be made or maintained.

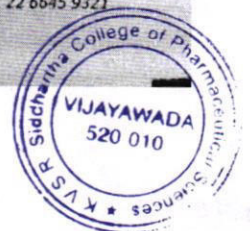
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Any delay by the Company in exercising any right, power or privilege under this Agreement shall not operate as a waiver thereof. Any waiver of any right, power or privilege arising of this Agreement by the Company or any single or partial exercise thereof shall not preclude any other or further exercise or the exercise of any other right, power or privilege.

This Agreement may only be amended by means of the written mutual consent of each of the Parties hereto.

ARTICLE 11: NOTICES

Except as otherwise provided, any and all notices, requests and other notifications under this Agreement shall be made in writing and by hand or sent to the facsimile numbers below of the Parties or to below-mentioned addresses of the Parties through a prior written notice by registered return mail (postage prepaid) or by a recognized courier service (making daily deliveries).

The Parties hereby accept and acknowledge in advance that the addresses stated below are their legal notification addresses and fax numbers below are still in use and they shall notify the other Party of any change in the addresses and fax numbers, otherwise notifications and notices to be sent to those addresses and fax numbers shall bear the consequences of a legally valid notification.

If to the Company

PPD PHARMACEUTICAL DEVELOPMENT INDIA PRIVATE LIMITED

To the attention of : Rollince Peter
Address : PPD, Pharmaceutical Development India Pvt Ltd, 9th Floor,
Valence Block, Prestige Technology Park 3, Outer Ring Road,
Marathahalli, Bengaluru - 560 103

If to the Employee Name : Ramya Sree Pavuluri
Address : 12-108, Saranu Vari Veedhi, Police Station Road,
Amarthaluru (Post), Amarthaluru(MD), Guntur, Tenali
Andhra Pradesh 522325 India

ARTICLE 12: ENTIRE AGREEMENT

If at any time any provision of this Agreement is deemed to be or becomes illegal, invalid or unenforceable in any respect, the legality, validity and enforceability of the remaining provisions contained herein shall remain in full force and shall not in any way be affected or impaired. The Parties shall negotiate in good faith to replace such provision with a valid and enforceable provision having substantially the same economic and legal effect upon the Parties.

ARTICLE 13: HEADINGS

The headings used in this Agreement are for reference purposes only and shall not in any way affect the meaning or interpretation of this Agreement.

ARTICLE 14: COUNTERPARTS

This Agreement may be executed in two or more counterparts, each of which when signed shall be deemed to be an original, but all of which together shall constitute one instrument.

PPD Pharmaceutical Development India Private Limited
9th Floor, Valence Block Prestige Tech Park-3, Sarjapur-Marathahalli Outer Ring Road, Bengaluru 560 013, India.
Voice +91 80 6835 6000 efax +91 22 6645 9321 www.ppd.com Regn. U73100MH2004PTC144434
Regd. Office: 101-A wing, Fulcrum, Hiranandani Business park, Sahar Road, Andheri(E), Mumbai-400099, India voice +91 22 6880 4260 efax +91 22 6645 9321

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PPD
ARTICLE 15: GOVERNING LAW AND DISPUTE RESOLUTION

- 15.1 This Agreement shall be governed by and interpreted in accordance with Indian law.
- 15.2 The Parties accept the exclusive jurisdiction of the courts at New Delhi in respect of any matters or disputes arising under or in connection with this Agreement.

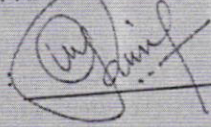
IN WITNESS WHEREOF, the Parties hereto have executed this Agreement, the day and year first above written, which shall be applicable as of its execution by both of the Parties.

PPD PHARMACEUTICAL DEVELOPMENT INDIA PRIVATE LIMITED

By : Rollince Peter

Title : Associate Director, Human Resources

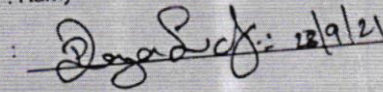
Signature



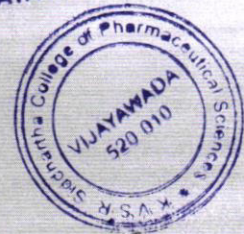
The Employee

Name : Ramya Sree Pavuluri

Signature

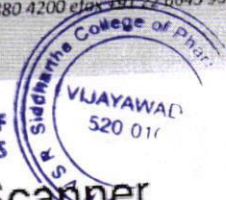
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SCHEDULE - II

BENEFITS TO THE EMPLOYEE

LEAVE

The Employee will have the following leave entitlement. Should the Company agree to any leave in excess of the entitlement of the Employee as set out herein, shall be without pay.

(a) **Annual/Privilege Leave:**

21 days per annum

Subject to the applicable laws, employees are entitled to both Privilege Leave and Casual Leave. Annual paid leave shall be taken by the Employee at such times as are mutually convenient to the Company and the Employee, in accordance with the Company policy, and taking into consideration the operational needs of the Company.

The Company encourages work/life balance however employees can carry forward unutilized annual leaves every year and can accumulate a maximum 45 days of annual leave at any given point of time. Any additional leaves beyond these 45 days will be lapsed.

(b) **Other Leaves**

Casual Leave	10 days
Sick Leave	7 days
Public Holidays	12 days

Casual Leave cannot be carried over to the next year or encashed. Any casual leave which is not taken will be forfeited at the end of the year.

HOUSING RENT ALLOWANCE:

Calculated at 35% + adjustments of basic annual salary and can be claimed tax efficiently upon submission of acceptable receipts as governed by the Income Tax Act 1961.

MEAL CARD:

Fixed amount given in the form of a meal card which can be used to purchase food and is tax efficient as governed by the Income Tax Act 1961 regulations.

LEAVE TRAVEL ALLOWANCE:

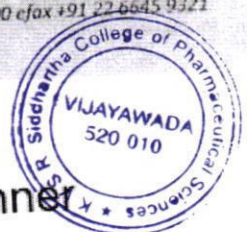
Calculated based on one twelfth of basic salary (less Rs.1300/- / less Rs.1800/-) per month which can be carried forward over a 4 year period, as defined in the Income Tax Rules and is claimable tax efficiently via receipts subject to the Income Tax Act, 1961. Tax implied LTA will be paid monthly as a part of the salary. However when bills are submitted, taxation adjustments will be done considering the over-all tax calculations.

PROVIDENT FUND:

The Employee shall be entitled to provident fund in accordance with the Employees' Provident Fund and Miscellaneous Provisions Act, 1952. Monthly Employee Contribution will be 12% of basic salary or INR 1800/- per month as opted by the candidate on or before joining PPD. Equal contribution will be paid by the company to the Provident fund.

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PPD

DIWALI BONUS:

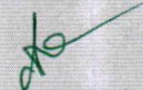
Diwali Bonus is based on one twelfth of the employee's basic annual salary based on the previous 12 month period from 01st November to 31st October. Employees who have not worked a full calendar year but are actively employed on the 31st October will be eligible to receive a pro-rata payment based on the number of full months worked. Employees on probationary period will be eligible for Diwali bonus and will be paid on a pro rata basis. Employees who have resigned and are serving the notice period will be entitled to a pro-rata payment which will be added to their full and final.

GRATUITY:

The Employee shall be entitled to gratuity payment in accordance with the Payment of Gratuity Act, 1972. 15 days of salary will be accrued each full year of service and will be paid out upon employee retirement, resignation, disablement or death after 5 years of continuous employment with PPD India.

PPD BONUS:

Discretionary bonus based on individual performance and company performance which is typically paid in March. Employee would be eligible for PPD Bonus if they are in service prior to 01st October of the previous year. Bonus payments will be pro-rated if less than 12 months service at time of payment.


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LIFPHD140009



RAVI'S AMERICAN CANCER CARE

Opp. Siddhartha Public School,
Mogalrajapuram, VIJAYAWADA-10.

Ph : + 91 856 6667 000



Name : T. Divya
Designation : Pharmacist
Emp Code : 6
Blood Group : O+Cell : 9666956363

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 001



T. Divya
Authorized Signatory

To,
Mr. Chanumolu Hari Prakash
S/o Anil Babu
HNO :#103, H.No:74-13-172/2,
LandMark : New RTC Colony,
City/Village : Patamata,
Post : Patamata, Vijayawada,
Mandal : Vijayawada,
District : Krishna-520007.

Sub : Letter for Training

We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you , we are pleased to offer you a one-year training in QC Department, at Unit-2, situated at Chippada Village, Bhemmuniapatnam Mandal, Visakhapatnam District on the on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your M.Pharmacy provisional certificate you will be paid a stipend of Rs.18000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization, depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules, regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period. You will also be covered under ESI act, 1948.
9. This offer of training is based on the information furnished in your application. If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

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VIJAYAWADA-520 010.



10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, B.Pharmacy & M.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training in our organization on or before 21.11.2020. If you do not join the training before the stipulated date, this offer of training shall be deemed cancelled.

We take this opportunity to welcome you to the organization and wish you good luck.

Yours sincerely,

For DIVI 'S LABORATORIES LTD

K.SUBBA RAO

GENERAL MANAGER (P&A)


**PRINCIPAL
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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.**



ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in .

Signature: _____

Date: _____

Road Map : Vizag to Tagarapualasa - Bus available. Tagarapualasa to Chippada - Autos available.

 :08922 248917/927



Letter of Training - 48777

1 message

<noreply@divislabs.com>
To: hariprakash748@gmail.com
Cc: davalika.n@divislabs.com

Thu, 12 Nov 2020 at 14:56

Dear Mr. Chanumolu Hari Prakash,

Greetings of the day From M/s Divi's Laboratories Ltd,

We are glad to inform you that you have been selected for the post of trainee supervisor in QC department at Unit-2 situated at Chippada Village, Bhemmunipatnam Mandal, Visakhapatnam District .

The appointment order has posted to your address mentioned in your resume. You may join for training on or before 21.11.2020.

If, you didn't receive the appointment order within 7 days of this mail ,you may collect same from our Head office located at M/s Divis Laboratories Ltd,1-72/23(P)/DIVIS/303, Divi Towers, Cyber Hills, Gachibowli, Hyderabad, Telangana 500032.

Waiting to work with you in the world class API and intermediates manufacturing unit.

Best Regards
Veerabhadra N. | P&A
M/s Divis Laboratories Ltd
1-72/23(P)/DIVIS/303,
Divi Towers, Cyber Hills,
Gachibowli,
Hyderabad, Telangana 500032
040 2378 6436

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418MPAN/140007

**OFFICE OF THE DISTRICT MEDICAL AND HEALTH OFFICER,
Krishna District**

PRESENT : Dr. M.Suhasini, MBBS.DA

Re.No. 02/YSRAHCT /Kri/2020, Dated: 18-11-2020

Sub: - Dr Y.S.R.A.H.C.T – HR- Strengthening at field level Recruitment of Aarogya Mithra and Team Leaders on Out Sourcing basis – selection of candidates through DSC – Appointment Orders – Issued.

Ref:- 1. G.O.Rt.No.28, HM&FW (I) Dept., Dt. 20.01.2016.
2. Lr No. Dr.YSRAHCT/HR/4415/2020, Dated 23.10.2020 of the Chief Executive Officer, Dr.YSRAHCT, Guntur, A.P..
3. G.O.Rt.No.629, HM&FW (I.1) Dept, Dated : 15-11-2019.
4. Notification issued to press Dt 31.10.2020.
5. Note orders of the District Collector & Chairman, DSC Krishna Dt.29.10.2020.

ORDER :

1. Whereas the Chief Executive Officer, Dr.YSR Aarogyasri Health Care Trust, Government of Andhra Pradesh has accorded permission to fill up the vacancies of Aarogya Mithras and Team Leaders on Outsourcing basis through District Selection Committee for Strengthening the activities at the field leave. Accordingly Applications have been called for from the eligible candidates vide notification dated 31.10.2020. After due verification of the selection criteria **Sri/Smt JAMPANA DEEKSHITHA** is Appointed as **TEAM LEADER/ AAROGYA MITHRA** on outsourcing basis with the consolidated salary of **Rs.15000/- / Rs.12,000/-** per month and directed to report before the District Coordinator, Dr.Y.S.R Aarogyasri Health Care Trust, Krishna District, with Immediate effect.
2. In this regard, the candidate should note that if he/she fails to report for the duty immediately as instructed above, the appointment given is deemed to be cancelled and the appointing authority has the right to appoint another alternate candidate as to meet the requirement of Dr.Y.S.R Aarogyasri Health Care Trust

M. Suhasini 18/11/2020
District Medical & Health Officer,

Krishna District.

To
Sri/Kum/Smt, **JAMPANA DEEKSHITHA**

Copy Submitted to the:

1. Collector and District Magistrate, Krishna District for favor of information.
2. Joint Collector, (V,WS&D) Krishna District, for favor of information,
3. District Coordinator, Dr.Y.S.R Aarogyasri Health Care Trust, Krishna District,
4. Employment Officer, Krishna District.

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VIJAYAWADA-520 010.



Y18 MPAN 140008
analysis

Y18 Batch

M, Pharmacy

Date:08.03.2021,

To,
Mr. Jampani Bhanu Prakash
S/o Ramesh Babu
HNO : 6-120,F.NO:404,Vijaya Bhaskara Autumn Field Apart
LandMark : Chalasani Nagar 3rd Line,
City/Village : Kanuru,
Mandal : Vijayawada,
District : Krishna-520007.

Sub : Letter for Training

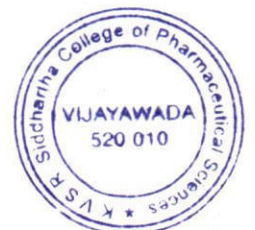
We extend to you our warmest welcome to our family of Divi's Laboratories Limited.

With reference to your application and discussions had with you ,we are pleased to offer you a one-year training in QC Department, at Unit-1, situated at Lingojjudem Village , Choutuppal Mandal , Yadadri Bhuvanagiri District on the following terms and conditions.

1. You will be on training for a period of one year from the date of reporting as a trainee and you will be paid a stipend of Rs.16000/- per month during your training period.
2. After submit / verification of your M.Pharmacy provisional certificate you will be paid a stipend of Rs.18000/- per month from the 1st of the following month.
3. You will be required to undergo pre-training medical check-up as this offer is subject to your medical fitness and you will be required to undergo periodical medical check-ups during your training period. Your training will be terminated , if you are not found medically fit.
4. Training is given at any one of the departments, branches & manufacturing units of the organization, depending on the requirement at the sole discretion of management. If required, you may be asked to undergo training in shifts as well.
5. You shall be liable to be transferred/posted to any location, department & unit of the organization,depending on the requirement for training. Upon such transfer, you will automatically be governed by the service conditions, rules,regulations and other terms as applicable at such new place.
6. If you intend to discontinue your training during the training period, you have to give three months prior notice in writing or return three months stipend in lieu thereof, which may be modified from time to time and the same will be notified.
7. After completing your training, the organization, at its sole discretion, may or may not offer employment and no trainee shall have the right to demand absorption in employment of the organization.
8. You are entitled to seven casual and five sick leaves during your training period . You will also be covered under ESI act,1948.
9. This offer of training is based on the information furnished in your application . If, at any given time, it comes to the knowledge of the management that any of this information is incorrect or any relevant information has been suppressed, then your training based on this letter of training, is liable to be terminated, without any notice or any stipend in lieu thereof.

.....50956.....

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10. You are required at all times to maintain the highest order of discipline and secrecy as regards the training of the organization. Any of technical / personal information, which might come into your possession during continuance of your training in the organization, shall not be disclosed, divulged or made public by you even thereafter.
11. You shall adhere to Organization's policies, procedures, rules and regulations, discipline and general work practices, which are subject to change from time to time.
12. You shall forthwith intimate any change in your residential address as and when any change takes place.
13. Your training is liable for termination at any time without notice or enquiry, if you are found indulging in any misconduct.
14. Your progress in training is reviewed from time to time and if found unsatisfactory, your training will be terminated without notice.
15. You are required to submit the following at the time of joining
 - a. For verification purpose, we need your original certificates of S.SC, Inter, B.Pharmacy & M.Pharmacy and photo copies of the same.
 - b. Four passport size color photographs.
 - c. Four copies of post card size black & white group photo of yours along with your dependent parents, and your spouse & children if married.
 - d. Photo copies of Aadhaar & PAN cards of yours along with your father, mother, spouse and children, if Married.
 - e. Photo copy of SBI savings bank account passbook.

In case the terms and conditions of training stated above are acceptable to you, please sign this letter in token of you having understood and having accepted the same and shall submit before you join for training.

You shall join training in our organization on or before 23.03.2021. If you do not join the training before the stipulated date, this offer of training shall be deemed cancelled.


We take this opportunity to welcome you to the organization and wish you good luck.

Yours sincerely,

For DIVI'S LABORATORIES LTD


K.SUBBA RAO

GENERAL MANAGER (P&A)


PRINCIPAL
K.V.S.R. SIDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.




ACCEPTANCE

I understand the contents of offer of training and I hereby accept the terms and conditions mentioned there in .

Signature: _____

Date: _____

Road Map : Hyderabad to Choutuppal - Bus available. Choutuppal to Lingojjudem - Autos available.

 :08694-257001

.....50956.....

Date of Issue: 16th August 21

Dear Khairunnisa Khaton,

Greetings from Kelly Services!

In pursuance of your application followed by your interview, we are pleased to offer you the position of **Drug Safety Associate I** with our client Parexel at Chandigarh on the mutually agreed terms and Conditions.

This Contract is from 30th August 21 to 1st March 22 the same will be renewed based on your performance and client confirmation.

You are requested to join the services of Parexel, Chandigarh on 30th August 21.

The annual CTC shall be Rs.380000/-. The Salary structure is attached herewith as Annexure-A.

Please bring the following documents on the day of joining:

Educational Certificates – Original and Photocopies

Experience Certificate, if applicable

Salary slips of last three months, if applicable

Signed copy of updated Resume

Resignation acceptance letter from previous employer.

Cancelled cheque of savings bank account (in case employee wants to retain the existing A/c)

4 Passport size photographs

Copy of PAN Card and original for verification

Proof of Address (Voter ID, Passport, Aadhar Card, Driving License etc.)

Copy of Aadhar Card and original for verification

This letter of offer is issued to you on the presumption that the furnished by you in your application are correct.

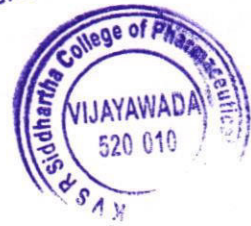
Please reply with your acceptance of the offer within 24 hours of the receipt of offer. In case you fail to reply, this offer shall stand withdrawn after 24 hours.

In case of any queries, feel free to contact the undersigned.



[Handwritten Signature]

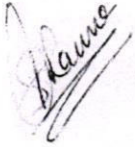
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



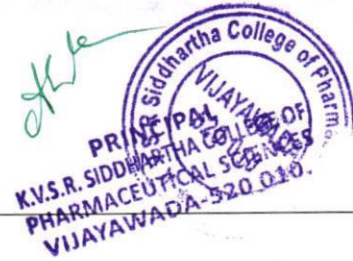
Annexure-A.

Particulars	Rs.
Basic Salary	15,000.00
HRA	7,500
Other Allowances	6,197
Gross	28,697
Employer's Cont to PF	1950
ESIC	
Stat.Bonus	1,000.00
LWF	20
CTC Total P.M	31667
Deductions	
PF	1800
LWF	5
PT	200
Net Take home	26692.000
CTC PA	380004

Best Wishes,
For Kelly Services India Pvt. Ltd.



Vandana Sharma
Operations Head- Staffing Solutions



PERSOLKELLY India Pvt. Ltd. (Formerly known as Kelly Services India Pvt. Ltd.)

Dega Tower, Unit No.301,
3rdFloor, Raj Bhavan Road,
Somajiguda, Hyderabad,
Telangana - 50082, India
T +91 80 67606444

Registered Office:
Sriram Samanthu Chambers, #3287,
12thMain, HAL 2nd Stage,
Indiranagar, Bengaluru - 560038
T +91 80 6708 1800

persolkelly.co.in

100000910KA2001PTCC29517

418MPAMI40011



KOMMAREDDY VENKATA SADASIVA RAO
**SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES**

(Sponsors : Siddhartha Academy of General &
Technical Education)

Vijayawada - 520 010. Ph : 0866-2479775, Fax : 0866-2476086



Kondaveeti.Mrudula
Lecturer
Pharm.Analysis



Principal



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



418MPAM140011

Telephone : 0866 2476026, 2475866, 2479781
Tele - Fax : 091 - 866 - 2476086
e-mail : siddhartha.academy@yahoo.in

Siddhartha Academy of General & Technical Education

SIDDHARTHA NAGAR, VIJAYAWADA - 520 010

PRESIDENT : N.Venkateswarlu
M.A., B.L.

Vice Presidents : M. Rajayya
Dr. C. Nageswara Rao
M.S FRCS, FACS

Secretary : P. Lakshmana Rao
B.Com, FCA.,

Treasurer : Sureddi Venkateswara Rao

Jt. Secretaries : N. Lalitha Prasad
Chanumolu Krishna Rao

O.C.No.1748/2021

Date : 24.08.2021

APPOINTMENT ORDER

Ms.K.Mrudula, M.Pharm. is appointed '**Lecturer**' and posted to the Department of **Pharmaceutical Analysis** in **KVSR Siddhartha College of Pharmaceutical Sciences, Vijayawada**. She will be paid a consolidated salary of **Rs.18,000/-p.m.** She is placed on probation for a period of two years. She is entitled to PF & ESI facility as per rules of eligibility.

As a Lecturer, Ms.K.Mrudula is required to continuously update her teaching and presentation skills so as to make the students understand the subject and respond well. She has to teach the prescribed curriculum duly following all internal procedures as stipulated from time to time and discharge her duties with a high degree of devotion and commitment. She has to help students achieve higher academic standards commensurate with the current day expectations.

She is informed that there would be a continuous appraisal of her performance in the institution in all respects viz. subject knowledge, presentation skills, classroom management, regulating the conduct of the students inside and outside the class room, participation in seminars and workshops, initiative in organizing co-academic activities in the Department besides her own conduct and regularity to work. She shall have to act as Campus Counsellor to a group of students as allotted by the Principal from time to time and act as their friend, philosopher and guide till all of them complete their studies in the College.

She will be considered for periodical increments or additional incentives or any other modes of encouragement strictly basing on her commitment to the job, result-oriented performance at all times. The Management will be at liberty to take all possible measures in case she is found to be wanting in any of the above while discharging her duties as a member of the faculty.

The appointment is terminable with one month's notice on either side and essentially at the end of an academic year but not in between to avoid dislocation likely to be caused to academic work. This appointment is governed by the service rules of the College. She shall have to give a written consent to comply with the terms and conditions as stipulated in this order. She has to appear before a regular Selection Committee for regularization of services.

She shall report to duty immediately before the Principal, KVSR Siddhartha College of Pharmaceutical Sciences, Vijayawada and submit all her original certificates and documents regarding qualifications and experience. She has since reported to duty on **02.08.2021**.

To
Ms.K.Mrudula,
D/o Sri K.Rajendra Babu,
D.No.65-2-10,Sivalayam St.,
NTR Circle, Patamata,
VIJAYAWADA - 520 010.

K.V.S.R.SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010
INWARD

SECRETARY

Date: 25-8-21
File No: 156/21

Copy to the Principal, KVSR Siddhartha College of Pharmaceutical Sciences

Received
K.Mrudula
24/8/21

Parvathaneni Brahmayya Siddhartha College of Arts & Science (1975)
(Post Graduate Centre established in 1987)
Veeramachaneni Paddayya Siddhartha Public School (1977)
Velagapudi Ramakrishna Siddhartha Engineering College (1977)
Sri Durga Malleswara Siddhartha Mahila Kalasala (1982)
Y.V.Rao Siddhartha College of Education (1984)
Smt. Velagapudi Dirgamba Siddhartha Law College (1987)
KCP Siddhartha Adarsh Residential Public School (1991)
Kommareddy Venkata Sadasiva Rao Siddhartha College of
Pharmaceutical Sciences (1994)

Sponsors of

Prasad V. Potluri Siddhartha Institute of Technology (1998)
A.G. & S.G. Siddhartha Arts & Science College - Vuyyuru (1975)
Krishna Dist.
Siddhartha Institute of Hotel Management & Catering Technology (2001)
Dr. Pinnamaneni Siddhartha Institute of Medical Sciences & Research
Foundation (2003)
Dr. PSIMS & RF - School of Nursing (2003)
Drs. Sudha & Nageswara Rao Siddhartha Institute of Dental Sciences
(2005)
Dr. C. Sobhanadri Siddhartha College of Nursing (2008)

విజయవాడలోని విశ్వవిద్యాలయం



(S) 2565634, 665236
(R) 2482887, Cell:98482 6308

SRI VIJAYA BHASKARA PHARMACEUTICAL

D.No.11-32-16, Challamrajuvari Street,
VIJAYAWADA - 520 001.

STOCKISTS FOR :

BIO-CHEM
NICHOLAS
E-MERCK
NOVARTIS
GLAXO
ZYDUS CADILA
WYETH
PFIZER LTD.
APEX
ERIS LIFE SCIENCES
M.S.D
APRICA
BAYER ZYDUS
FRANCO INDIA
BIOCON
ANTHEM PHARMA
ORGANON
FULFORD
ARISTO (ALL DIVISIONS)
GALDERMA
ICON
DR. REDDY'S
FOURTT
PALSON DRUGS
B.E.
WARREN
NOVO NORDISK
PULSE
PANCEA BIOTEC
SHIELD PHARMA
INDOCO
SHALLAKS
FEM
ABOTT (ALL DIVISIONS)

Ref:.....

Date: 28-12-2020

TO WHOM SO EVER IT MAY CONCERN

This is to certify Miss **Sravani.Chalapati** who is pursuing her **M.Pharmacy (2018-2020)** from **K.V.S.R.SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES** has been placed in our organization with Rs 1.2 Lakhs per annum.

Thank You,

(Signature)

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





InVitro Research Solutions Pvt. Ltd.,

CIN : U74999KA2016PTC095072

Corporate office address : # 22&23, Kodigehalli Main Road,

Sahakar Nagar, Hebbal, Bengaluru-560092.

Phone : 080-45500700 Website:www.ivrs.org.in

REF: iVRS/HR/AL/110

Date: 23rd Sep 2022

Ms. Borra Hima Bharathi
D/o Sri Rama Murthy,
7-1/1, Geetha Mandir Street,
Tallapudi, Tallapudi mandal,
West Godavari - 534341

Letter of Appointment

Dear Ms. Borra Hima Bharathi,

We are pleased to offer you an appointment in our company effective 23rd Sep 2022. The offer is made on the following terms and conditions.

You will be designated as **Junior Analyst – Analytical Department**, (Grade E2, Level 1) in our company.

1. You will be offered an annual emolument of Rs. 3,00,000/- (Rupees Three Lakh Only) as cost to company. Please refer the annexure for break-up.
2. You will be reporting to the **Manager** for all official matters.
3. You will be governed by the service rules of the company as are in force, from time to time. The Management in due course as per the policy of the Company will issue any other additional terms and conditions of the employment.
4. You will be on probation for a period of 6 months from the date of appointment. Your appointment will be confirmed at the discretion of the Management, based on your work performance. In case your period of probation is extended at the discretion of the Management, the same will be intimated to you in writing.



RB
23 Sep 2022

Registered office address: G-011, Canopy Calyx, Coffee Board Layout, Bengaluru - 560024

Page 1 of 10

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



spiProPAT



K. LALITHYA

Emp Code : 1106

Blood Group : B^{+VE}

A handwritten signature in dark ink, appearing to be 'K. Lalithya', written over a faint horizontal line.

Authorised Signatory

spiProPAT Intellectual Property Solutions
2nd Floor, "Suresh Square" D No. 1-58/91/SS, Plot No. 91,
Sy No. 228 & 229/1, Madeenaguda, Hyderabad-500 049
Ph : 40240129

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Dear Ms.Lalitya,

Greetings,

Based on interview we had on October 11, 2021, we are pleased to offer you the position of Trainee in IPR department, please find the attached offer letter.

Appreciate the confirmation of accepting the offer letter within a week.

Thanks & Regards,
K. Jagadeeswar Rao,
H.R & Operations.

Innovaa Agro Laboratories

Tel : 040 402 401 29 / Mobile: 9000385777

www.ipropat.com


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





Innodata India Pvt. Ltd.
 7th & 8th Floor, Stellar IT Park,
 C-25, Sector 62, Noida (U.P.) 201309
 Tel: +91 0120-462 6000
 CIN: U72400DL1997PTC084165

13-Nov-2021

MATURI SUSMITHA

D/O M. Srinivasa Rao, Door No 30-21-21, vadlapudi, rh colony, near post office/Mr veggies, kurmannapalem
 Visakhapatnam Andhra Pradesh 530046
 India

LETTER OF INTENT

Dear MATURI,

This is further to your application exploring a suitable opportunity in our Organization, followed by your interview with our recruitment and selection team. In this connection, we are pleased to inform you that you have been selected and offered a position of "Associate " in our organization on mutually agreed terms and conditions.


As agreed, you are requested to join the services of the company on or before "15-Nov-2021" at the following address:

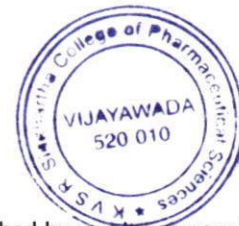
Innodata India Pvt. Ltd.

8th Floor, Tower-A, Stellar IT Park, C- 25, Sector-62, Noida

Also, please bring the photocopy of the following documents at the time of joining:

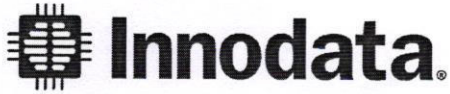
- 1) Certificates of educational qualification starting from 10th
- 2) Certificates of professional qualifications
- 3) Experience letters of previous employment(s)
- 4) Copy of Relieving Letter/ Resignation Letter
- 5) Salary Proof/ Pay slips (last 3 months) of last employment
- 6) Six (6) passport size color photographs with white background
- 7) PAN Card
- 8) Aadhaar Card


 PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010



This Letter of Intent is issued to you on the presumption that the particulars furnished by you in your application

Regd. Office: 708, Surya Kiran, 19 Kasturba Gandhi Marg, New Delhi - 110 001



Innodata India Pvt. Ltd.
7th & 8th Floor, Stellar IT Park,
C-25, Sector 62, Noida (U.P.) 201309
Tel: +91 0120-462 6000
CIN: U72400DL1997PTC084165

are correct.

A detailed appointment letter shall be issued to you on your joining the services of the Company.

This letter is subject to successful Background Verification Check. In case, the same is not found to be satisfactory, this offer stands null and void.

I IPL recruitment and selection team congratulates you on your selection.

Thanking you,

For Innodata India Pvt. Ltd.

A handwritten signature in black ink, appearing to read "Parul Arora".

Parul Arora

Manager- HR

A handwritten signature in green ink, appearing to read "K.V.S.R. Siddhartha".
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





Innodata India Pvt. Ltd.
7th & 8th Floor, Stellar IT Park,
C-25, Sector 62, Noida (U.P.) 201309
Tel: +91 0120-462 6000
CIN: U72400DL1997PTC084165

Name : MATURI SUSMITHA

Designation : Associate

Level : Level 1

Date of Joining :15-Nov-2021

Illustrative details of your compensation:

Pay Component	Monthly Amount	Annual Amount
Fixed CTC		
Fixed	17999	216000
Basic	9000	108000
HRA	7370	88442
ESI	549	6598
PF	1080	12960
Total Fixed CTC	17999	216000
Total CTC	17999	216000

For Innodata India Pvt. Ltd.

Parul Arora
Manager- HR

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

Read, Understood and Accepted

(_____)



Please sign the enclosed copy of this letter as a token of your acceptance.

Regd. Office: 708, Surya Kiran, 19 Kasturba Gandhi Marg, New Delhi - 110 001

Offer Letter

Date: 29/10/2021

Mr. Pavan Kumar M
Hyderabad

Dear Mr. Pavan Kumar M,

With reference to your application and subsequent interview with us, we are pleased to offer you the position of "Trainee Executive - Regulatory Affairs" at Casper Pharma Private Limited, Sy No.99/1, GMR Hyderabad Aviation SEZ Limited, Mamidipally Village, Balapur Mandal, Shamshabad, Ranga Reddy District, Hyderabad - 500 108, Telangana.

The detailed appointment letter will be given to you at the time of joining. You have to Join on or before 08/11/2021 otherwise this offer will stand withdrawn automatically.

The detailed breakup of the compensation package is furnished in Annexure - I

You are required to carry the following documents at the time of joining:

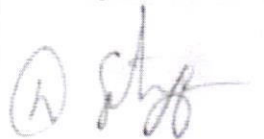
1. Copy of Offer Letter.
2. Proof of date of birth SSC/ SSLC / HSC certificate stating date of birth.
3. All Educational Qualification Certificates (Originals & Xerox Copies).
4. Six Photographs (Passport size – Colour).
5. Appointment Letter of Previous Company.
6. All Relieving & Service Certificate from previous Employer & last drawn salary slips.
7. Copy of PAN & AADHAR (2 Copies each mandatory).
8. Form 16 & Bank Statement.
9. Employees Provident Fund - UAN (Universal Account Number) (if applicable).

Please confirm your acceptance of this offer by signing and returning this letter by 30.10.2021.

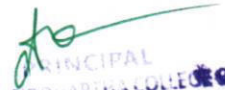
We are excited to have you join our Casper family!

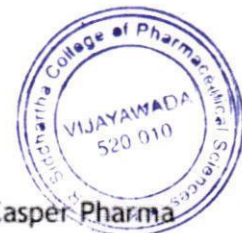
With best wishes,

For Casper Pharma Private Limited.,



K.V. Satyanarayana
Head - HR & Admin.


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



I am pleased to accept the above mentioned offer. I agree to join M/s. Casper Pharma Private Limited.

Signature: _____

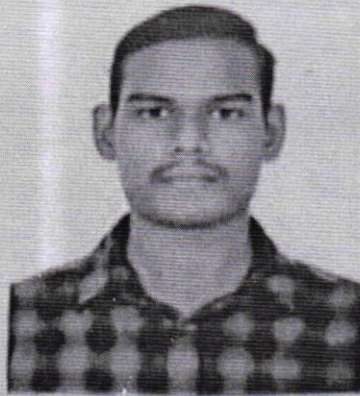
Date: _____

Name: _____

CASPER PHARMA PRIVATE LIMITED

CIN : U24233TG2016PTC102713

Plant : SEZ Unit : Sy. No.99/1, GMR Hyderabad Aviation SEZ, Mamidipally (V), Balapur (M), Shamshabad, Ranga Reddy District, Hyderabad, Telangana - 500 108. Email : info@casperpharmaindia.com.



M PAVAN KUMAR
Regulatory Affairs

ID: 200207

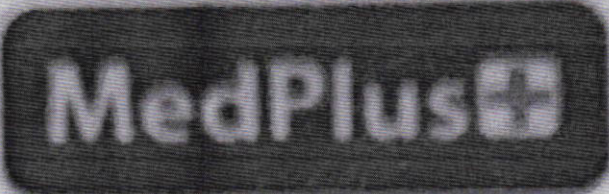
Blood Group: O+

[Signature]
Head
HR & Admin

[Signature]
Authorized Officer
SEZ

PRINCIPAL
K. S. R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
MAYAWAR P. K. 520 030





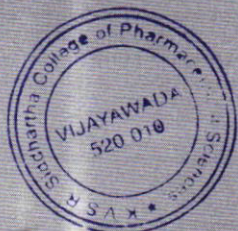
Parasa Gayathri

E Code :A12405

HRMS Code :MED0094046

Handwritten signature

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



Issuing Authority

Optival Health Solutions Pvt. Ltd

Road No. 176, D. No. 55-17-4, Pc1, 2nd Floor,

Industrial Estates, Auto Nagar, Vijayawada, AP- 520007.

M. Ph
Y18 MPH

Optival

Date: 14.12.2020

To,

Name: Parasa Gayathri

Dear Ms. Parasa Gayathri

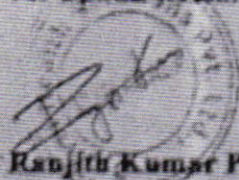
APPOINTMENT LETTER

1. We are pleased to appoint you as "Pharmacist - Pharmacy" effective from 14.12.2020 as per the terms & conditions of employment of the company as given Appendix 'A'. You will be eligible for Compensation & Benefits amounting to Rs. 11000/- (Rupees Eleven Thousand Only) per Month on Gross basis. As relevant to your job role, you are required to execute an Agreement cum surety bond as per Appendix -B.
2. Your initial place of work will be at "Gudiyada". However, please note that your services are transferable as per company policy.
3. This appointment is subject to satisfactory feedback upon reference checks and medical fitness during your engagement with the company.
4. You are required to sign as having accepted the terms & conditions of employment and return a copy of this Appointment letter to the HR Department, along with the Appendices which shall form part and parcel of terms of your employment with the Company.

We look forward to a long and fruitful association with you.

Yours sincerely,

For Optival Health Solutions Pvt Ltd

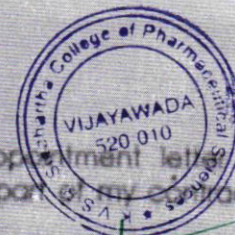


Ranjith Kumar P
Dept - HR

(Authorized signatory)

P. Gayathri

I have read and understood the contents of the Appointment letter including all the annexure/appendices and I accept the same as being part of my contract of employment without any reservations.



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

Optival Health Solutions Pvt. Ltd.

Rs. No.176, Door No. 55-17-4, PC-1, IInd Flor. Industrial Estate, Autonagar, Vijayawada - 520 007, A.P. T. 0866-2974604

Regd Off: D.No.11-6-56/A/NR, III floor, Opp IDPL Railway Siding, Moosapet, Kukatpally, Balanagar(M) 500072, RR(Dist). T. 040-6724-6724

CIN No: U85110TG2005PTC046B21 | Website: www.medplusindia.com | Email: optival@optivalhealth.com

Y18MPPC140009

Name : Polla Kavya

Emp. ID : 2777

Dept. : Bioanalytical

Blood : B+ve

DOB : 20-01-1997



Issuing Authority

AXIS
CLINICALS


Axis Clinicals Limited

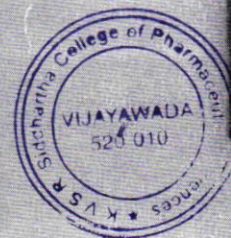
1-121/1, Survey Nos.66 (Part) & 67(Part)

Miyapur, Serilingampally, Hyderabad,

Telangana - 500049

T: +91 40 4040 8075 | contactus@axisclinical.com


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



418 MPPC140010



Search mail

Compose

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Starred

Snoozed

Sent

Drafts 2

More

Meet

New meeting

Join a meeting

Hangouts

Sai +

No recent chats
Start a new one

Offer Letter Inbox x



hr@pulsusgroup.org via rediffmailpro.com
to me

Dear Sai Ramya Srikakulam,

Congratulations & Greetings from OMICS GROUP !!

With reference to your application and the subsequent Interview "Job Trainee" at OMICS –Journals Division. Please note our offer of joining (List of documents enclosed), Offer of intent antecedents/documents.

You will receive a Gross salary of Rs 16000/- month with terminated basing on the performance.


You are requested to join on 12:00:00 AM(Monday) at 09

OMICS Group,

Building NO: 20,

Floor No: 09,

Raheja Mind Space, Hitech City,


**PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.**



Offer of Employment

Dated: 08-SEP-2021

Dear Ms. Maha Lakshmi U

Congratulations...!!

We are pleased to confirm our offer of employment to you at **Graviti Pharmaceuticals Pvt. Ltd**, (a group company of Yashoda Healthcare Services) at our Hyderabad facility. We have great confidence in your abilities and feel you will be able to make an outstanding contribution to our organization.

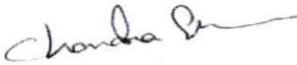
You will be paid a Consolidated Salary of Rs.1,80,000/- (Rupees One Lakh & Eighty Thousand).

A detailed appointment letter will be issued at the time of your joining with us.

We congratulate you on your appointment and wish you a long and successful career with us. We are confident that your contribution will take us further in our journey towards becoming world leaders. We assure you of our support for your professional development and growth.

Kindly intimate your acceptance for this offer immediately- failing which this offer stands withdrawn automatically. Also indicate your probable date of joining, which should not be later than 90 days, from the day of this offer.

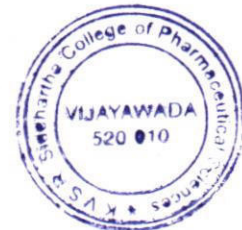
Yours Sincerely,



Authorized Signatory

Graviti Pharmaceuticals Pvt.Ltd.


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



Terms and Conditions:

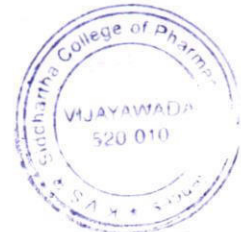
1. The employee is under a work agreement for _____ years
2. This offer is conditional upon satisfactory verification of your qualifications and work experience. All mandatory documents are to be submitted/given for verification within **one month** from the date of joining, failing which, the company reserves the right to revoke this offer.
3. The employee shall join the company by DD.MM.YY
4. All employees, irrespective of designation shall serve a notice period of 3 months post the date of resignation

ACCEPTANCE BY THE EMPLOYEE:

I, _____, have read and understood this letter and the same is acceptable to me.

Date: _____

Signature of the employee: _____



[Handwritten Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

SYMED LABS LIMITED

Corp. Office : 8-2-293/174/3, Beside BN Reddy Colony, Road No. 14, Banjara Hills,
Hyderabad-500 034, Telangana, INDIA. Tel : +91 40 23635000, Fax : +91 40 23549428.
URL : <http://www.symedlabs.com>, CIN No. U24231TG1998PLC029961

Date: 15-04-2021

To
Ms. Battula Jhancy,
D.No. 1-114, Lakshmi Puram,
PadavediMandal,
West Godavari Dt.

Dear Ms. Battula Jhancy,

LETTER OF OFFER

We are pleased to offer you the position of **Tr. Supervisor – Production** at our **Unit-VI** Situated at **Choutuppal**, on the following terms and conditions mutually discussed and agreed.

1. This Offer letter will take effect from the day of your joining the Company, which should not be later than **18-10-2021**. Non acceptance before the stipulated date shall make this offer redundant automatically.
2. Our detailed Appointment letter containing terms and conditions and your salary structure will be given along with your appointment letter. You should note that the salaries are consolidated.
3. Your appointment is conditional upon your being certified medically fit by doctor.

Please acknowledge your acceptance of our offer by signing and returning the duplicate copy of this letter.


◆ **You are requested to submit the following documents, which are mandatory, at the time of joining. Appointment letter will not be issued in absence of any of these documents.**

- 1) Doctor's Certificate certifying medical fitness along with blood group.
- 2) Photocopies of all educational certificates (right from SSC), mark sheets (including all semesters) and service certificates from all the previous employers. Please bring originals for the verification.
- 3) Any document issued by your last employer that shows that you have been relieved from their services, Latest 3 month's Pay slip from your previous Employer and Latest 6 Months Bank Statement.
- 4) Five pass port size and one stamp size of recent photographs.

You are requested to report at Corporate/Admin office address by **9:30 am**. Please ask at front office to complete joining formalities.

Looking forward to having you onboard

With warm regards,
For SyMed Labs Limited


Authorized Signatory

I accept the above offer and my date of joining is: _____

Name: _____ Date: _____

Signature: _____




PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520-010

Annexure - A	
CTC Particulars	
Employee Name :	Ms.P Sirisha
Designation:	Tr. Supervisor
Department:	Production
Location:	Unit-VI
Particulars	Amount
<u>A. Monthly Salary</u>	
Basic	7,250
HRA	2,900
Conveyance	2,900
Performance allowance	1,450
Attendance Bonus*	1,500
Monthly Gross (A)	16,000
<u>B. Annual Benefits</u>	
Bonus/Exgratia	1,400
Performance Bonus	
Sub Total (B)	1,400
<u>C. Retirement Benefits</u>	
P.F 12%	1,800
Gratuity 4.81%	349
ESI Management Contribution	471
Sub Total (C)	2,620
<u>D. Other Benefits</u>	
Meals Expenses	1,000
Medical Insurance	-
Group Personal Accident Insurance Coverage	
Sub Total (D)	1,000
Grand Total (A+B+C+D) Per Month	21,020
CTC Per Annum	2,52,240
Deduction:	
PT	150
PF	1,800
ESI	120
Meals	275
Note :	
* Attendance Bonus will pay as per Company Attendance Bonus Rules	
* Annual Performance Bonus payout is based on company and individual Performance as per the policy	
* Any tax liabilities arising out of the remuneration will be deducted as per the Income Tax rules	

[Handwritten Signature]



[Handwritten Signature]

SYMED LABS LIMITED

Corp. Office : 8-2-293/174/3, Beside BN Reddy Colony, Road No. 14, Banjara Hills,
Hyderabad-500 034, Telangana, INDIA. Tel : +91 40 23635000, Fax : +91 40 23549428.
URL : <http://www.symedlabs.com>, CIN No. U24231TG1998PLC029961

Date: 15-04-2021

To
Ms. Kameswari Priyanka Devarakonda,
D.No. 76-9-14, Opp. Gandhi Co-Op Bank,
Bhavanipuram, Vijaywada

Dear Ms. Kameswari Priyanka Devarakonda,

LETTER OF OFFER

We are pleased to offer you the position of **Tr. Supervisor – Production** at our **Unit-VI** Situated at **Choutuppal**, on the following terms and conditions mutually discussed and agreed.

1. This Offer letter will take effect from the day of your joining the Company, which should not be later than **18-10-2021**. Non acceptance before the stipulated date shall make this offer redundant automatically.
2. Our detailed Appointment letter containing terms and conditions and your salary structure will be given along with your appointment letter. You should note that the salaries are consolidated.
3. Your appointment is conditional upon your being certified medically fit by doctor.

Please acknowledge your acceptance of our offer by signing and returning the duplicate copy of this letter.

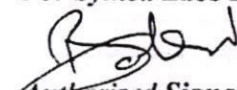
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- 3) Any document issued by your last employer that shows that you have been relieved from their services, Latest 3 month's Pay slip from your previous Employer and Latest 6 Months Bank Statement.
- 4) Five pass port size and one stamp size of recent photographs.

You are requested to report at Corporate/Admin office address by **9:30 am**. Please ask at front office to complete joining formalities.

Looking forward to having you onboard

With warm regards,
For Symed Labs Limited


Authorized Signatory

I accept the above offer and my date of joining is: _____

Name: _____ Date: _____

Signature: _____




PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010

SYMED LABS LIMITED

Corp. Office : 8-2-293/174/3, Beside BN Reddy Colony, Road No. 14, Banjara Hills,
Hyderabad-500 034, Telangana, INDIA. Tel : +91 40 23635000, Fax : +91 40 23549428.
URL : <http://www.symedlabs.com>, CIN No. U24231TG1998PLC029961

Date: 15-04-2021

To
Ms. Patibandla Sirisha
D.No. 76-9-14, Opp. Gandhi Co-Op Bank,
Bhavanipuram, Vijaywada

Dear Ms. Patibandla Sirisha,

LETTER OF OFFER

We are pleased to offer you the position of **Tr. Supervisor – Production** at our **Unit-VI** Situated at **Choutuppal**, on the following terms and conditions mutually discussed and agreed.

1. This Offer letter will take effect from the day of your joining the Company, which should not be later than **18-10-2021**. Non acceptance before the stipulated date shall make this offer redundant automatically.
2. Our detailed Appointment letter containing terms and conditions and your salary structure will be given along with your appointment letter. You should note that the salaries are consolidated.
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- 3) Any document issued by your last employer that shows that you have been relieved from their services, Latest 3 month's Pay slip from your previous Employer and Latest 6 Months Bank Statement.
- 4) Five pass port size and one stamp size of recent photographs.

You are requested to report at Corporate/Admin office address by **9:30 am**. Please ask at front office to complete joining formalities.

Looking forward to having you onboard

With warm regards,
For Symed Labs Limited


Authorized Signatory

I accept the above offer and my date of joining is: _____

Name: _____ Date: _____

Signature: _____


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010

1

SEVIS ID: N0032209077

SURNAME/PRIMARY NAME Maradani	GIVEN NAME Brahmi	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Brahmi Maradani	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH GUDIVADA	DATE OF BIRTH 27 DECEMBER 1996	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Elizabeth Ford Assistant Director	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 21 JULY 2021
START OF CLASSES 23 AUGUST 2021	PROGRAM START/END DATE 20 AUGUST 2021 - 14 DECEMBER 2023	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,988	Personal Funds	\$ 0
Living Expenses	\$ 13,782	Funds From This School	\$
Expenses of Dependents (0)	\$	Family Funds	\$ 33,801
Books, Insurance	\$ 4,031	On-Campus Employment	\$
TOTAL	\$ 33,801	TOTAL	\$ 33,801

REMARKS

Tuition/fees subject to change.

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

x Elizabeth Ford Digitally signed by Elizabeth Ford
Date: 2021.07.06 14:34:16 -05'00'

SIGNATURE OF: Elizabeth Ford, Assistant Director	DATE ISSUED 06 July 2021	PLACE ISSUED Denton, TX
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STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

X

SIGNATURE OF: Brahmi Maradani	DATE
NAME OF PARENT OR GUARDIAN	SIGNATURE
	ADDRESS (city/state or province/country)
	DATE



SEVIS ID: N0032209077 (F-1)

NAME: **Brahmi Maradani**

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE

CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		

ah
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



7 - YIU phd 140007 2014-20 pharm - D

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031510772

SURNAME/PRIMARY NAME Alam	GIVEN NAME Mounika	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Mounika Alam	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH ALAKURAPADU	DATE OF BIRTH 03 JUNE 1996	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Timothy Schmidt Senior Immigration Advisor	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 09 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 08 JANUARY 2021 - 31 MAY 2023	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,754	Personal Funds	\$ 0
Living Expenses	\$ 13,189	Funds From This School	\$
Expenses of Dependents (0)	\$	Family Funds	\$ 32,718
Books, Insurance	\$ 3,775	On-Campus Employment	\$
TOTAL	\$ 32,718	TOTAL	\$ 32,718

REMARKS

Tuition/fees subject to change.

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

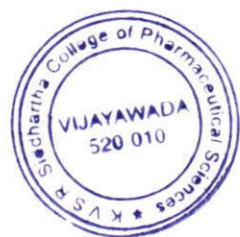
<input checked="" type="checkbox"/> Timothy Schmidt <small>Digitally signed by Timothy Schmidt Date: 2020.09.18 11:34:32 -0500</small>	DATE ISSUED 18 September 2020	PLACE ISSUED Denton, TX
SIGNATURE OF: Timothy Schmidt, Senior Immigration Advisor		

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

<input checked="" type="checkbox"/>		
SIGNATURE OF: Mounika Alam	DATE	
	<input checked="" type="checkbox"/>	
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)
		DATE

Handwritten signature
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



INSTRUCTIONS TO STUDENTS

STUDENT ATTESTATION. You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

FORM I-20. The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

VISA APPLICATION. You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

ADMISSION. When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA. Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

EMPLOYMENT. Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

PERIOD OF STAY. You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

EXTENSION OF PROGRAM. If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

SCHOOL TRANSFER. To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

NOTICE OF ADDRESS. When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

REENTRY. F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL. DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

PENALTY. To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

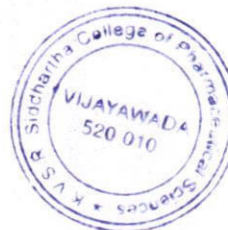
ISSUANCE OF FORM I-20. DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

ENDORSEMENT OF PAGE 2 FOR REENTRY. If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

RECORDKEEPING. DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

AUTHORITY FOR COLLECTING INFORMATION. Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

REPORTING BURDEN. U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.



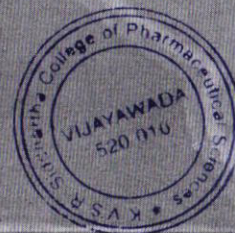
UNI[®]

UNIVERSITY OF NORTH TEXAS[®]



Maradani, Brahmi
Student

Signature
PRINCIPAL
K.V.S.R. SUDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-820 010.



Issue: 1

3 05 1997 10:00 AM

F. A y14phd 140007 .2014-20 pharm.D

2



Id card UNT - mounika alam.jpeg
 Id card UNT - mounika alam.jpeg
 Open with Pixlr Express
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Details

the
PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.



SEVIS ID: N0031510772 (F-1)

NAME: Mounika Alam

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
_____	_____	X	_____	_____
_____	_____	X	_____	_____
_____	_____	X	_____	_____
_____	_____	X	_____	_____


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





CONESTOGA
Connect Life and Learning

INTERNATIONAL

Pharm.D 2014-20

Conestoga College Institute of Technology and
Advanced Learning
Office of the Registrar

8-y14 phd140008

299 Doon Valley Dr.
Kitchener, Ontario N2G 4M4

3

CONESTOGA COLLEGE INTERNATIONAL EDUCATION OFFICE

Date: May 21, 2021

Divya Arangi
29 D Block, Sukhibhava Layout, Chittivalasa, Bheemunipatnam
Visakhapatnam Urban, Andhra Pradesh
531162, India

Student Number: 8766405

Dear Divya Arangi

Congratulations on your full-time acceptance to Conestoga College. Your letter of acceptance can be used to apply for your study permit at the Canadian Embassy or Canadian High Commission in your country. As it can often take several weeks to process your study permit, please apply as soon as possible.

Please also be sure to visit our International Scholarship website for scholarship opportunities.

B.Y.O.D. - Bring Your Own Device

Some programs require you to bring your own device. It is your responsibility to ensure that you bring the appropriate device for your program. Please visit the Conestoga College website to verify if your intended program requires you to bring your own device.

As a student committed to becoming a health care or community service professional, you must complete health and safety requirements to be eligible for work-integrated learning (WIL) experiences. These prerequisites are required by legislation and WIL agencies for all persons working in this sector.

FOR IMMEDIATE ACTION : To locate information on your WIL Document Requirements, please visit our myConestoga webpage at www.myconestoga.ca. Please use the below login information to access the page.

Login ID: WILdocumentforms

Password: !International3

Please read through the **Welcome Page** information and then proceed to locate your **WIL Document Forms** found under the **WIL Document Forms tab**. Please select your forms based on your Program of study.

DEADLINES: Your WIL document requirements must be completed prior to attending any WIL experience. Come and see the Nurse as soon as possible upon arrival to Canada. If you have any questions about these requirements after viewing the myConestoga webpage, please do not hesitate to contact **WIL Document Services** at WILdocumentservices@conestogac.on.ca or 519-748-5220 ext. 3101 should you have any questions.

Information regarding **mandatory program and international students' orientations** will be sent to you approximately 8 weeks before your program start date. **These mandatory events will be held prior to the first day of classes.** Please plan your arrival date accordingly.

Note: International students who have been accepted to a program with a co-op placement, an internship or an unpaid field education component, even if the activity is paid or unpaid, on or off campus, or full-time or part-time are required to have a co-op work permit. This information is provided on your letter of acceptance. There is no cost to apply for this permit. The work permit required for co-op placements, internships or unpaid field education can only be used for activities assigned as part of your program of study. It is your responsibility to ensure you have the proper authorization.

For up-to-date information, and to apply on-line for a co-op work permit, please visit Citizenship and Immigration Canada (CIC). Should you have any questions regarding this process, please contact an International Student Advisor in the International Office at https://international.conestogac.on.ca/contact.

We look forward to welcoming you to Canada and Conestoga College.

Best wishes,

Anita Couto
Director, International Enrolment and Operations
Conestoga College

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Conestoga College: Letter of Acceptance

Date of Issue: May 21, 2021

PERSONAL INFORMATION

Family Name: Arangi	CAQ: No
Given Name: Divya	Student's Full Mailing Address: 29 D Block, Sukhibhava Layout, Chittivalasa, Bheemunipatnam Visakhapatnam Urban , Andhra Pradesh 531162, India
Date of Birth: May 13, 1996	
Student ID #: 8766405	Referring Agent (if applicable): CanEd Consultants

INSTITUTIONAL INFORMATION

Full Name and Address of Institution: Conestoga College 299 Doon Valley Dr. Kitchener, Ontario N2G 4M4, Canada Phone: +1 519 748 5220 X3556	Type of School/Institution: Public Website and Email Address: http://www.conestogac.on.ca internationaladmissions@conestogac.on.ca Designated Learning Institution #: O19376158572
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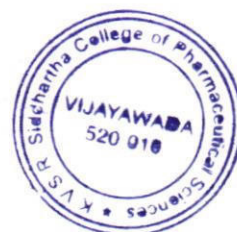
PROGRAM INFORMATION

Program Status: Full-Time Program of Study: Health Care Administration and Service Management (1449) Credential: Ontario College Graduate Certificate (Post-Graduate) Campus: Waterloo Campus Program Length: 4 Semester(s) (Consecutive) Level of Study: Level 1 First Day of Classes: January 10, 2022 Estimated End Date: April 22, 2023 Hours of Instruction: 24 (estimated) Exchange Program: No NOTE: Programs that are being offered through remote (online) delivery are temporary. It is the College's intention for classes to return to in-person delivery when possible.	Internship/Work practicum: Not Available Scholarship/Teaching Assistantship/Other Financial Aid: No
Estimated tuition fee for the first academic year of the program (8) months of study: \$17,162.20, Cdn Estimated tuition fee for the first semester of the program (4) months of study: \$8,898.70, Cdn Tuition varies by program. Please check the Conestoga College website for exact fees. Please Note: This program cannot guarantee late arrivals. Please plan to attend your orientation and begin your studies on the first day of classes. Note: The College reserves the right to close registration when capacity in the program has been reached. It is important to follow all required steps and confirm your registration as soon as possible.	This letter of acceptance replaces all previous offers issued and will expire unless: <ul style="list-style-type: none"> A \$1,500.00 tuition deposit is received by the College on or before: November 26, 2021 The balance of the first semester tuition fees are paid and received by the College by: November 26, 2021 Proof of study permit authorization/approval letter is uploaded to the Ontariocolleges.ca International Applicant Portal. Note: If the above payments are not received by the College before the dates listed above, you may not be eligible for the program. Registration into the program is based on confirmation of your IRCC visa approval document. Please email us a copy of this confirmation as soon as it is received at International admissions internationaladmissions@conestoga.on.ca
Conditions of Acceptance: <ul style="list-style-type: none"> NA 	

Signature and name of institution representative:
Anita Couto, Director, International Enrolment and Operations



PRINCIPAL
K. S. R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



10 - Yr uph d 160011

2014-20

Dileep Naidu Bendu

plam-d

(4)

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031377378

SURNAME/PRIMARY NAME Bendu	GIVEN NAME Dileep Naidu	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Dileep Naidu Bendu	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH SRIKAKULAM	DATE OF BIRTH 24 NOVEMBER 1995	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Jamal King Intl Student & Scholar Services Advisor	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 09 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 08 JANUARY 2021 - 31 MAY 2023	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,754	Personal Funds	\$ 0
Living Expenses	\$ 13,189	Funds From This School	\$
Expenses of Dependents (0)	\$	Family Funds	\$ 32,718
Books, Insurance	\$ 3,775	On-Campus Employment	\$
TOTAL	\$ 32,718	TOTAL	\$ 32,718

REMARKS

REMARKS

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

X Jamal King Digitally signed by Jamal King Date: 2020.08.05 11:31:53 -05'00' **DATE ISSUED** 05 August 2020 **PLACE ISSUED** Denton, TX

SIGNATURE OF: Jamal King, Intl Student & Scholar Services Advisor

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

X

SIGNATURE OF: Dileep Naidu Bendu **DATE**

X

NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE
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[Signature]

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

SEVIS ID: N0031377378 (F-1)

NAME: Dileep Naidu Bendu

EMPLOYMENT AUTHORIZATIONS

--

CHANGE OF STATUS/CAP-GAP EXTENSION

--

AUTHORIZED REDUCED COURSE LOAD

--

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		

SEVIS ID: N0031377378 (F--1)

NAME: Dileep Naidu Bendu

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

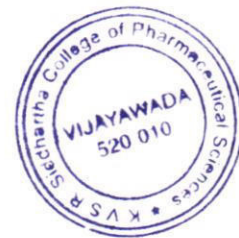
CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

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Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



SEVIS ID: N0031371778

SURNAME/PRIMARY NAME Kancherla	GIVEN NAME Hindola	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Hindola Kancherla	PASSPORT NAME Kancherla Hindola	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH Vijayawada	DATE OF BIRTH 22 JANUARY 1997	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME Indiana University Indiana U Purdue U Indianapolis	SCHOOL ADDRESS International Affairs, 902 W New York St, ES 2126, Indianapolis, IN 46202
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Joslyn Britten Lead Graduate Credential Analyst	SCHOOL CODE AND APPROVAL DATE CHI214F10103008 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Medical Informatics 51.2706	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 16 JULY 2021
START OF CLASSES 23 AUGUST 2021	PROGRAM START/END DATE 15 AUGUST 2021 - 10 AUGUST 2023	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 20,183	Personal Funds	\$ 30,729
Living Expenses	\$ 15,046	Department Funds	\$ 4,500
Expenses of Dependents (0)	\$	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	\$ 35,229	TOTAL	\$ 35,229

REMARKS

SCHOOL ATTESTATION

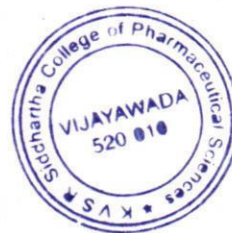
I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

<input checked="" type="checkbox"/>	DATE ISSUED 25 January 2021	PLACE ISSUED Indianapolis, IN
SIGNATURE OF: Joslyn Britten, Lead Graduate Credential Analyst		

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

<input checked="" type="checkbox"/>	SIGNATURE OF: Hindola Kancherla	DATE
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)
		DATE



SEVIS ID: N0031371778 (F-1)

NAME: Hindola Kancherla

EMPLOYMENT AUTHORIZATIONS

[Empty box for Employment Authorizations]

CHANGE OF STATUS/CAP-GAP EXTENSION

[Empty box for Change of Status/CAP-Gap Extension]

AUTHORIZED REDUCED COURSE LOAD

[Empty box for Authorized Reduced Course Load]

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

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Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		

[Handwritten Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



INSTRUCTIONS TO STUDENTS

STUDENT ATTESTATION. You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

FORM I-20. The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

VISA APPLICATION. You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

ADMISSION. When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA. Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

EMPLOYMENT. Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

PERIOD OF STAY. You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

EXTENSION OF PROGRAM. If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

SCHOOL TRANSFER. To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

NOTICE OF ADDRESS. When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

REENTRY. F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL. DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

PENALTY. To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

ISSUANCE OF FORM I-20. DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

ENDORSEMENT OF PAGE 2 FOR REENTRY. If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

RECORDKEEPING. DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

AUTHORITY FOR COLLECTING INFORMATION. Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

REPORTING BURDEN. U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer, Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 # Street, NW, Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.

Handwritten signature
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



September 25, 2020

Ms. Hindola Kancherla
1-208/1, GOGINENI TOWERS, GUNTUPALLI
VIJAYAWADA, ANDPRA 521241;
India

Dear Ms. Kancherla:

Congratulations! I am pleased to confirm your official admission to graduate study at Indiana University-Purdue University Indianapolis (IUPUI) for the spring 2021 term to pursue a Health Informatics MS degree.

Welcome to our community! IUPUI students are as diverse as the city around them; coming from many walks of life and varied ethnic cultures, they bring with them different personal, academic, and professional goals. IUPUI has over 30,000 students representing all 50 states and 141 countries. In addition to being a part of two world-class universities, our students also have unparalleled opportunities and resources at their fingertips by living in downtown Indianapolis, the nation's 13th largest city.

IUPUI does everything possible to make students feel at home on campus. This culture of welcoming starts before arrival and goes beyond graduation. Please review the attached documents to learn more about the services available to you regarding orientation, enrollment, housing, and setting up your IUPUI accounts.

Congratulations again on your admission. As you review the enclosed information, please stay in touch and let us know if there is any way we can be helpful to you. You can e-mail us with questions at oiagrad@iupui.edu. We hope to welcome you to Indianapolis soon.

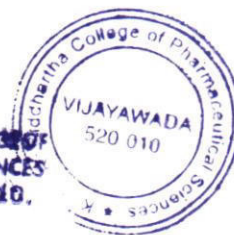
Sincerely,

John Mann

Director of International Admissions

Copyright © 2014 The Trustees of Indiana University | Copyright Complaints

Handwritten signature in green ink above the stamp.
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



ice. 444 phd 140015 pharm-D 2014-20

6

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031378753

SURNAME/PRIMARY NAME Kavuri	GIVEN NAME Pavani Jyothi	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Pavani Jyothi Kavuri	PASSPORT NAME Kavuri Pavani Jyothi	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH Vijayawada	DATE OF BIRTH 04 DECEMBER 1996	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME Indiana University Indiana U Purdue U Indianapolis	SCHOOL ADDRESS International Affairs, 902 W New York St, ES 2126, Indianapolis, IN 46202
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Joslyn Britten Lead Graduate Credential Analyst	SCHOOL CODE AND APPROVAL DATE CHI214F10103008 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Medical Informatics 51.2706	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 13 DECEMBER 2020
START OF CLASSES 19 JANUARY 2021	PROGRAM START/END DATE 12 JANUARY 2021 - 31 DECEMBER 2022	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 20,183	Personal Funds	\$ 30,729
Living Expenses	\$ 15,046	Department Funds	\$ 4,500
Expenses of Dependents (0)	\$	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	\$ 35,229	TOTAL	\$ 35,229

REMARKS

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

<input checked="" type="checkbox"/> <i>Joslyn Britten</i> SIGNATURE OF: Joslyn Britten, Lead Graduate Credential Analyst	DATE ISSUED 25 September 2020	PLACE ISSUED Indianapolis, IN
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STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

<input checked="" type="checkbox"/>	SIGNATURE OF: Pavani Jyothi Kavuri	DATE
<input checked="" type="checkbox"/>	SIGNATURE	ADDRESS (city/state or province/country)
NAME OF PARENT OR GUARDIAN	SIGNATURE	DATE



SEVIS ID: N0031378753 (F-1)

NAME: Pavani Jyothi Kavuri

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD


CURRENT SESSION DATES

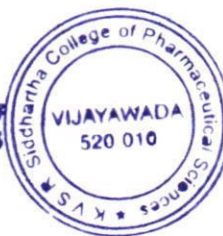
CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



INSTRUCTIONS TO STUDENTS

STUDENT ATTESTATION. You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

FORM I-20. The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

VISA APPLICATION. You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

ADMISSION. When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA. Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

EMPLOYMENT. Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

PERIOD OF STAY. You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

EXTENSION OF PROGRAM. If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

SCHOOL TRANSFER. To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

NOTICE OF ADDRESS. When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

REENTRY. F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL. DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

PENALTY. To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

ISSUANCE OF FORM I-20. DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

ENDORSEMENT OF PAGE 2 FOR REENTRY. If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

RECORDKEEPING. DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

AUTHORITY FOR COLLECTING INFORMATION. Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

REPORTING BURDEN. U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.



IUPUI CRIMSONCARD

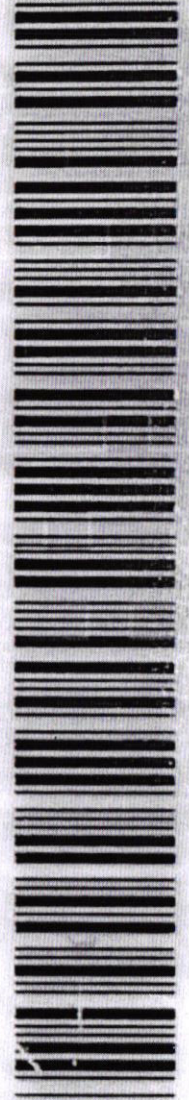
**KAVURI
PAVANI JYOTHI**



**STUDENT
IUPUI**

Expires 2026Dec28

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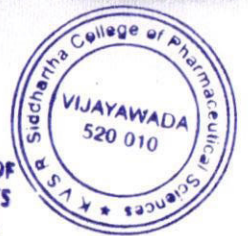


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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



15. Y14 phd 140016

2014-20

pharm-D

Vineetha Kilaru

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031329968

SURNAME/PRIMARY NAME Kilaru	GIVEN NAME Vineetha	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Vineetha Kilaru	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH GUDIVADA	DATE OF BIRTH 05 SEPTEMBER 1996	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Timothy Schmidt Senior Immigration Advisor	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 09 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 08 JANUARY 2021 - 31 MAY 2023	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,754	Personal Funds	\$ 0
Living Expenses	\$ 13,189	Funds From This School	\$
Expenses of Dependents (0)	\$	Family Funds	\$ 32,718
Books, Insurance	\$ 3,775	On-Campus Employment	\$
TOTAL	\$ 32,718	TOTAL	\$ 32,718

REMARKS

REMARKS

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

Timothy Schmidt Digitally signed by Timothy Schmidt
Date: 2020.09.01 21:52:00 -05'00'

SIGNATURE OF: Timothy Schmidt, Senior Immigration Advisor	DATE ISSUED 01 September 2020	PLACE ISSUED Denton, TX
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STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

SIGNATURE OF: Vineetha Kilaru	DATE
NAME OF PARENT OR GUARDIAN	SIGNATURE
ADDRESS (city/state or province/country)	DATE

[Handwritten Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



SEVIS ID: N0031329968 (F-1)

NAME: Vineetha Kilaru

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE
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TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
_____	_____	X	_____	_____
_____	_____	X	_____	_____
_____	_____	X	_____	_____
_____	_____	X	_____	_____

[Handwritten Signature]

PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.



Y14PHD-16

TOULOUSE GRADUATE SCHOOL

390

UNIVERSITY OF NORTH TEXAS

Student ID #: 11434187
Semester: 2020 Fall
Tuition: Foreign Non Resident
Major (Program/Plan): INSC-MS

February 19, 2020

Vineetha Kilaru
H.No:50,56-5-6,High School Road,Ram
New Postal Colony, Patamata
Vijayawada 520010
India

Dear Ms. Kilaru:

Congratulations! You have been admitted to work toward the Master of Science in Information Science program. UNT provides an exciting place to pursue your graduate education and we are committed to your success. At UNT you will find the education and support you need to realize your goals and expand your horizons.

You are now eligible to register during the upcoming enrollment period. Please visit your student portal at my.unt.edu for important information about enrollment dates, registration and class schedules.

International students must consult with the International Advising Office for Registration Clearance.

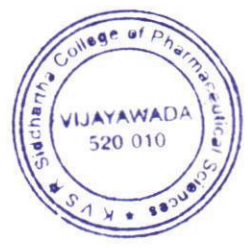
Your Certificate of Eligibility (only for F-1 and J-1 visa holders) will be issued by International Student and Scholar Services. If you have any questions concerning this form, please contact International Student and Scholar Services at 940-565-2195 or email them at I20@unt.edu.

I look forward to having you as a graduate student at the University of North Texas and becoming a part of the excitement of discovering real solutions, creating new opportunities and making a difference in the world. Please contact us if you have any questions about making the most of your graduate education.

Sincerely,

Victor Prybutok,
Vice Provost for Graduate Education and
Dean of the Toulouse Graduate School

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Y148110-16



TOULOUSE GRADUATE SCHOOL

UNIVERSITY OF NORTH TEXAS

Student ID #: 11434187
Semester: 2020 Fall
Tuition: Foreign Non Resident
Major (Program/Plan): INSC-MS

February 19, 2020

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H.No:50,56-5-6,High School Road,Ram
New Postal Colony, Patamata
Vijayawada 520010
India

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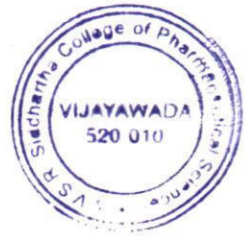
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Sincerely,

Victor Prybutok,
Vice Provost for Graduate Education and
Dean of the Toulouse Graduate School

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

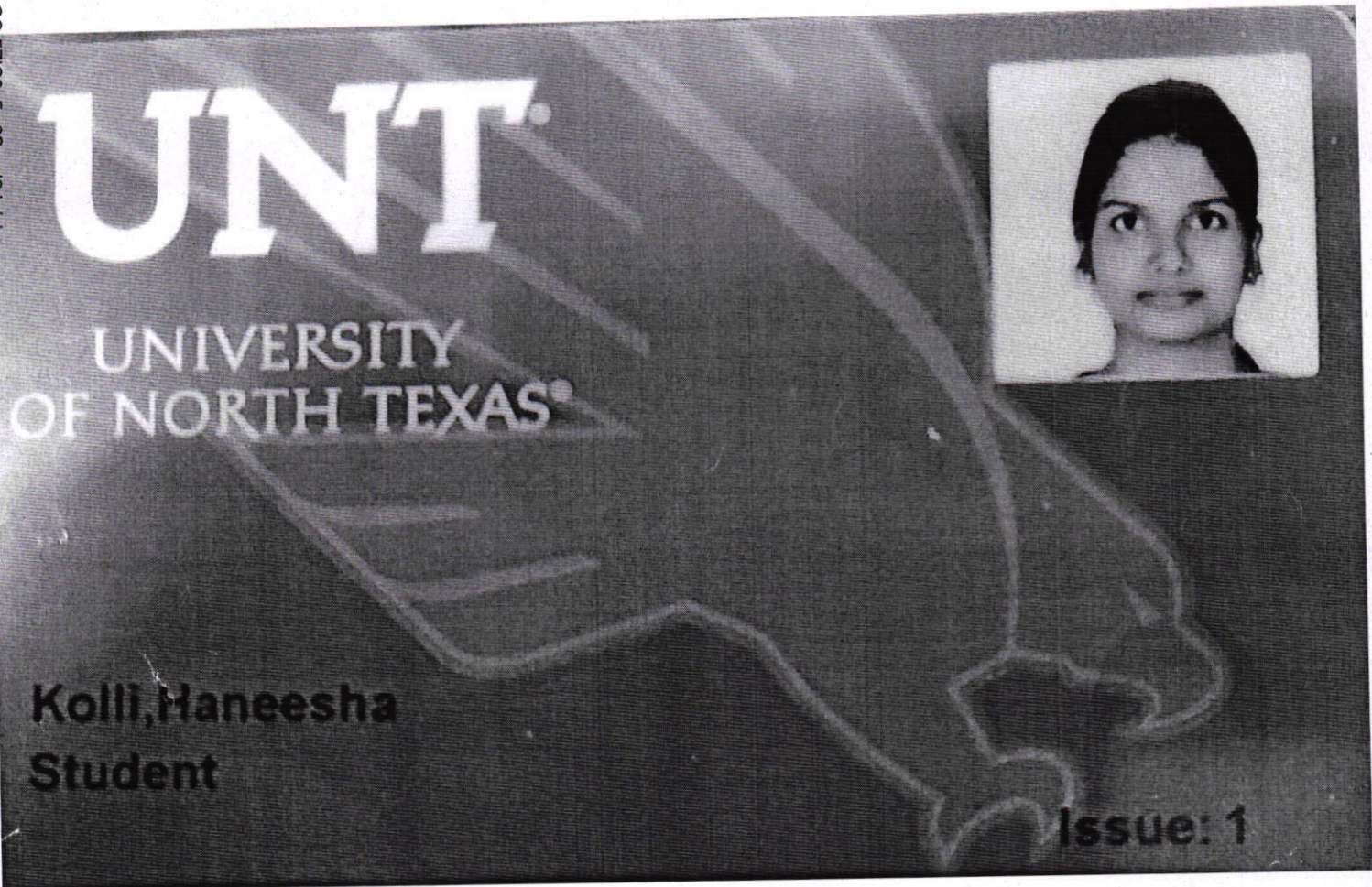


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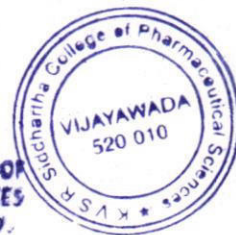
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PRINCIPAL
K.V.S.R. SIDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



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phamm-D

2014-20

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031372742

SURNAME/PRIMARY NAME Kolli	GIVEN NAME Haneesha	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Haneesha Kolli	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH VIJAYAWADA	DATE OF BIRTH 19 SEPTEMBER 1996	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Nausheen Qureshi Student and Program Assistant	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 09 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 08 JANUARY 2021 - 31 MAY 2023	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,754	Personal Funds	\$ 0
Living Expenses	\$ 13,189	Funds From This School	\$
Expenses of Dependents (0)	\$	Family Funds	\$ 32,718
Books, Insurance	\$ 3,775	On-Campus Employment	\$
TOTAL	\$ 32,718	TOTAL	\$ 32,718

REMARKS

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

<input checked="" type="checkbox"/> Nausheen Qureshi <small>Digitally signed by Nausheen Qureshi Date: 2020.08.03 15:20:46 -0500</small>	DATE ISSUED 03 August 2020	PLACE ISSUED Denton, TX
SIGNATURE OF: Nausheen Qureshi, Student and Program Assistant		

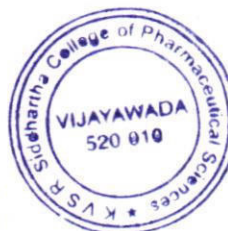
STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

<input checked="" type="checkbox"/>		
SIGNATURE OF: Haneesha Kolli	DATE	
	<input checked="" type="checkbox"/>	
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)
		DATE

[Handwritten Signature]

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



SEVIS ID: N0031372742 (F-1)

NAME: Haneesha Kolli

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		

AKK
PRINCIPAL
S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 020.



9

SEVIS ID: N0031419295

SURNAME/PRIMARY NAME Nimmagadda	GIVEN NAME Sree Lakshmi	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Sree Lakshmi Nimmagadda	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH VIJAYAWADA	DATE OF BIRTH 26 OCTOBER 1996	
FORM ISSUE REASON CONTINUED ATTENDANCE - UPDATED	ADMISSION NUMBER 562408505A2	

SCHOOL INFORMATION	
SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Rekha Nair Senior Immigration Advisor	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY		
EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 09 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 08 JANUARY 2021 - 15 MAY 2023	

FINANCIALS	
ESTIMATED AVERAGE COSTS FOR: 9 MONTHS	STUDENT'S FUNDING FOR: 9 MONTHS
Tuition and Fees \$ 15,754	Personal Funds \$ 32,718
Living Expenses \$ 13,189	Funds From This School \$
Expenses of Dependents (0) \$	Funds From Another Source \$
Books, Insurance \$ 3,775	On-Campus Employment \$
TOTAL \$ 32,718	TOTAL \$ 32,718

REMARKS

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

X [Signature] **DATE ISSUED** 23 February 2021 **PLACE ISSUED** Denton, TX

SIGNATURE OF: Rekha Nair, Senior Immigration Advisor

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

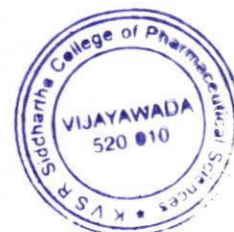
X

SIGNATURE OF: Sree Lakshmi Nimmagadda **DATE**

X

NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE
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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



SEVIS ID: N0031419295 (F-1)

NAME: Sree Lakshmi Nimmagadda

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE
11 JANUARY 2021

CURRENT SESSION END DATE
01 MAY 2021

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
<i>[Signature]</i>	DSD	X <i>[Signature]</i>	02/23/2021	Durham, Tx
		X		
		X		
		X		

[Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



INSTRUCTIONS TO STUDENTS

STUDENT ATTESTATION. You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

FORM I-20. The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

VISA APPLICATION. You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

ADMISSION. When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA. Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

EMPLOYMENT. Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

PERIOD OF STAY. You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

EXTENSION OF PROGRAM. If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

SCHOOL TRANSFER. To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

NOTICE OF ADDRESS. When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

REENTRY. F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL. DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

PENALTY. To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

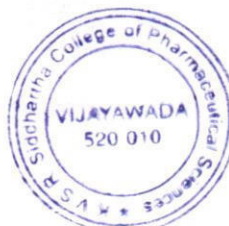
ISSUANCE OF FORM I-20. DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

ENDORSEMENT OF PAGE 2 FOR REENTRY. If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

RECORDKEEPING. DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

AUTHORITY FOR COLLECTING INFORMATION. Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

REPORTING BURDEN. U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.



UNT[®]

UNIVERSITY
OF NORTH TEXAS[®]



Nimmagadda, Sree Lakshmi
Student

Issue: 1


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



10

23-414phd140024 from D 2014-20

STUDENT

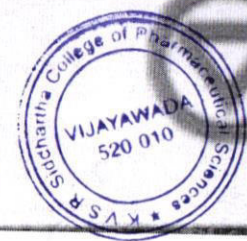
Nikhila
Paladugu

G02197655

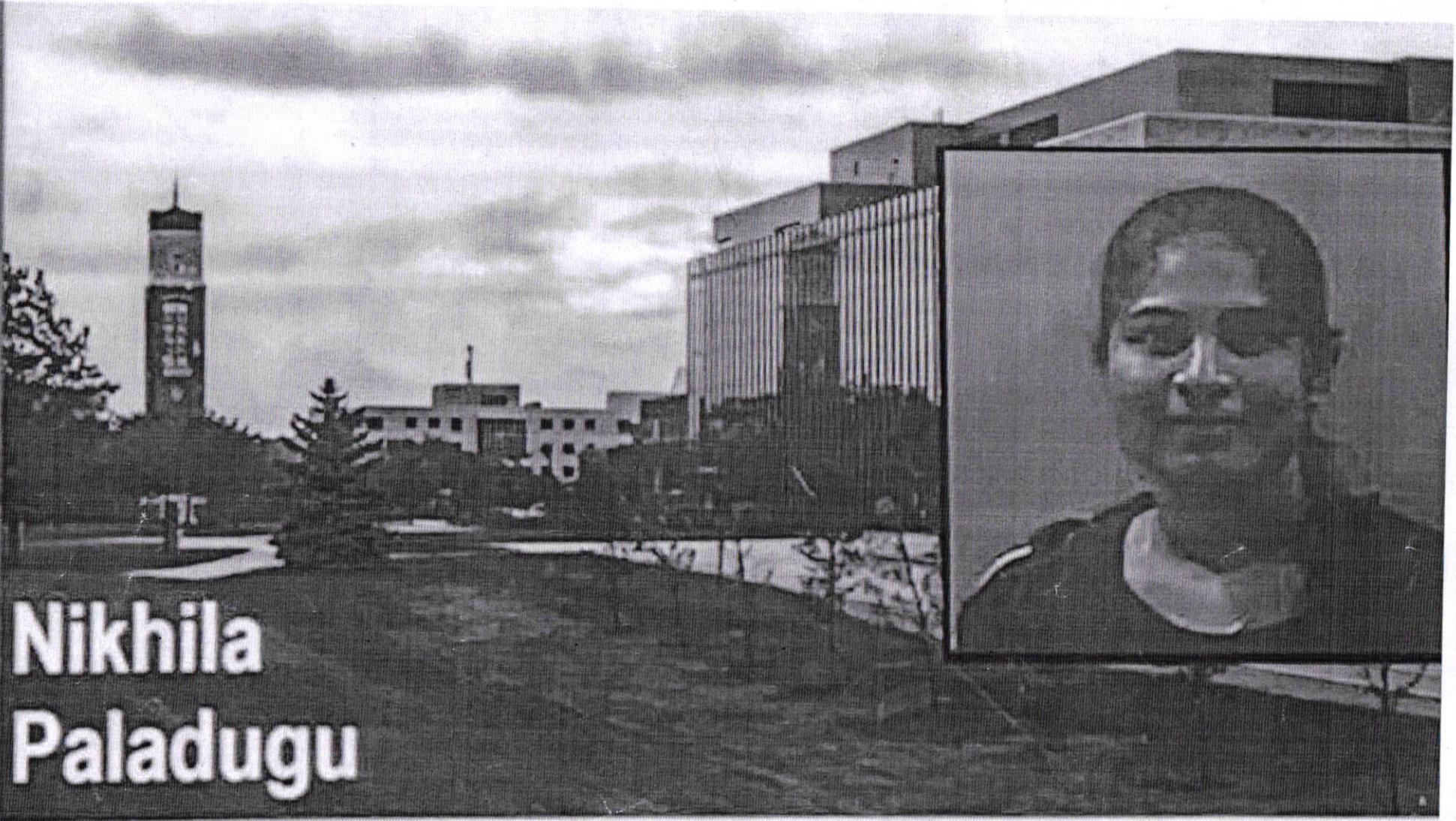
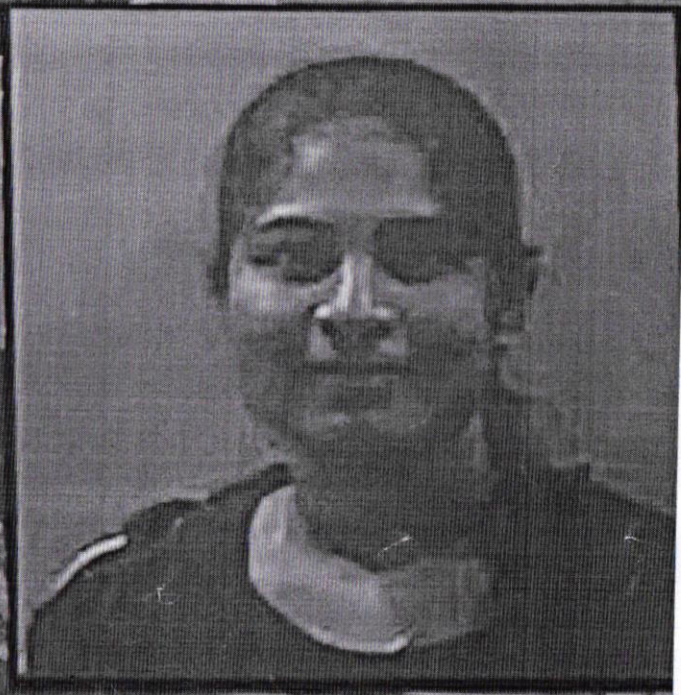
Expires: 5/2025

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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



GRAND VALLEY
STATE UNIVERSITY



23. YIUPHDI140024

pharm-D (2018-20)

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031392519

SURNAME/PRIMARY NAME Paladugu	GIVEN NAME Nikhila	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Nikhila Paladugu	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH	DATE OF BIRTH 03 JULY 1997	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME Grand Valley State University Allendale Campus	SCHOOL ADDRESS 150 Student Services Building, 1 Campus Drive, Allendale, MI 49401
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL William Widmaier Associate Registrar	SCHOOL CODE AND APPROVAL DATE DET214F00543000 06 AUGUST 2002

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Bioinformatics 26.1103	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 06 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 05 JANUARY 2021 - 05 JANUARY 2024	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 13,250	Personal Funds	\$ 0
Living Expenses	\$ 9,250	Funds From This School	\$ 0
Expenses of Dependents (0)	\$ 0	Family Support	\$ 22,500
Other	\$ 0	On-Campus Employment	\$ 0
TOTAL	\$ 22,500	TOTAL	\$ 22,500

REMARKS

REMARKS

SCHOOL ATTESTATION


I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

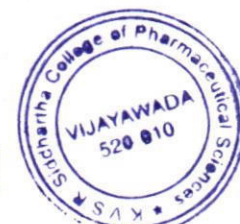
SIGNATURE OF: William Widmaier, Associate Registrar	DATE ISSUED 15 September 2020	PLACE ISSUED Allendale, MI
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STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

SIGNATURE OF: Nikhila Paladugu	DATE
NAME OF PARENT OR GUARDIAN	SIGNATURE
	ADDRESS (city/state or province/country)
	DATE


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K.V.S.R. SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



SEVIS ID: N0031392519 (F-1)

NAME: Nikhila Paladugu

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD


CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE
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TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
<i>William E. Widmar</i>	<i>Associate Registrar</i>	<i>William E. Widmar</i>	<i>9-15-20</i>	<i>Allendale, ont</i>
_____	_____	X	_____	_____
_____	_____	X	_____	_____
_____	_____	X	_____	_____


PRINCIPAL
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 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.



5. L17 phd14000 .5 .17-90 pham.D PB

UNT[®]



UNIVERSITY OF NORTH TEXAS[®]

Madala, Naga Lakshmi Tanuja
Student

[Signature]
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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 020



ISSUE: 1

5. L17phd140005 (2017-2020) pharm.D PB

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031509960

SURNAME/PRIMARY NAME Madala	GIVEN NAME Naga Lakshmi Tanuja	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Naga Lakshmi Tanuja Madala	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH GUDIWADA	DATE OF BIRTH 14 AUGUST 1994	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Jamal King Intl Student & Scholar Services Advisor	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 09 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 08 JANUARY 2021 - 31 MAY 2023	

FINANCIALS


ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,754	Personal Funds	\$ 0
Living Expenses	\$ 13,189	Funds From This School	\$
Expenses of Dependents (0)	\$	Family Funds	\$ 32,718
Books, Insurance	\$ 3,775	On-Campus Employment	\$
TOTAL	\$ 32,718	TOTAL	\$ 32,718

REMARKS

Tuition/fees subject to change.

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

X  Digitally signed by Jamal King Date: 2020.09.01 16:38:48 -05'00'	DATE ISSUED 01 September 2020	PLACE ISSUED Denton, TX
SIGNATURE OF: Jamal King, Intl Student & Scholar Services Advisor		

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

X			
SIGNATURE OF: Naga Lakshmi Tanuja Madala	DATE		
X			
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
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VIJAYAWADA-520 020



SEVIS ID: N0031509960 (F-1)

NAME: Naga Lakshmi Tanuja
Madala

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		

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VIJAYAWADA-520 010.



5

Kommareddy Venkata Sadasiva Rao SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES

VIJAYAWADA-520 010

(Sponsors: Siddhartha Academy of General & Technical Education, Vijayawada)

APPLICATION FORM FOR ADMISSION INTO THE 2-YEAR M.PHARM COURSE FOR THE ACADEMIC YEAR 2020-21 (Category-B)

Pharmaceutics Pharmaceutical Analysis (put ✓ mark) Pharmaceutical Chemistry

FOR OFFICE USE ONLY	
Regd. No.	720MBA/14000
Admission No.	499
Date of Admission	25/2/21
Roll No	



1. Name in full (Block Letters) (as per school records) :

2. Date of Birth(as per school records) :

3. Age (in years) :

4. Nationality : Mother Tongue :

5. Candidate's Permanent Address: (Parental Address)

Telephone No. ----- Mobile No: 9398867704

Email ID

6. Address of the Candidate for sending communications :

Telephone No. ----- Mobile No. 9398867704

Email ID

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES

(Sponsors : Siddhartha Academy of General & Technical
Education)

Vijayawada - 520 010. Ph : 0866-2479775, Fax : 0866-2476086



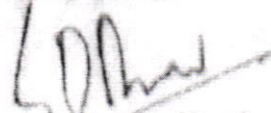
GARIMELLA HARIKA

Roll No : Y20MPA140004

Course : M. PHARMACY

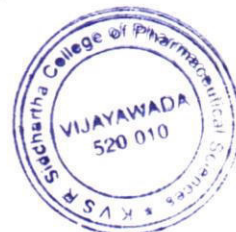
Pharmaceutical Analysis

Valid Upto : 2020 -2022


Principal



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGECET - 2020

Hall Ticket No.	6639010293	Rank:	3039.00
Name:	PILLA SIVANI	Father's Name:	PILLA VENUGOPAL
Gender:	FEMALE (F)	Caste/ Region:	BC_D/ AU

PROVISIONAL ALLOTMENT ORDER (for PGCET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

CHALAPATHI INSTITUTE OF PHARMACEUTICAL SCI. (CLPT1), GUNTUR, GTR
in **PHARMACOLOGY (PHCOLG)(RGS)**, under BC_D_GIRLS_AU category.

Tuition Fee fixed for the college/course is Rs. 67800 /- .

Tuition fee to be paid by the candidate is Rs. 67800 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is **20.02.2021 (before 5.00PM)**. Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.

Handwritten signature

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K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



CONVENOR
APPGECET - ADMISSIONS 2020

Y16 BPH-08
Y16 BPH-08



UNIVERSITY of GREENWICH

15
42

Direct Line: +44 (0)20 8331 8136
Direct Fax: +44 (0)20 8331 8625
E-Mail: international@gre.ac.uk
Applicant ID: 001138620
Date: 18 August 2020

OFFER OF PLACE

Full Name as shown in Passport: Naga Abhinav Agarthi

Passport Number: R4559736

Date of Birth: 07/07/1998

Programme Offered: MSc Pharmaceutical Sciences with Industrial Practice

The duration of this programme is 24 months, including 12 months of certified work experience after the completion of taught courses but in conjunction with independent research. The student is responsible for sourcing suitable certified work experience. The student can undertake a placement opportunity across the UK.

Academic and English Language conditions: Bachelors minimum aggregate 60%

Mode of Attendance: Full Time

Start Date: 04/01/2021

Duration of Programme: 2 years

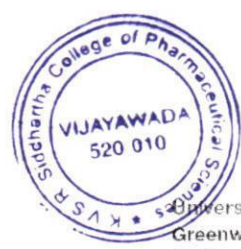
Campus: Medway

Campus Location: Pembroke, Central Avenue, Chatham Maritime, Kent ME4 4TB

Tuition Fee for Year of Offer: £16000

Financial Condition: Minimum pre registration deposit of £3000 (See conditions below):

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K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



University of Greenwich
Greenwich Campus
Old Royal Naval College
Park Row
London SE10 9LS
Telephone: +44 (0)20 8331 8000

Thank you for your application to the University of Greenwich. I am pleased to offer you a place on the programme specialised above. You will shortly receive a second emailed offer letter, which will include your Applicant ID (beginning in 001). If you have not received this email and wish to pay your deposit, please contact your agent who will obtain the 'Applicant ID' from the university.

To accept or decline this offer please reply to accepts@gre.ac.uk within 28 days to let us know. If you do not reply within 28 days, then we may be unable to guarantee your place, as it may be offered to another applicant. Please ensure that you include your Applicant ID in your response.

Tuition Fee & Pre Registration Deposit

The pre-registration deposit is the first payment towards your tuition fees; it reduces the tuition fees payable on registration and confirms your place on the programme offered. It can be paid by a Bank Draft made payable to the University of Greenwich or by direct transfer to the university's bank account.

The deposit paid to confirm the offer of place is only refundable where the applicant provides evidence that the application for a student visa was not accepted for the year the academic offer was made.

Full details of tuition fees, the pre-registration deposit, how to pay the deposit, university bank account details, available bursaries and scholarships and links to the charging and refund policy can be found at <https://www.gre.ac.uk/finance/fees> or by contacting international@gre.ac.uk

For Ds assessed as paying fees at the **international rate**, tuition fees are subject to an annual fee setting exercise and will rise annually by no more than RPI – X +3% (Retail Price Index excluding mortgage interest rates +3%). We would only consider an increase to the fee rate for continuing students to reflect the increased cost of delivering the course in subsequent years.

Visa

This offer cannot be used to obtain a Tier 4 student visa.

As an international fee paying student you will probably need a Tier 4 Student Visa to study with us. If you do require a Tier 4 Student Visa to study in the UK, please refer to the University Sponsorship Policy at <http://www2.gre.ac.uk/current-students/regs/?a=1441173>.

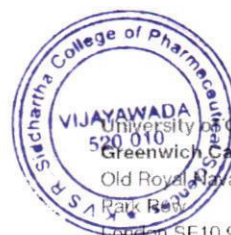
Information on how to apply and the requirements for your student visa to study with us can be found on the UK Government website at <https://www.gov.uk/browse/visas-immigration/student-visas>

Useful information is also available on the UKCISA (UK Council for International Student Affairs) web-link <http://www.ukcisa.org.uk/>

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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



London SE10 9LS
Telephone: +44 (0)20 8331 8000

It is your responsibility to ensure that you are in possession of an appropriate and valid visa.

Tier 4 Student Visas are institution specific; if you have studied in the UK previously and hold a student visa for another institution you will need to make a new visa application before you can register at the University of Greenwich.

One of the requirements of the UK Visa & Immigration (UKVI) when applying for the first time or renewing your student visa is that you provide proof that you have sufficient funds to cover the costs of the tuition fees for your first year of study plus the minimum UKVI maintenance requirement. The minimum maintenance requirement will depend on which campus you will be studying at.

Our Maritime Greenwich and Avery Hill Campuses are 'in London' and our Medway Campus is 'outside London'. Please ensure that you are aware of UKVI requirements on the minimum amount required, how you provide evidence of this and the length of time the funds must be held. Read carefully *Tier 4 of the Points Based System - Policy Guidance* on the UKVI website https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/370866/T4_Guidance_11-14.pdf

Confirmation of Acceptance of Studies (CAS) Number:

To apply for a Tier 4 Student Visa you will require a CAS Number. This is not an actual certificate or paper document but is a number issued electronically. It is unique to you and the University of Greenwich and contains information about the course of study for which it has been issued and your personal details. It is valid for six months from issue; you cannot apply for your student visa more than three months prior to the start of your programme.

A CAS Statement including your unique CAS number and the other relevant information (including the qualifications used to assess your offer of place) will be emailed to you or to your agent (if your application was received from an authorised representative of the university).

We would like you to receive your CAS number, if required, as quickly as possible so please contact the International Office at international@gre.ac.uk as soon as you have paid the pre-registration deposit and any academic or English language conditions have been fulfilled.

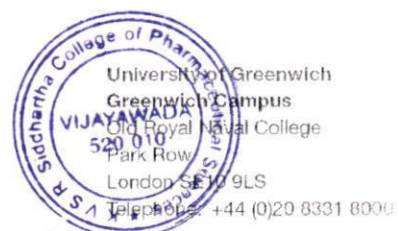
Campuses

The university has three campuses. Which Campus you will be studying on depends on the Faculty and programme you will be studying with us and is stated above. The Greenwich Campus is on a World Heritage Site on the banks of the Thames in London. Our Avery Hill Campus is in Eltham in south-east London and our Medway Campus is in the County of Kent.

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VIJAYAWADA-520 010.



English Language

When you join us you may be required to take a short written English test to establish what language support, if any, may help you succeed in your chosen programme. If the university recognises that you will benefit from English language support you will be required to attend classes, free of charge. Your attendance and progress will be monitored, and you will be expected to complete the course and pass the assessment.

Accommodation

All new students who join the university in September are guaranteed accommodation, either in a university hall of residence or in university approved housing, providing they meet the terms and conditions of the Accommodation Guarantee. Information about university accommodation including application deadline dates and other terms and conditions of the Accommodation Guarantee can be found at www.gre.ac.uk/accommodation. Please ensure you read this information carefully and if you have any queries contact a member of staff in the Accommodation Office at your campus of study. Contact details can be found at www.gre.ac.uk/accommodation. If you would like information about finding accommodation in the private rented sector or temporary accommodation in hotels, hostels or lodgings, please contact the Accommodation Service for further information. Please ensure that you have a safe place to stay when you arrive in the UK.

The Accommodation Service cannot offer temporary or emergency housing and you should not arrive without a place to stay.

On Arrival

When you arrive at the university to commence your studies you will be invited to register. This is a two part process.

Part 1: Online Registration: Requires you to log in to the university portal and go through an online process to verify information about yourself and your new programme of study. In order to start Online Registration, you will need your portal login details. These will be emailed to you or your agent nearer the start date of your programme when you have completed all stages of the admissions process. You will also be given a summary of the balance of your first year's tuition fees less any payments including the pre-registration deposit and any discounts.

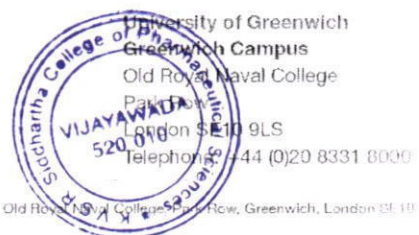
To complete your registration, you will need to pay at least 50 per cent of this amount. This amount can be paid during online registration by entering credit/debit card details. Alternatively you can transfer the payment to the university's bank account or pay directly to the Student Centre by bank draft.

The remaining balance of tuition fees for September starters will be due before the last Friday in January and for January starters before the last Friday in May. A 2.5 per cent discount is available on your tuition fees if you pay your year's tuition fees in full before the end of September (for those registering on September programmes) or the end of January (for those registering on January

4


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K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



programmes). This discount is not available for programmes run in our Medway School of Pharmacy and pre-sessional English language programmes.

Part 2: Identity and Qualification Checks: This is where you will show a member of staff your passport, proof of your visa and the original of your qualifications stated in your CAS statement (including authorised translations if not in English). These must be original documents and not photocopies.


Contact Us

Our international team will be happy to answer any questions you may have, please email international@gre.ac.uk. We look forward to welcoming you to the University of Greenwich and wish you every success in your studies.

Yours sincerely



Christopher Bustin
Head of International Office



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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Y16Bph140012

93



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGET - 2020

Hall Ticket No:	6639020156	Rank:	1334.00
Name:	BATHULA SIRISHA	Father's Name:	BATHULA VENKATA REDDY
Gender:	FEMALE (F)	Caste/ Region:	OC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGET CANDIDATES)

Print

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

DR. SAMUEL GEORGE INSTITUTE OF PHARM. SCI.S (SGIP1), MARKAPUR, PKS in PHARMACEUTICAL ANALYSIS (PHANLS)(RGS), under OC_GIRLS_AU category.

**Tuition Fee fixed for the college/course is Rs. 51800 /- .
Tuition fee to be paid by the candidate is Rs. 51800 /- .****

** The students of various categories will be considered for Jagannanna Vidya Deevana (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appget.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is **20.02.2021 (before 5.00PM)**. Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.

[Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES

CONVENOR
APPGET - ADMISSIONS 2020
[Circular Stamp]

*** This computer generated Provisional Allotment Order does not require any authentication. ***

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B. pharm

2016 - 20 passed out



UNIVERSITY of
GREENWICH

44

Direct Line: +44 (0)20 8331 8136
Direct Fax: +44 (0)20 8331 8625
E-Mail: international@gre.ac.uk
Applicant: 001122540
ID: 07 August 2020
Date:

OFFER OF PLACE

Full Name as shown in Passport: MEHER RAVINDRANATH BODDU

Passport Number: S7087286

Date of Birth: 19/11/1998

Programme Offered: MSc Pharmaceutical Sciences with Industrial Practice

The duration of this programme is 24 months, including 12 months of certified work experience after the completion of taught courses but in conjunction with independent research. The student is responsible for sourcing suitable certified work experience. The student can undertake a placement opportunity across the UK.

Academic and English Language conditions: Conditional upon passing Bachelors minimum aggregate 55%

Mode of Attendance: Full Time

Start Date: 04/01/2021

Duration of Programme: 2 years

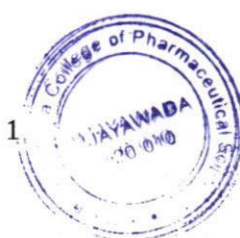
Campus: Medway

Campus Location: Pembroke, Central Avenue, Chatham Maritime, Kent ME4 4TB

Tuition Fee for Year of Offer: £16000

Financial Condition: Minimum pre registration deposit of £3000 (See conditions below):

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Thank you for your application to the University of Greenwich. I am pleased to offer you a place on the programme specialised above. You will shortly receive a second emailed offer letter, which will include your Applicant ID (beginning in 001). If you have not received this email and wish to pay your deposit, please contact your agent who will obtain the 'Applicant ID' from the university.

To accept or decline this offer please reply to accepts@gre.ac.uk within 28 days to let us know. If you do not reply within 28 days, then we may be unable to guarantee your place, as it may be offered to another applicant. Please ensure that you include your Applicant ID in your response.

Tuition Fee & Pre Registration Deposit

The pre-registration deposit is the first payment towards your tuition fees; it reduces the tuition fees payable on registration and confirms your place on the programme offered. It can be paid by a Bank Draft made payable to the University of Greenwich or by direct transfer to the university's bank account.

The deposit paid to confirm the offer of place is only refundable where the applicant provides evidence that the application for a student visa was not accepted for the year the academic offer was made.

Full details of tuition fees, the pre-registration deposit, how to pay the deposit, university bank account details, available bursaries and scholarships and links to the charging and refund policy can be found at <https://www.gre.ac.uk/finance/fees> or by contacting international@gre.ac.uk

For Ds assessed as paying fees at the **international rate**, tuition fees are subject to an annual fee setting exercise and will rise annually by no more than RPI – X +3% (Retail Price Index excluding mortgage interest rates +3%). We would only consider an increase to the fee rate for continuing students to reflect the increased cost of delivering the course in subsequent years.

Visa

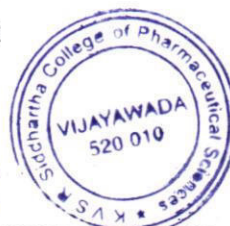
This offer cannot be used to obtain a Tier 4 student visa.

As an international fee paying student you will probably need a Tier 4 Student Visa to study with us. If you do require a Tier 4 Student Visa to study in the UK, please refer to the University Sponsorship Policy at <http://www2.gre.ac.uk/current-students/regs/?a=1441173>.

Information on how to apply and the requirements for your student visa to study with us can be found on the UK Government website at <https://www.gov.uk/browse/visas-immigration/student-visas>

Useful information is also available on the UKCISA (UK Council for International Student Affairs) web-link <http://www.ukcisa.org.uk/>


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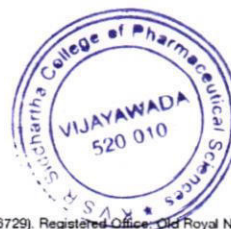
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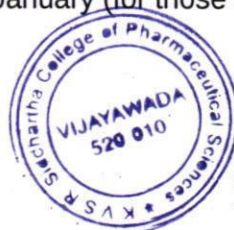
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Contact Us

Our international team will be happy to answer any questions you may have, please email international@gre.ac.uk. We look forward to welcoming you to the University of Greenwich and wish you every success in your studies.

Yours sincerely

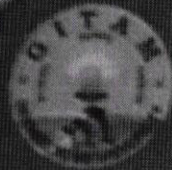


Christopher Bustin
Head of International Office



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VIJAYAWADA-520 010.



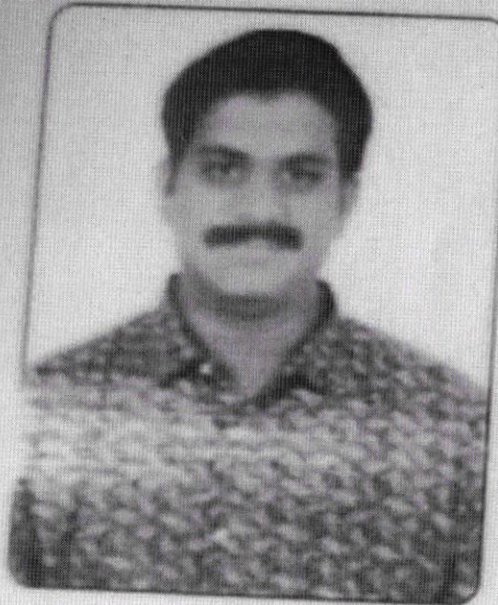


GITAM

(DEEMED TO BE UNIVERSITY)

(Encl. 10B 3 of the UGC Act, 1956)

VISAKHAPATNAM • HYDERABAD • BENGALURU



BOMMAREDDY HANEESHREDDY

122025101007

M.Pharm-PHARMACEUTICS

2020-2022

Institute of Pharmacy

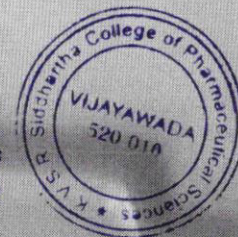
Visakhapatnam

B. Haneesh Reddy

Student

[Handwritten Signature]

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K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



[Handwritten Signature]

Registrar

6

PROVISIONAL ALLOTMENT ORDER

Date: 12-06-2020

Application Number	: 220504
Mode of Admission	: Online Counselling
Rank	: 36
Name of the Student	: BommaReddy Haneesh Reddy
Name of the Parent / Guardian	: Bommareddy Venkata srinivasa Reddy
Gender	: Male
Category	: OC
Institute	: GITAM Institute of Pharmacy , Visakhapatnam
Program	: Pharmaceutics

Admission will be confirmed subject to the following conditions:

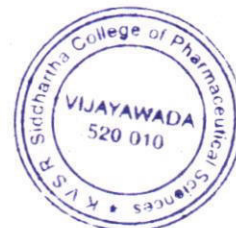
1. The candidate will be eligible for admission only if he fulfils the eligibility criteria prescribed by GITAM (Deemed to be University) in his qualifying examination.
2. The remaining amount of fee should be paid by the candidate on or before 01st September 2020.
3. The candidate has to report to the Principal, GITAM Institute of Pharmacy, GITAM (Deemed to be University), Visakhapatnam on 01st September 2020 with the following certificates in original, and submit two sets of self-attested photocopies and four latest passport size photos for the purpose of registration to confirm his admission.
 1. X class marks memo and pass certificate.
 2. Degree marks memo and pass certificate.
 3. Transfer and conduct certificates.
 4. Medical certificate (in case of PH candidates).
 5. Integrated community certificate (in case of SC/ST candidates).
4. The original certificates will be physically verified for authenticity and the same will be returned to the candidate. However, it is mandatory that the candidate should submit the original Transfer & Conduct certificate.
5. If any candidate does not report to the Principal on 01st September 2020, his provisional allotment of seat will be cancelled. The fee paid will be refunded after deducting the prescribed charges as per UGC guidelines on submission of his request through Online Admission Portal.
6. Due to any reason, if the withdrawal request received after 01st September 2020, the fee refund policy will be followed as per the cancellation policy.
7. If the admitted candidate chooses to withdraw from his course of study after 30st September 2020, the fee amount paid by the candidate will not be refunded under any circumstances and no further correspondence shall be entertained in this regard.



P A V S SEKHAR
Director Admissions



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VIJAYAWADA-520 010.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGET - 2020

Hall Ticket No.	6639010053	Rank:	442.00
Name:	BOOTHAPATI SUDHA RANI	Father's Name:	BOOTHAPATI BABU RAO
Gender:	FEMALE (F)	Caste/ Region:	SC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

JNTUK COLLEGE OF PHARMACY (JNKP1), KAKINADA, EG
in **PHARMACEUTICS (PHCETS)(RGS)**, under SC_GIRLS_AU category.

Tuition Fee fixed for the college/course is Rs. 50000 /- .

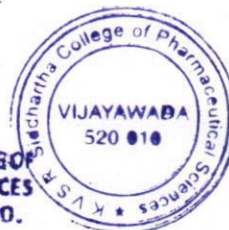
Tuition fee to be paid by the candidate is Rs. 0 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

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CONVENOR
APPGET - ADMISSIONS 2020



08/10/20
1006542 Harsha Sai Chanumolu
(Represented by: IDP Education (Canada))
D.No. 67-1-1,FF3,Darsipet,Patamata ,
Vijayawada, India 520010

Letter of Admission

Deadline Date for Fees Payment
(MM/DD/YY): 08/31/20

Dear **Harsha Sai Chanumolu**,

Congratulations! You have been accepted to Fanshawe College for your post-secondary studies in Canada subject to fulfillment of the conditions below. Do not submit to Immigration, Refugees and Citizenship Canada (IRCC) for study permit.

Fanshawe College Student ID : 1006542
Date of Birth : 12/06/1998 (MM/DD/YY)
Type of School : Public; Member, CIGan www.collegesinstitutes.ca; DLI # O19361039982
Program of Study : HSY2 - Health Systems Management + PRJ1 - Project Management, London Campus
Academic Status : Full Time
Level of Study : Graduate Certificate
Semester of Study : Level 1
Program Start Date : 01/04/21 (MM/DD/YY)
Length of Program : 1 Year (2 Levels) + 1 Year (2 Levels)
Co-Op/Work Term : N/A
Expected Date of Completion : 04/30/22 (MM/DD/YY)
Fees (Approximate and subject to change) : C\$17074.74
Fees Due : C\$17074.74
Fees Payment Deadline : 08/31/20 (MM/DD/YY)
Condition(s) (if applicable) : Completion of graduation with 50%. Do not submit to IRCC for study permit. Do not submit to IRCC for study permit. Student accepted under SDS.
Last date to update your visa : 12/20/20 (MM/DD/YY)
Last date for registration : 12/29/20 (MM/DD/YY)

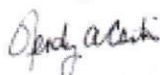
Program fees for International students for 2018-2019 are listed here by Program Name:
https://www.fanshawec.ca/sites/default/files/uploads/fees/international_fees_2019.pdf

The Deadline Date is important, as your seat is not confirmed until full payment has been made. Your seat will be confirmed subject to availability of seats in your program at the time of your payment. To hold your place, the fee of **C\$17074.74** must be received by the "deadline date" mentioned above. Payment should be made in Canadian dollars through Flywire ONLY and you **MUST** send an electronic copy of your Flywire receipt with a scanned copy of this offer letter to atandon@fanshawec.ca and intspp@fanshawec.ca. The fee receipt can be downloaded from your Flywire account approximately 48-72 hours after making the payment.

Each year, more than 21,000 students choose Fanshawe College, including more than 5,000 international students from 80 countries. Arrival Services are provided at no additional charge to all new international students. This includes being met by an Airport Greeter, transportation from Pearson Airport to London, and two nights of accommodation, if required.

Once your visa is approved, you **MUST** email atandon@fanshawec.ca before 12/20/20 (MM/DD/YY). We look forward to seeing you in Canada at Fanshawe College.

Sincerely,



Wendy Curtis,
Executive Director, Fanshawe International Centre



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Program Fee Details

Name: Harsha Sai Chanumolu; Student #: 1006542
Program: HSY2 - Health Systems Management

The following is the approximate breakdown of the cost of living for a twelve-month period for a student studying in Canada and living on his/her own:

Living Expenses (approximate)

Sub Total - Living Expenses: \$10000

School Fees (Estimated figures subject to change without prior notice):

To be paid to the college

- | | |
|--|------------|
| 1. Tuition | \$15192.00 |
| 2. Mandatory Non-Tuition Fees | \$1882.74 |
| (Includes Athletics Fee, Health Insurance Fee, Incidental Fee, Student Activity Fee, Student Building Fee, Technology Fee) | |
| 3. Additional Program Fee | \$0.00 |
| 4. Co-op Fee | \$0.00 |

Not to be paid to the college, to be spent during the program

- | | |
|--|-----------|
| 5. General Expenses | \$1272.30 |
| (Includes Books which are Mandatory, Expendable Supplies, Uniforms & Minor Equipment, Field Trips & Local Transportation, Major Equipment, Professional Association Exam Fees, Other and Optional Expenses). This fee is not to be paid to the college directly, but nonetheless will have to be spent by the student every year for the expenses mentioned. | |


Sub Total - School Fees: \$18347.04

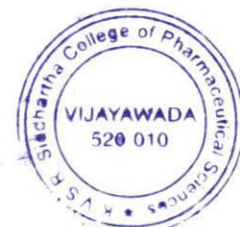
Total **C\$28347.04 (Approximate and subject to change)**

You have to pay **C\$17074.74** by 08/31/20 (MM/DD/YY). This fee amount is for first two levels and is subject to change. For the most updated fee for Level 3 (if applicable) or onwards, please visit: www.fanshawec.ca/fees.

Please review the College's withdrawal and refund policy information, found here: <https://www.fanshawec.ca/international/student-services/international-student-withdrawal-and-refund-process>

There will be a C\$250 deduction and the remaining amount will be refunded ONLY in the case of visa refusal. If the visa refusal cannot be provided, there will be a deduction of C\$2300. This refund of money will take a processing time of 90 days.


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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



MIGBPH 140026 (7)



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGECET - 2020

Hall Ticket No.	AP1702100502	Rank:	10574.00
Name:	DEVIREDDY SRISHA	Father's Name:	DEVIREDDY VENKATA REDDY
Gender:	FEMALE (F)	Caste/ Region:	OC/ AU

PROVISIONAL ALLOTMENT ORDER (for GATE/GPAT CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/VNCC/SPORTS) etc and the candidate has been allotted a seat in

AU COLLEGE OF PHARMACEUTICAL SCIENCES (AUCP1), VISAIHAPATHNAM, VSP in PHARMACEUTICAL CHEMISTRY (PHCHEM)(RGS), under EWS_GEN_AU category

Tuition Fee fixed for the college/course is Rs. 40000 /-.

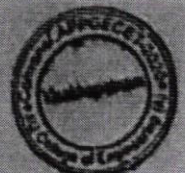
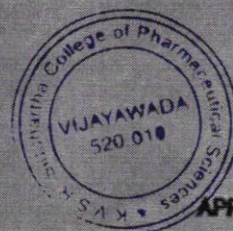
Tuition fee to be paid by the candidate is Rs. 40000 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RIF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is 10.02.2021 (before 5.00PM). Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.

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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



CONVENOR
APPGECET - ADMISSIONS 2020



Birla Institute of Technology
MESRA, RANCHI (INDIA) - 835215

FEE RECEIPT

Office Copy

Receipt No. : C1/O/SF/19/36110
Student Name : GANNAVARAPU ROHIT
Program : MASTER OF PHARMACY (PHARMACEUTICAL CHEMISTRY)
Transaction No : 20071971579905
Year / Sem : First Year / I Section : -
Roll No. : 00025214 Date : 19/07/2020

Sr.No.	PARTICULARS	AMOUNT
1	TUITION FEE	100,500.00
2	DEVELOPMENT FEE	7,000.00
3	EXAMINATION FEE	5,500.00
4	ADMISSION FEE	15,000.00
5	CAUTION MONEY	10,000.00
6	HOSTEL SEAT RENT, ELECT & TRAN	16,000.00

Total Amount : 1,54,000.00

In words : Rupees One Lakh and Fifty Four Thousand only

Cash Amount: D.D. Amount :

DD No.	Date	Issuing Bank	Amount
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Signature of Cashier

19/07/2020

1:27:22 pm

User : Administrator

Y16B14-29



Birla Institute of Technology
MESRA, RANCHI (INDIA) - 835215

FEE RECEIPT

Student Copy

Receipt No. : C1/O/SF/19/36110
Student Name : GANNAVARAPU ROHIT
Program : MASTER OF PHARMACY (PHARMACEUTICAL CHEMISTRY)
Transaction No : 20071971579905
Year / Sem : First Year / I Section : -
Roll No. : 00025214 Date : 19/07/2020

Sr.No.	PARTICULARS	AMOUNT
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5	CAUTION MONEY	10,000.00
6	HOSTEL SEAT RENT, ELECT & TRAN	16,000.00

Total Amount : 1,54,000.00

In words : Rupees One Lakh and Fifty Four Thousand only

Cash Amount: D.D. Amount :

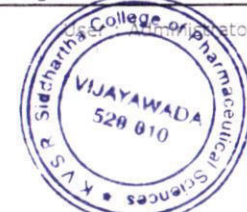
DD No.	Date	Issuing Bank	Amount
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Signature of Cashier

19/07/2020

1:27:22 pm

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





UNIVERSITY of
GREENWICH

9

Direct Line: +44 (0)20 8331 8136
Direct Fax: +44 (0)20 8331 8625
E-Mail: international@gre.ac.uk
Applicant ID: 001122554
Date: 07 August 2020

OFFER OF PLACE

Full Name as shown in Passport: SAI TEJA GARIKAPATI

Passport Number: T2399063

Date of Birth: 27/08/1998

Programme Offered: MSc Pharmaceutical Sciences with Industrial Practice

The duration of this programme is 24 months, including 12 months of certified work experience after the completion of taught courses but in conjunction with independent research. The student is responsible for sourcing suitable certified work experience. The student can undertake a placement opportunity across the UK.

Academic and English Language conditions: Conditional upon passing Bachelors minimum aggregate 55%

Mode of Attendance: Full Time

Start Date: 04/01/2021


Duration of Programme: 2 years

Campus: Medway

Campus Location: Pembroke, Central Avenue, Chatham Maritime, Kent ME4 4TB

Tuition Fee for Year of Offer: £16000

Financial Condition: Minimum pre registration deposit of £3000 (See conditions below):


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



University of Greenwich
Greenwich Campus
Old Royal Naval College
Park Row
London SE10 9LS
Telephone: +44 (0)20 8331 8000

Thank you for your application to the University of Greenwich. I am pleased to offer you a place on the programme specialised above. You will shortly receive a second emailed offer letter, which will include your Applicant ID (beginning in 001). If you have not received this email and wish to pay your deposit, please contact your agent who will obtain the 'Applicant ID' from the university.

To accept or decline this offer please reply to accepts@gre.ac.uk within 28 days to let us know. If you do not reply within 28 days, then we may be unable to guarantee your place, as it may be offered to another applicant. Please ensure that you include your Applicant ID in your response.

Tuition Fee & Pre Registration Deposit

The pre-registration deposit is the first payment towards your tuition fees; it reduces the tuition fees payable on registration and confirms your place on the programme offered. It can be paid by a Bank Draft made payable to the University of Greenwich or by direct transfer to the university's bank account.

The deposit paid to confirm the offer of place is only refundable where the applicant provides evidence that the application for a student visa was not accepted for the year the academic offer was made.

Full details of tuition fees, the pre-registration deposit, how to pay the deposit, university bank account details, available bursaries and scholarships and links to the charging and refund policy can be found at <https://www.gre.ac.uk/finance/fees> or by contacting international@gre.ac.uk

For Ds assessed as paying fees at the **international rate**, tuition fees are subject to an annual fee setting exercise and will rise annually by no more than RPI – X +3% (Retail Price Index excluding mortgage interest rates +3%). We would only consider an increase to the fee rate for continuing students to reflect the increased cost of delivering the course in subsequent years.

Visa

This offer cannot be used to obtain a Tier 4 student visa.

As an international fee paying student you will probably need a Tier 4 Student Visa to study with us. If you do require a Tier 4 Student Visa to study in the UK, please refer to the University Sponsorship Policy at <http://www2.gre.ac.uk/current-students/regs/?a=1441173>.

Information on how to apply and the requirements for your student visa to study with us can be found on the UK Government website at <https://www.gov.uk/browse/visas-immigration/student-visas>

Useful information is also available on the UKCISA (UK Council for International Student Affairs) web-link <http://www.ukcisa.org.uk/>

2


**PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES**



It is your responsibility to ensure that you are in possession of an appropriate and valid visa.

Tier 4 Student Visas are institution specific; if you have studied in the UK previously and hold a student visa for another institution you will need to make a new visa application before you can register at the University of Greenwich.

One of the requirements of the UK Visa & Immigration (UKVI) when applying for the first time or renewing your student visa is that you provide proof that you have sufficient funds to cover the costs of the tuition fees for your first year of study plus the minimum UKVI maintenance requirement. The minimum maintenance requirement will depend on which campus you will be studying at.

Our Maritime Greenwich and Avery Hill Campuses are 'in London' and our Medway Campus is 'outside London'. Please ensure that you are aware of UKVI requirements on the minimum amount required, how you provide evidence of this and the length of time the funds must be held. Read carefully *Tier 4 of the Points Based System - Policy Guidance* on the UKVI website https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/370866/T4_Guidance_11-14.pdf

Confirmation of Acceptance of Studies (CAS) Number:

To apply for a Tier 4 Student Visa you will require a CAS Number. This is not an actual certificate or paper document but is a number issued electronically. It is unique to you and the University of Greenwich and contains information about the course of study for which it has been issued and your personal details. It is valid for six months from issue; you cannot apply for your student visa more than three months prior to the start of your programme.

A CAS Statement including your unique CAS number and the other relevant information (including the qualifications used to assess your offer of place) will be emailed to you or to your agent (if your application was received from an authorised representative of the university).

We would like you to receive your CAS number, if required, as quickly as possible so please contact the International Office at international@gre.ac.uk as soon as you have paid the pre-registration deposit and any academic or English language conditions have been fulfilled.

Campuses

The university has three campuses. Which Campus you will be studying on depends on the Faculty and programme you will be studying with us and is stated above. The Greenwich Campus is on a World Heritage Site on the banks of the Thames in London. Our Avery Hill Campus is in Eltham in south-east London and our Medway Campus is in the County of Kent.

3



PRINCIPAL

K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



English Language

When you join us you may be required to take a short written English test to establish what language support, if any, may help you succeed in your chosen programme. If the university recognises that you will benefit from English language support you will be required to attend classes, free of charge. Your attendance and progress will be monitored, and you will be expected to complete the course and pass the assessment.

Accommodation

All new students who join the university in September are guaranteed accommodation, either in a university hall of residence or in university approved housing, providing they meet the terms and conditions of the Accommodation Guarantee. Information about university accommodation including application deadline dates and other terms and conditions of the Accommodation Guarantee can be found at www.gre.ac.uk/accommodation. Please ensure you read this information carefully and if you have any queries contact a member of staff in the Accommodation Office at your campus of study. Contact details can be found at www.gre.ac.uk/accommodation. If you would like information about finding accommodation in the private rented sector or temporary accommodation in hotels, hostels or lodgings, please contact the Accommodation Service for further information. Please ensure that you have a safe place to stay when you arrive in the UK.

The Accommodation Service cannot offer temporary or emergency housing and you should not arrive without a place to stay.

On Arrival

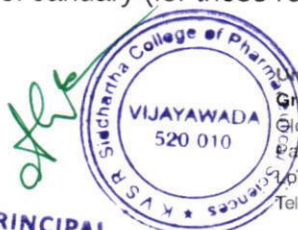
When you arrive at the university to commence your studies you will be invited to register. This is a two part process.

Part 1: Online Registration: Requires you to log in to the university portal and go through an online process to verify information about yourself and your new programme of study. In order to start Online Registration, you will need your portal login details. These will be emailed to you or your agent nearer the start date of your programme when you have completed all stages of the admissions process. You will also be given a summary of the balance of your first year's tuition fees less any payments including the pre-registration deposit and any discounts.

To complete your registration, you will need to pay at least 50 per cent of this amount. This amount can be paid during online registration by entering credit/debit card details. Alternatively you can transfer the payment to the university's bank account or pay directly to the Student Centre by bank draft.

The remaining balance of tuition fees for September starters will be due before the last Friday in January and for January starters before the last Friday in May. A 2.5 per cent discount is available on your tuition fees if you pay your year's tuition fees in full before the end of September (for those registering on September programmes) or the end of January (for those registering on January

4



PRINCIPAL
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VIJAYAWADA-520 010.

University of Greenwich
Greenwich Campus
Old Royal Naval College
Park Row
London SE10 9LS
Telephone: +44 (0)20 8331 8000

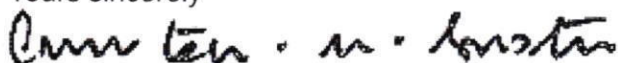
programmes). This discount is not available for programmes run in our Medway School of Pharmacy and pre-sessional English language programmes.

Part 2: Identity and Qualification Checks: This is where you will show a member of staff your passport, proof of your visa and the original of your qualifications stated in your CAS statement (including authorised translations if not in English). These must be original documents and not photocopies.


Contact Us

Our international team will be happy to answer any questions you may have, please email international@gre.ac.uk. We look forward to welcoming you to the University of Greenwich and wish you every success in your studies.

Yours sincerely



Christopher Bustin
Head of International Office



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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGECET - 2020

Hall Ticket No.	6639010120	Rank:	4601.00
Name:	GUGULOTHU HARISCHANDRA NAIK	Father's Name:	GUGULOTHU VENKATESWARA RAO
Gender:	MALE (M)	Caste/ Region:	ST/ AU

PROVISIONAL ALLOTMENT ORDER (for PGCET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

JNTUA-OIL TECHNOLOGICAL RESEARCH INSTITUTE-SELF FINANCE (OTRISF1), ANANTAPURAMU, ATP
in **PHARMACEUTICAL CHEMISTRY (PHCHEM)(SFN)**, under ST_PHO_GIRLS_SVU category.

Tuition Fee fixed for the college/course is Rs. 90000 /- .

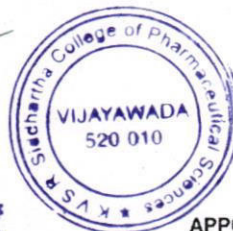
Tuition fee to be paid by the candidate is Rs. 0 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is **20.02.2021 (before 5.00PM)**. Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.

Handwritten signature
PRINCIPAL
V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



CONVENOR
APPGECET - ADMISSIONS 2020

08/10/20
1006117 Yamini Gullapalli
(Represented by: IDP Education (Canada))
1-118 New ramalayam road, Vallurupalem, Thotlavalluru
mandal,
Thotlavalluru, India 521163

Letter of Admission

Deadline Date for Fees Payment
(MM/DD/YY): 08/31/20

Dear Yamini Gullapalli,

Congratulations! You have been accepted to Fanshawe College for your post-secondary studies in Canada subject to fulfillment of the conditions below. Do not submit to Immigration, Refugees and Citizenship Canada (IRCC) for study permit.

Fanshawe College Student ID : 1006117
Date of Birth : 11/03/1997 (MM/DD/YY)
Type of School : Public; Member, CIGan www.collegesinstitutes.ca; DLI # O19361039982
Program of Study : HSY2 - Health Systems Management + PRJ1 - Project Management, London Campus
Academic Status : Full Time
Level of Study : Graduate Certificate
Semester of Study : Level 1
Program Start Date : 01/04/21 (MM/DD/YY)
Length of Program : 1 Year (2 Levels) + 1 Year (2 Levels)
Co-Op/Work Term : N/A
Expected Date of Completion : 04/30/22 (MM/DD/YY)
Fees (Approximate and subject to change) : C\$17074.74
Fees Due : C\$17074.74
Fees Payment Deadline : 08/31/20 (MM/DD/YY)
Condition(s) (if applicable) : Completion of graduation with 50%. Do not submit to IRCC for study permit. Do not submit to IRCC for study permit. Student accepted under SDS.
Last date to update your visa : 12/20/20 (MM/DD/YY)
Last date for registration : 12/29/20 (MM/DD/YY)

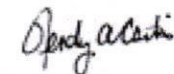
Program fees for International students for 2018-2019 are listed here by Program Name:
https://www.fanshawec.ca/sites/default/files/uploads/fees/international_fees_2019.pdf

The Deadline Date is important, as your seat is not confirmed until full payment has been made. Your seat will be confirmed subject to availability of seats in your program at the time of your payment. To hold your place, the fee of C\$17074.74 must be received by the "deadline date" mentioned above. Payment should be made in Canadian dollars through Flywire ONLY and you **MUST** send an electronic copy of your Flywire receipt with a scanned copy of this offer letter to atandon@fanshawec.ca and intspp@fanshawec.ca. The fee receipt can be downloaded from your Flywire account approximately 48-72 hours after making the payment.

Each year, more than 21,000 students choose Fanshawe College, including more than 5,000 international students from 80 countries. Arrival Services are provided at no additional charge to all new international students. This includes being met by an Airport Greeter, transportation from Pearson Airport to London, and two nights of accommodation, if required.

Once your visa is approved, you **MUST** email atandon@fanshawec.ca before 12/20/20 (MM/DD/YY). We look forward to seeing you in Canada at Fanshawe College.

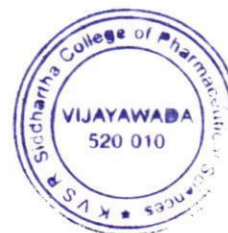
Sincerely,



Wendy Curtis,
Executive Director, Fanshawe International Centre



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Program Fee Details

Name: Yamini Gullapalli; Student #: 1006117
 Program: HSY2 - Health Systems Management

The following is the approximate breakdown of the cost of living for a twelve-month period for a student studying in Canada and living on his/her own:

Living Expenses (approximate)

Sub Total - Living Expenses: \$10000

School Fees (Estimated figures subject to change without prior notice):

To be paid to the college

- | | |
|---|------------|
| 1. Tuition | \$15192.00 |
| 2. Mandatory Non-Tuition Fees | \$1882.74 |
| <small>(Includes Athletics Fee, Health Insurance Fee, Incidental Fee, Student Activity Fee, Student Building Fee, Technology Fee)</small> | |
| 3. Additional Program Fee | \$0.00 |
| 4. Co-op Fee | \$0.00 |

Not to be paid to the college, to be spent during the program

- | | |
|---|-----------|
| 5. General Expenses | \$1272.30 |
| <small>(Includes Books which are Mandatory, Expendable Supplies, Uniforms & Minor Equipment, Field Trips & Local Transportation, Major Equipment, Professional Association Exam Fees, Other and Optional Expenses). This fee is not to be paid to the college directly, but nonetheless will have to be spent by the student every year for the expenses mentioned.</small> | |

Sub Total - School Fees: \$18347.04

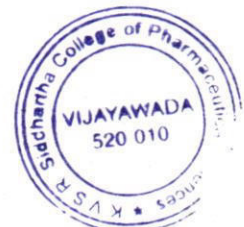
Total **C\$28347.04 (Approximate and subject to change)**

You have to pay **C\$17074.74** by 08/31/20 (MM/DD/YY). This fee amount is for first two levels and is subject to change. For the most updated fee for Level 3 (if applicable) or onwards, please visit: www.fanshawec.ca/fees.

Please review the College's withdrawal and refund policy information, found here: <https://www.fanshawec.ca/international/student-services/international-student-withdrawal-and-refund-process>

There will be a C\$250 deduction and the remaining amount will be refunded ONLY in the case of visa refusal. If the visa refusal cannot be provided, there will be a deduction of C\$2300. This refund of money will take a processing time of 90 days.


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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



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ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGCEET - 2020

NOTICE NO. 10/2020

DATE: 20/02/2021

TO: ALL COLLEGE PRINCIPALS

AU College of Pharmacy

PROVISIONAL ALLOTMENT ORDER FOR POST UG PHARMACOLOGY.

AU COLLEGE OF PHARMACEUTICAL SCIENCES (AMCP), VIKRAMAPATNAM USP
PHARMACOLOGY (PHDQ/ORG)

Tuition Fee fixed for the college course is Rs. 10000/-
Tuition fee to be paid by the candidate is Rs. 0/-

The State Council of Higher Education, Andhra Pradesh, has approved the provisional allotment of seats for the post UG Pharmacology in the college for the year 2020-21. The candidates who are eligible for the post UG Pharmacology in the college for the year 2020-21 are those who have passed the examination in the year 2020 and have secured a minimum of 50% marks in the examination. The candidates who are eligible for the post UG Pharmacology in the college for the year 2020-21 are those who have passed the examination in the year 2020 and have secured a minimum of 50% marks in the examination.

Instructions to Candidates

1. Candidates are requested to visit the website www.apchc.ac.in for the reporting system.
2. Take print out of two copies of provisional allotment report and report to the college for the admission process.
3. Both the reporting and allotment report should be submitted to the college for the admission process.
4. The candidates who are not eligible for the post UG Pharmacology in the college for the year 2020-21 are those who have not passed the examination in the year 2020 or have secured less than 50% marks in the examination.
5. The candidates who are eligible for the post UG Pharmacology in the college for the year 2020-21 are those who have passed the examination in the year 2020 and have secured a minimum of 50% marks in the examination.
6. The candidates who are eligible for the post UG Pharmacology in the college for the year 2020-21 are those who have passed the examination in the year 2020 and have secured a minimum of 50% marks in the examination.
7. The candidates who are eligible for the post UG Pharmacology in the college for the year 2020-21 are those who have passed the examination in the year 2020 and have secured a minimum of 50% marks in the examination.
8. The candidates who are eligible for the post UG Pharmacology in the college for the year 2020-21 are those who have passed the examination in the year 2020 and have secured a minimum of 50% marks in the examination.



APPGCEET - 2020

[Handwritten Signature]

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Y16BPH -36
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Direct Line: +44 (0)20 8331 8136
Direct Fax: +44 (0)20 8331 8625
E-Mail: international@gre.ac.uk
Applicant ID: 001138850
Date: 19 August 2020

OFFER OF PLACE

Full Name as shown in Passport: Ganesh Kumar Jasti

Passport Number: T2500113

Date of Birth: 11/04/1999

Programme Offered: MSc Pharmaceutical Sciences with Industrial Practice

The duration of this programme is 24 months, including 12 months of certified work experience after the completion of taught courses but in conjunction with independent research. The student is responsible for sourcing suitable certified work experience. The student can undertake a placement opportunity across the UK.

Academic and English Language conditions: Conditional upon passing Bachelors minimum aggregate 60%

Mode of Attendance: Full Time

Start Date: 04/01/2021

Duration of Programme: 2 years

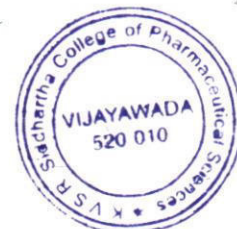
Campus: Medway

Campus Location: Pembroke, Central Avenue, Chatham Maritime, Kent ME4 4TB

Tuition Fee for Year of Offer: £16000

Financial Condition: Minimum pre registration deposit of £3000 (See conditions below):

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University of Greenwich
Greenwich Campus
Old Royal Naval College
Park Row
London SE10 9LS
Telephone: +44 (0)20 8331 8000

7/16/2017 2.6



Thank you for your application to the University of Greenwich. I am pleased to offer you a place on the programme specialised above. You will shortly receive a second emailed offer letter, which will include your Applicant ID (beginning in 001). If you have not received this email and wish to pay your deposit, please contact your agent who will obtain the 'Applicant ID' from the university.

To accept or decline this offer please reply to accepts@gre.ac.uk within 28 days to let us know. If you do not reply within 28 days, then we may be unable to guarantee your place, as it may be offered to another applicant. Please ensure that you include your Applicant ID in your response.

Tuition Fee & Pre Registration Deposit

The pre-registration deposit is the first payment towards your tuition fees; it reduces the tuition fees payable on registration and confirms your place on the programme offered. It can be paid by a Bank Draft made payable to the University of Greenwich or by direct transfer to the university's bank account.

The deposit paid to confirm the offer of place is only refundable where the applicant provides evidence that the application for a student visa was not accepted for the year the academic offer was made.

Full details of tuition fees, the pre-registration deposit, how to pay the deposit, university bank account details, available bursaries and scholarships and links to the charging and refund policy can be found at <https://www.gre.ac.uk/finance/fees> or by contacting international@gre.ac.uk

For Ds assessed as paying fees at the **international rate**, tuition fees are subject to an annual fee setting exercise and will rise annually by no more than RPI - X +3% (Retail Price Index excluding mortgage interest rates +3%). We would only consider an increase to the fee rate for continuing students to reflect the increased cost of delivering the course in subsequent years.

Visa

This offer cannot be used to obtain a Tier 4 student visa.

As an international fee paying student you will probably need a Tier 4 Student Visa to study with us. If you do require a Tier 4 Student Visa to study in the UK, please refer to the University Sponsorship Policy at <http://www2.gre.ac.uk/current-students/regs/?a=1441173>.

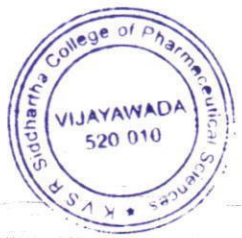
Information on how to apply and the requirements for your student visa to study with us can be found on the UK Government website at <https://www.gov.uk/browse/visas-immigration/student-visas>

Useful information is also available on the UKCISA (UK Council for International Student Affairs) web-link <http://www.ukcisa.org.uk/>

AKS

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London SE10 9LS
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It is your responsibility to ensure that you are in possession of an appropriate and valid visa.

Tier 4 Student Visas are institution specific; if you have studied in the UK previously and hold a student visa for another institution you will need to make a new visa application before you can register at the University of Greenwich.

One of the requirements of the UK Visa & Immigration (UKVI) when applying for the first time or renewing your student visa is that you provide proof that you have sufficient funds to cover the costs of the tuition fees for your first year of study plus the minimum UKVI maintenance requirement. The minimum maintenance requirement will depend on which campus you will be studying at.

Our Maritime Greenwich and Avery Hill Campuses are 'in London' and our Medway Campus is 'outside London'. Please ensure that you are aware of UKVI requirements on the minimum amount required, how you provide evidence of this and the length of time the funds must be held. Read carefully *Tier 4 of the Points Based System - Policy Guidance* on the UKVI website https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/370866/T4_Guidance_11-14.pdf

Confirmation of Acceptance of Studies (CAS) Number:


To apply for a Tier 4 Student Visa you will require a CAS Number. This is not an actual certificate or paper document but is a number issued electronically. It is unique to you and the University of Greenwich and contains information about the course of study for which it has been issued and your personal details. It is valid for six months from issue; you cannot apply for your student visa more than three months prior to the start of your programme.

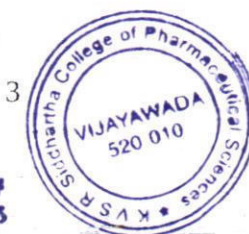
A CAS Statement including your unique CAS number and the other relevant information (including the qualifications used to assess your offer of place) will be emailed to you or to your agent (if your application was received from an authorised representative of the university).

We would like you to receive your CAS number, if required, as quickly as possible so please contact the International Office at international@gre.ac.uk as soon as you have paid the pre-registration deposit and any academic or English language conditions have been fulfilled.

Campuses

The university has three campuses. Which Campus you will be studying on depends on the Faculty and programme you will be studying with us and is stated above. The Greenwich Campus is on a World Heritage Site on the banks of the Thames in London. Our Avery Hill Campus is in Eltham in south-east London and our Medway Campus is in the County of Kent.


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English Language

When you join us you may be required to take a short written English test to establish what language support, if any, may help you succeed in your chosen programme. If the university recognises that you will benefit from English language support you will be required to attend classes, free of charge. Your attendance and progress will be monitored, and you will be expected to complete the course and pass the assessment.

Accommodation

All new students who join the university in September are guaranteed accommodation, either in a university hall of residence or in university approved housing, providing they meet the terms and conditions of the Accommodation Guarantee. Information about university accommodation including application deadline dates and other terms and conditions of the Accommodation Guarantee can be found at www.gre.ac.uk/accommodation. Please ensure you read this information carefully and if you have any queries contact a member of staff in the Accommodation Office at your campus of study. Contact details can be found at www.gre.ac.uk/accommodation. If you would like information about finding accommodation in the private rented sector or temporary accommodation in hotels, hostels or lodgings, please contact the Accommodation Service for further information. Please ensure that you have a safe place to stay when you arrive in the UK.

The Accommodation Service cannot offer temporary or emergency housing and you should not arrive without a place to stay.

On Arrival

When you arrive at the university to commence your studies you will be invited to register. This is a two part process.

Part 1: Online Registration: Requires you to log in to the university portal and go through an online process to verify information about yourself and your new programme of study. In order to start Online Registration, you will need your portal login details. These will be emailed to you or your agent nearer the start date of your programme when you have completed all stages of the admissions process. You will also be given a summary of the balance of your first year's tuition fees less any payments including the pre-registration deposit and any discounts.

To complete your registration, you will need to pay at least 50 per cent of this amount. This amount can be paid during online registration by entering credit/debit card details. Alternatively you can transfer the payment to the university's bank account or pay directly to the Student Centre by bank draft.

The remaining balance of tuition fees for September starters will be due before the last Friday in January and for January starters before the last Friday in May. A 2.5 per cent discount is available on your tuition fees if you pay your year's tuition fees in full before the end of September (for those registering on September programmes) or the end of January (for those registering on January

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programmes). This discount is not available for programmes run in our Medway School of Pharmacy and pre-sessional English language programmes.

Part 2: Identity and Qualification Checks: This is where you will show a member of staff your passport, proof of your visa and the original of your qualifications stated in your CAS statement (including authorised translations if not in English). These must be original documents and not photocopies.

Contact Us

Our international team will be happy to answer any questions you may have, please email international@gre.ac.uk. We look forward to welcoming you to the University of Greenwich and wish you every success in your studies.

Yours sincerely



Christopher Bustin
Head of International Office



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ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No.	6639020649	Rank:	1038.00
Name:	K NAGA MALLESWARI	Father's Name:	K VENKATESWARA RAO
Gender:	FEMALE (F)	Caste/ Region:	BC_D/ AU

PROVISIONAL ALLOTMENT ORDER (for PGECET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

SRI PADMAVATHI SCHOOL OF PHARMACY (SPSP1), TIRUPATHI, CTR
in **PHARMACEUTICS (PHCETS)(RGS)**, under SC_GEN_SVU category.

Tuition Fee fixed for the college/course is Rs. 55000 /- .

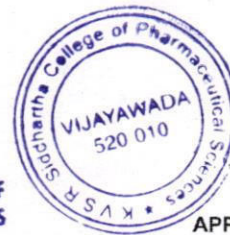
Tuition fee to be paid by the candidate is Rs. 55000 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is **20.02.2021 (before 5.00PM)**. Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.

[Signature]
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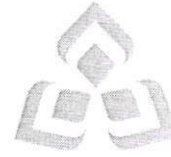


CONVENOR
APPGE CET - ADMISSIONS 2020

Y16 BPH-38
 (15)

LETTER OF ACCEPTANCE

Date of Issue: October 09, 2020



SAULT
 COLLEGE

Congratulations! You have been offered admission to Sault College!

PERSONAL INFORMATION

Family Name: Kalluri	CAQ: No
Given Name: Vijayasree	Student's Full Mailing Address: 17-22, Kakani Bazar, Penuganchiprolu V&M Krishna, Andhra Pradesh 521190, India
Date of Birth: December 26, 1997	
Student ID #: 20050131	Referring Agent (if applicable): IDP - India

INSTITUTIONAL INFORMATION

Name of Contact: International Admissions and Records Phone: 1-705-759-2554 ext. 2772 Email: international.admissions@saultcollege.ca	Full Name and Address of Institution: Sault College 443 Northern Ave Sault Ste Marie, Ontario, P6B 4J3, Canada
Type of School/Institution: Public	
Website: www.saultcollege.ca/international	Designated Learning Institution #: O19395677683

PROGRAM INFORMATION

Academic Status: Full-Time Program of Study: Health Care Administration (2186) Campus: Main Program Length: 2 Semester(s) (Consecutive) Start Date: January 11, 2021 Approx. Completion Date: August 20, 2021 Credential: Ontario College Graduate Certificate (Post-Graduate) Level of Study: Level 1 Hours of Instruction: 20 Exchange Program: No	Fee Structure: TOTAL DUE: \$2,500.00 by October 23, 2020 \$6,795.70 by November 15, 2020 \$8,005.70 by April 16, 2021 Tuition Fees: \$15,899.40 Mandatory Ancillary Fees: \$1,402.00 Total Annual Fees: \$17,301.40*
Internship/Work practicum: Not Available	Scholarship/Teaching Assistantship/Other Financial Aid: No
Conditions of Acceptance: • N/A	Expiry of Letter of Acceptance: January 04, 2021

Note: *Tuition and fees quoted are for the first two semesters of a program and are subject to change. This is not an invoice of fees but serves as an estimate of fees. This LOA does not reflect any prior payments made to Sault College.

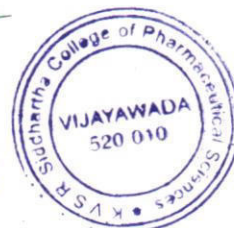
Your tuition and ancillary fees are available on the Sault College student portal at <https://my.saultcollege.ca>. For a full list of required ancillary fees, please visit www.saultcollege.ca/Admissions/Tuition.asp

Please review our refund and withdrawal process. It is available on our website at www.saultcollege.ca/Admissions/RefundPolicy.asp. No deferrals or refunds will be possible based solely on preference of delivery mode.

Karli Campbell, Registrar
 Sault College

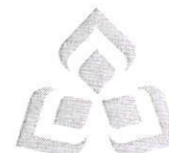
K Campbell

PRINCIPAL
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 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.



LETTER OF ACCEPTANCE

Date of Issue: October 09, 2020



SAULT COLLEGE

TO CONFIRM YOUR SEAT AT SAULT COLLEGE:

1. You must pay your first deposit amount as listed above. Your payment will hold your seat in the program and confirms your commitment to start your studies in the delivery mode that is available (e.g. on-campus, remote delivery online, or a combination of on-campus and remote online learning). If the first payment is not received in full before the expiry date listed above, your letter of acceptance will be revoked.
2. You must upload proof of payment to your application portal. Once payment has been received, a PDF receipt will be loaded to your application portal.
3. You must provide proof that you have a valid study permit to study in Canada. Upload your port of entry introductory letter (approval to receive a study permit), your study permit or copy of your stamped visa to your application portal no later than the date indicated below otherwise your letter of acceptance may be revoked:
 - August 15 (September/Fall programs)
 - December 15 (January/Winter programs)
 - April 15 (May/Summer programs)
4. You are required to read the arrival guide on www.saultcollege.ca/international carefully as it contains important policies, procedures and arrival information.
5. You are required to arrive on campus at least 1 week prior to the start of term to attend the mandatory International Student Orientation.

PAYMENT OPTIONS FROM OUTSIDE OF CANADA:

- Sault College uses CIBC International Student Pay exclusively for all international payments made from accounts outside of Canada. Please use the CIBC International Student Pay secure online platform at <https://pay.cibc.com/sault>. You will receive a quote in your local currency and can choose from the following payment options: Bank wire; Visa and Mastercard, China UnionPay, or ACH Direct Debit. Keep a copy of your proof of payment and load it to your application portal.

PAYMENT OPTIONS FROM WITHIN CANADA:

- Pay by Visa or Mastercard by going to the Online Tuition Payment in the Financial Records section of the Sault College student portal. Keep a copy of your proof of payment and load it to your application portal.
- Complete an online transfer from your bank account by adding the college as a payee/bill payment and using your 8-digit student number as the account number. Keep a copy of your proof of payment and load it to your application portal.
- Call the Financial Services Office at (705) 759-2554 ext. 2300 to make a payment with Visa or Mastercard.

IMPORTANT INFORMATION

Scholarships and Bursaries: This letter of admission lists the payment amount that you owe, less the applicable scholarship or bursary, as well as indicates your payment schedule. Scholarships and bursaries are non-refundable, non-cashable, non-transferable and subject to change. If you qualify for a scholarship or bursary as indicated above, the funds listed are in Canadian dollars and will be applied to your account prior to registration. Please visit your Sault College student portal for your personal statement of fees.

Sault College Student Portal: Students are required to become familiar with the Sault College student portal at <https://my.saultcollege.ca>.

Username: 8-digit Student ID as listed above

Password: welcome and your 6 digit postal code/zip/pin (e.g. welcomep6a5l3 or welcome90210). If you do not have a 6-digit postal code, your password is welcome000000.

If you experience difficulty logging in, please use the "Help" link on the top right-hand side of the screen.

Mandatory Requirements: Students accepted to the following programs must complete mandatory health and safety requirements to be eligible for work-integrated learning experiences:

Program	Standard First Aid/CPR Level C	Standard First Aid/CPR BLS	WHMIS N95 Mask Fit Test	Police Record Check
Child and Youth Care	X		X	X
Early Childhood Education	X		X	X
Social Service Worker	X		X	X
Occupational Therapist Assistant and Physiotherapist Assistant	X		X	X
Personal Support Worker		X	X	X
Personal and Developmental Support Services		X	X	X
Fitness and Health Promotion	X		X	X
Practical Nursing		X	X	X
Protection, Security and Investigation				X
Gerontology			X	X

These requirements must be met before your placement starts. It is your responsibility to ensure that you are eligible to participate. If you do not have these requirements but wish to acquire them, please contact enrollmentregistration@saultcollege.ca. Please note, additional fees will apply.

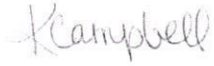
Canadian Study Permit: You must apply for a Canadian Study Permit as soon as possible at the nearest Canadian Embassy, High Commission or Consulate. For more information, please visit www.cic.gc.ca. International students who have been accepted into a program



with a co-op placement or an unpaid field placement are required to have a co-op work permit, even if the activity is paid or unpaid, on or off campus or full- or part-time. It is your responsibility to ensure you have the proper authorization. If you are in a program that requires a placement you will have a co-op work permit information letter attached to this letter of admission. If you withdraw, cease to attend classes or become part-time, you should be aware that we will inform Immigration and Citizenship Canada of your change in status.

We look forward to having you study at Sault College!

Sincerely,



Karli Campbell, Registrar
Sault College



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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Y16B211-39 (16)



Direct Line: +44 (0)20 8331 8136
Direct Fax: +44 (0)20 8331 8625
E-Mail: international@gre.ac.uk
Applicant: 001122573
ID: 13 August 2020
Date:

OFFER OF PLACE

Full Name as shown in Passport: ROHITH KAMBHAMPATI

Passport Number: S7087254

Date of Birth: 24/06/1999

Programme Offered: MSc Pharmaceutical Sciences with Industrial Practice

The duration of this programme is 24 months, including 12 months of certified work experience after the completion of taught courses but in conjunction with independent research. The student is responsible for sourcing suitable certified work experience. The student can undertake a placement opportunity across the UK.

Academic and English Language conditions: Conditional upon passing Bachelors minimum aggregate 55%

Mode of Attendance: Full Time

Start Date: 04/01/2021

Duration of Programme: 2 years

Campus: Medway

Campus Location: Pembroke, Central Avenue, Chatham Maritime, Kent ME4 4TB

Tuition Fee for Year of Offer: £15000

Financial Condition: Minimum pre registration deposit of £3000 (See conditions below):

Handwritten signature

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University of Greenwich
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London SE10 9LS
Telephone: +44 (0)20 8331 8000

Thank you for your application to the University of Greenwich. I am pleased to offer you a place on the programme specialised above. You will shortly receive a second emailed offer letter, which will include your Applicant ID (beginning in 001). If you have not received this email and wish to pay your deposit, please contact your agent who will obtain the 'Applicant ID' from the university.

To accept or decline this offer please reply to accepts@gre.ac.uk within 28 days to let us know. If you do not reply within 28 days, then we may be unable to guarantee your place, as it may be offered to another applicant. Please ensure that you include your Applicant ID in your response.

Tuition Fee & Pre Registration Deposit

The pre-registration deposit is the first payment towards your tuition fees; it reduces the tuition fees payable on registration and confirms your place on the programme offered. It can be paid by a Bank Draft made payable to the University of Greenwich or by direct transfer to the university's bank account.

The deposit paid to confirm the offer of place is only refundable where the applicant provides evidence that the application for a student visa was not accepted for the year the academic offer was made.

Full details of tuition fees, the pre-registration deposit, how to pay the deposit, university bank account details, available bursaries and scholarships and links to the charging and refund policy can be found at <https://www.gre.ac.uk/finance/fees> or by contacting international@gre.ac.uk

For Ds assessed as paying fees at the **international rate**, tuition fees are subject to an annual fee setting exercise and will rise annually by no more than RPI – X +3% (Retail Price Index excluding mortgage interest rates +3%). We would only consider an increase to the fee rate for continuing students to reflect the increased cost of delivering the course in subsequent years.

Visa

This offer cannot be used to obtain a Tier 4 student visa.

As an international fee paying student you will probably need a Tier 4 Student Visa to study with us. If you do require a Tier 4 Student Visa to study in the UK, please refer to the University Sponsorship Policy at <http://www2.gre.ac.uk/current-students/regs/?a=1441173>.

Information on how to apply and the requirements for your student visa to study with us can be found on the UK Government website at <https://www.gov.uk/browse/visas-immigration/student-visas>

Useful information is also available on the UKCISA (UK Council for International Student Affairs) web-link <http://www.ukcisa.org.uk/>

2

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



University of Greenwich
Greenwich Campus
Old Royal Naval College
Park Row
London SE10 9LS
Telephone: +44 (0)20 8331 8000

It is your responsibility to ensure that you are in possession of an appropriate and valid visa.

Tier 4 Student Visas are institution specific; if you have studied in the UK previously and hold a student visa for another institution you will need to make a new visa application before you can register at the University of Greenwich.

One of the requirements of the UK Visa & Immigration (UKVI) when applying for the first time or renewing your student visa is that you provide proof that you have sufficient funds to cover the costs of the tuition fees for your first year of study plus the minimum UKVI maintenance requirement. The minimum maintenance requirement will depend on which campus you will be studying at.

Our Maritime Greenwich and Avery Hill Campuses are 'in London' and our Medway Campus is 'outside London'. Please ensure that you are aware of UKVI requirements on the minimum amount required, how you provide evidence of this and the length of time the funds must be held. Read carefully *Tier 4 of the Points Based System - Policy Guidance* on the UKVI website https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/370866/T4_Guidance_11-14.pdf

Confirmation of Acceptance of Studies (CAS) Number:


To apply for a Tier 4 Student Visa you will require a CAS Number. This is not an actual certificate or paper document but is a number issued electronically. It is unique to you and the University of Greenwich and contains information about the course of study for which it has been issued and your personal details. It is valid for six months from issue; you cannot apply for your student visa more than three months prior to the start of your programme.

A CAS Statement including your unique CAS number and the other relevant information (including the qualifications used to assess your offer of place) will be emailed to you or to your agent (if your application was received from an authorised representative of the university).

We would like you to receive your CAS number, if required, as quickly as possible so please contact the International Office at international@gre.ac.uk as soon as you have paid the pre-registration deposit and any academic or English language conditions have been fulfilled.

Campuses

The university has three campuses. Which Campus you will be studying on depends on the Faculty and programme you will be studying with us and is stated above. The Greenwich Campus is on a World Heritage Site on the banks of the Thames in London. Our Avery Hill Campus is in Eltham in south-east London and our Medway Campus is in the County of Kent.


3
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
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VIJAYAWADA
A-520 010.



University of Greenwich
Greenwich Campus
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Park Row
London SE10 9LS
Telephone: +44 (0)20 8331 8000

English Language

When you join us you may be required to take a short written English test to establish what language support, if any, may help you succeed in your chosen programme. If the university recognises that you will benefit from English language support you will be required to attend classes, free of charge. Your attendance and progress will be monitored, and you will be expected to complete the course and pass the assessment.

Accommodation

All new students who join the university in September are guaranteed accommodation, either in a university hall of residence or in university approved housing, providing they meet the terms and conditions of the Accommodation Guarantee. Information about university accommodation including application deadline dates and other terms and conditions of the Accommodation Guarantee can be found at www.gre.ac.uk/accommodation. Please ensure you read this information carefully and if you have any queries contact a member of staff in the Accommodation Office at your campus of study. Contact details can be found at www.gre.ac.uk/accommodation. If you would like information about finding accommodation in the private rented sector or temporary accommodation in hotels, hostels or lodgings, please contact the Accommodation Service for further information. Please ensure that you have a safe place to stay when you arrive in the UK. The Accommodation Service cannot offer temporary or emergency housing and you should not arrive without a place to stay.

On Arrival


When you arrive at the university to commence your studies you will be invited to register. This is a two part process.

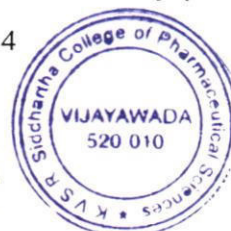
Part 1: Online Registration: Requires you to log in to the university portal and go through an online process to verify information about yourself and your new programme of study. In order to start Online Registration, you will need your portal login details. These will be emailed to you or your agent nearer the start date of your programme when you have completed all stages of the admissions process. You will also be given a summary of the balance of your first year's tuition fees less any payments including the pre-registration deposit and any discounts.

To complete your registration, you will need to pay at least 50 per cent of this amount. This amount can be paid during online registration by entering credit/debit card details. Alternatively you can transfer the payment to the university's bank account or pay directly to the Student Centre by bank draft.

The remaining balance of tuition fees for September starters will be due before the last Friday in January and for January starters before the last Friday in May. A 2.5 per cent discount is available on your tuition fees if you pay your year's tuition fees in full before the end of September (for those registering on September programmes) or the end of January (for those registering on January

4


PRINCIPAL
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Telephone: +44 (0)20 8331 8000

programmes). This discount is not available for programmes run in our Medway School of Pharmacy and pre-sessional English language programmes.

Part 2: Identity and Qualification Checks: This is where you will show a member of staff your passport, proof of your visa and the original of your qualifications stated in your CAS statement (including authorised translations if not in English). These must be original documents and not photocopies.

Contact Us

Our international team will be happy to answer any questions you may have, please email international@gre.ac.uk. We look forward to welcoming you to the University of Greenwich and wish you every success in your studies.

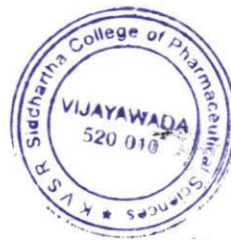
Yours sincerely



Christopher Bustin
Head of International Office



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



VIBISHA

416-13211
40

From: **Principal JSS College of Pharmacy, Mysore** <jsscpcmy@jssuni.edu.in>
Date: Tue, 22 Sep, 2020, 5:07 pm
Subject: Result of M.Pharm Admission 2020-21 -reg
To: Principal JSS College of Pharmacy, Mysore <jsscpcmy@jssuni.edu.in>

Sir/Madam,

Greeting from JSS College of Pharmacy, Mysuru!

First of all, we sincerely thank you for your interest and seeking admission to your 'WARD' in our institution to pursue a Master of Pharmacy (M Pharm) Regulatory Affairs Programme.

Your ward's academic credential (HSC), the performance in the telephonic interview conducted on 16th and 18th September, 2020 (online) have been considered by the admission committee of JSS AHER to prepare the list of 'selected' and 'wait-listed' candidates.

Based on the JSS AHER's Rank list, your ward is "SELECTED" for M.Pharm admission in Regulatory Affairs.

Congratulations, we eagerly look forward to welcoming you for a life-changing learning experience and prosperous journey ahead.

As the admission process is open from Thursday, 24th September, 2020 for documents verification between 10 am and 5 pm (online). Please scan copy of 10th, 12th and B.Pharm mark sheet (till latest semester) should be sent to jsscpcmy@jssuni.edu.in.

You are hereby advised to contact the Admission Cell at 0821 – 2548353, 2548026, 2548050 or for further modalities.

Note: The last date to pay the College fee is on or before 30th September, 2020 by 5pm failing which admission will not be considered. Classes will commence from 1st October, 2020.

Following are the bank details: (M.Pharm annual fee is Rs 2,96,000/-)

College fee account details

Beneficiary Name JSS Academy of Higher Education & Research, Mysore
College Account No. Current A/c No. 50200039160395
Name of the Bank/Address HDFC Bank, Ground Floor, Mantri Arcade,
Kantharaj Urs Road, 1st Main, Saraswathipuram, Mysore
Branch/ Code Saraswathipuram Branch- 000065
Bank IFSC Code HDFC0000065

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



Office Contact No 0821-2548353,2548050,2548026

Kindly acknowledge the receipt of the same (for the payment made) to our college mail id: jsscpmy@jssuni.edu.in

Candidate name: **KOLLI SUHAS REDDY**
Course: **M. Pharmacy**
Mode of transfer:
Date of remittance:
Remitted By:

Once again, thank you and look forward to enrol your ward in M Pharm 2020-21.

With regards

Office of the Principal
JSS College of Pharmacy
Sri Shivarathreeshwara Nagara
Mysuru - 570 015
Office Ph.: +91-0821-2548353/026/050
Fax : +91-0821-2548359
Web. : www.jssuni.edu.in



**PRINCIPAL
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VIJAYAWADA-520 010.**



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(17)



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPOECET - 2020

Half Ticket No.	00900022	Rank	2381 00
Name	KOMARAKATTA BUELA GRACE	Father's Name	KOMARAKATTA YESU BASU
Gender	FEMALE (F)	Caste/Region	SC/ AI

BUELA
GRACE**PROVISIONAL ALLOTMENT ORDER (for PGECET CANDIDATES)**

This is to inform that the options received by the candidate have been processed based on rank, rank, your area, sex, category, PWS, Special Reservation Category (CAP/PHUNCC/SPORT) etc and the candidate has been allotted a seat in

SRI PADMAVATHI SCHOOL OF PHARMACY (SPSP), TURUPATHI, CTR
in PHARMACEUTICAL ANALYSIS (PHANLXRS) - under SC, GEN, OBC category.

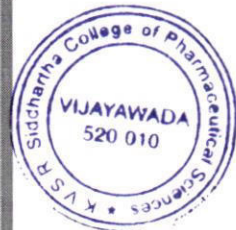
Tuition Fee fixed for the college/course is Rs. 55000 /- .

Tuition fee to be paid by the candidate is Rs. 55000 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is 30.03.2021



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VIJAYAWADA-520 010.

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18



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGET - 2020

Hall Ticket No.	0639020823	Rank:	1038.00
Name:	KOMARALA NARENDRA BABU	Father's Name:	KOMARALA SRINIVASA BAO
Gender:	MALE (M)	Caste/ Region:	OC/ AU

Print

PROVISIONAL ALLOTMENT ORDER (for PGET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

SRI VISHNU COLLEGE OF PHARMACY (SCPB1), BHIMAVARAM, WG
IN PHARMACEUTICAL ANALYSIS AND QUALITY ASSURANCE (PHPAQA)(RGS), under EWS_GEN_AU category.

Tuition Fee fixed for the college/course is Rs. 69000 /- .

Tuition fee to be paid by the candidate is Rs. 69000 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

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PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



10/22/20
1033958 Navya Teja Sree Manne
(Represented by: IDP Education (Canada))
8-29, Jammi Chettu Bazar, Prasadampadu, Krishna ,
Vijayawada, Andhra Pradesh
India

Letter of Admission

Deadline Date for Fees Payment
(MM/DD/YY): 11/12/20

Dear **Navya Teja Sree Manne,**

Congratulations! You have been accepted to Fanshawe College for your post-secondary studies in Canada subject to fulfillment of the conditions below. Do not submit to Immigration, Refugees and Citizenship Canada (IRCC) for study permit.

Fanshawe College Student ID : 1033958
Date of Birth : 07/18/1999 (MM/DD/YY)
Type of School : Public; Member, CIGan www.collegesinstitutes.ca; DLI # O19361039982
Program of Study : HCT1B - Health Care Administration Management, London South Campus
Academic Status : Full Time
Level of Study : Graduate Certificate Program
Semester of Study : Level 1
Program Start Date : 01/11/21 (MM/DD/YY)
Length of Program : 2 Years (4 Levels)
Co-Op/Work Term : N/A
Expected Date of Completion : 08/31/22 (MM/DD/YY)
Fees (Approximate and subject to change) : C\$16349.74
Fees Due : C\$16349.74
Fees Payment Deadline : 11/12/20 (MM/DD/YY)
Condition(s) (if applicable) : Completion of graduation with 50%. Do not submit to IRCC for study permit. Do not submit to IRCC for Study Permit. Student accepted under SDS.

Last date to update your visa : 12/20/20 (MM/DD/YY)
Last date for registration : 12/29/20 (MM/DD/YY)

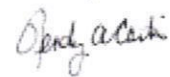
Program fees for International students for 2021-2022 are listed here by Program Name:
https://www.fanshawec.ca/sites/default/files/2020-07/2020-21_international_fees_july302020.pdf

The Deadline Date is important, as your seat is not confirmed until full payment has been made. Your seat will be confirmed subject to availability of seats in your program at the time of your payment. To hold your place, the fee of **C\$16349.74** must be received by the "deadline date" mentioned above. Payment should be made in Canadian dollars through Flywire ONLY and you **MUST** send an electronic copy of your Flywire receipt with a scanned copy of this offer letter to atandon@fanshawec.ca and intspp@fanshawec.ca. The fee receipt can be downloaded from your Flywire account approximately 48-72 hours after making the payment.


Each year, more than 21,000 students choose Fanshawe College, including more than 5,000 international students from 80 countries. Arrival Services are provided at no additional charge to all new international students. This includes being met by an Airport Greeter, transportation from Pearson Airport to London, and two nights of accommodation, if required.

Once your visa is approved, you **MUST** email atandon@fanshawec.ca before 12/20/20 (MM/DD/YY). We look forward to seeing you in Canada at Fanshawe College.

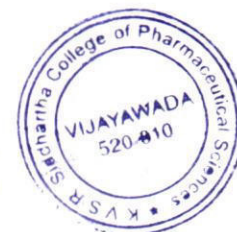
Sincerely,



Wendy Curtis,
Executive Director, Fanshawe International Centre



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Program Fee Details

Name: Navya Teja Sree Manne; Student #: 1033958
Program: HCT1B - Health Care Administration Management

The following is the approximate breakdown of the cost of living for a twelve-month period for a student studying in Canada and living on his/her own:

Living Expenses (approximate)

Sub Total - Living Expenses: \$10000

School Fees (Estimated figures subject to change without prior notice):

To be paid to the college

- | | |
|---|------------|
| 1. Tuition | \$14467.00 |
| 2. Mandatory Non-Tuition Fees
(Includes Athletics Fee, Health Insurance Fee, Incidental Fee, Student Activity Fee, Student Building Fee, Technology Fee) | \$1882.74 |
| 3. Additional Program Fee | \$0.00 |
| 4. Co-op Fee | \$0.00 |

Not to be paid to the college, to be spent during the program

- | | |
|---|--------|
| 5. General Expenses
(Includes Books which are Mandatory, Expendable Supplies, Uniforms & Minor Equipment, Field Trips & Local Transportation, Major Equipment, Professional Association Exam Fees, Other and Optional Expenses). This fee is not to be paid to the college directly, but nonetheless will have to be spent by the student every year for the expenses mentioned. | \$0.00 |
|---|--------|

Sub Total - School Fees: \$16349.74

Total **C\$26349.74 (Approximate and subject to change)**

You have to pay **C\$16349.74** by 11/12/20 (MM/DD/YY). This fee amount is for first two levels and is subject to change. For the most updated fee for Level 3 (if applicable) or onwards, please visit: www.fanshawec.ca/fees.

Please review the College's withdrawal and refund policy information, found here: <https://www.fanshawec.ca/international/student-services/international-student-withdrawal-and-refund-process>

There will be a C\$250 deduction and the remaining amount will be refunded ONLY in the case of visa refusal. If the visa refusal cannot be provided, there will be a deduction of C\$2300. This refund of money will take a processing time of 90 days.


PRINCIPAL
M.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



Y16BPH 51

23



Y16BPH 51

1001 Fanshawe College Boulevard
Office No - E2025, London,
Ontario, Canada
N5Y 5R6

08/10/20
1006266 Sravya Meda
(Represented by: IDP Education (Canada))
20-218, bypass road, Opposite kattamahalakshmayya dal mill,
Tiruvuru,
Tiruvuru, India 521235

Letter of Admission
Deadline Date for Fees Payment
(MM/DD/YY): 08/31/20

Dear Sravya Meda,

Congratulations! You have been accepted to Fanshawe College for your post-secondary studies in Canada subject to fulfillment of the conditions below. Do not submit to Immigration, Refugees and Citizenship Canada (IRCC) for study permit.

Fanshawe College Student ID	: 1006266
Date of Birth	: 07/14/1998 (MM/DD/YY)
Type of School	: Public; Member, CIGan www.collegesinstitutes.ca ; DLI # O19361039982
Program of Study	: HSY2 - Health Systems Management + PRJ1 - Project Management, London Campus
Academic Status	: Full Time
Level of Study	: Graduate Certificate
Semester of Study	: Level 1
Program Start Date	: 01/04/21 (MM/DD/YY)
Length of Program	: 1 Year (2 Levels) + 1 Year (2 Levels)
Co-Op/Work Term	: N/A
Expected Date of Completion	: 04/30/22 (MM/DD/YY)
Fees (Approximate and subject to change)	: C\$17074.74
Fees Due	: C\$17074.74
Fees Payment Deadline	: 08/31/20 (MM/DD/YY)
Condition(s) (if applicable)	: Completion of graduation with 50%. Do not submit to IRCC for study permit. Do not submit to IRCC for study permit. Student accepted under SDS.
Last date to update your visa	: 12/20/20 (MM/DD/YY)
Last date for registration	: 12/29/20 (MM/DD/YY)

Program fees for International students for 2018-2019 are listed here by Program Name:
https://www.fanshawec.ca/sites/default/files/uploads/fees/international_fees_2019.pdf

The Deadline Date is important, as your seat is not confirmed until full payment has been made. Your seat will be confirmed subject to availability of seats in your program at the time of your payment. To hold your place, the fee of C\$17074.74 must be received by the "deadline date" mentioned above. Payment should be made in Canadian dollars through Flywire ONLY and you **MUST** send an electronic copy of your Flywire receipt with a scanned copy of this offer letter to atandon@fanshawec.ca and ir_tspp@fanshawec.ca. The fee receipt can be downloaded from your Flywire account approximately 48-72 hours after making the payment.

Each year, more than 21,000 students choose Fanshawe College, including more than 5,000 international students from 80 countries. Arrival Services are provided at no additional charge to all new international students. This includes being met by an Airport Greeter, transportation from Pearson Airport to London, and two nights of accommodation, if required.

Once your visa is approved, you **MUST** e mail atandon@fanshawec.ca before 12/20/20 (MM/DD/YY). We look forward to seeing you in Canada at Fanshawe College.

Sincerely,

Wendy Curtis,
Executive Director, Fanshawe International Centre

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K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

Program Fee Details

Name: Sravya Meda; Student #: 1006266
Program: HSY2 - Health Systems Management

The following is the approximate breakdown of the cost of living for a twelve-month period for a student studying in Canada and living on his/her own:

Living Expenses (approximate)

Sub Total - Living Expenses: \$10000

School Fees (Estimated figures subject to change without prior notice):

To be paid to the college

- | | |
|---|------------|
| 1. Tuition | \$15192.00 |
| 2. Mandatory Non-Tuition Fees
(Includes Athletics Fee, Health Insurance Fee, Incidental Fee, Student Activity Fee, Student Building Fee, Technology Fee) | \$1882.74 |
| 3. Additional Program Fee | \$0.00 |
| 4. Co-op Fee | \$0.00 |

Not to be paid to the college, to be spent during the program

- | | |
|---|-----------|
| 5. General Expenses
(Includes Books which are Mandatory, Expendable Supplies, Uniforms & Minor Equipment, Field Trips & Local Transportation, Major Equipment, Professional Association Exam Fees, Other and Optional Expenses). This fee is not to be paid to the college directly, but nonetheless will have to be spent by the student every year for the expenses mentioned. | \$1272.30 |
|---|-----------|

Sub Total - School Fees: \$18347.04

Total C\$28347.04 (Approximate and subject to change)

You have to pay **C\$17074.74** by 08/31/20 (MM/DD/YY). This fee amount is for first two levels and is subject to change. For the most updated fee for Level 3 (if applicable) or onwards, please visit: www.fanshawec.ca/fees.

Please review the College's withdrawal and refund policy information, found here:

<https://www.fanshawec.ca/international/student-services/international-student-withdrawal-and-refund-process>

There will be a C\$250 deduction and the remaining amount will be refunded ONLY in the case of visa refusal. If the visa refusal cannot be provided, there will be a deduction of C\$2300. This refund of money will take a processing time of 90 days.

[Handwritten Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 020.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGECET - 2020

Hall Ticket No. 6639010224	Rank: 2182.00
Name: MEKALA ALEKHYA	Father's Name: MEKALA VENKATRAO
Gender: FEMALE (F)	Caste/ Region: OC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGECET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

**SKU COLL OF PHARMCEUTICAL SCIENCE-SELF FINANCE (SKUPSF1), ANANTAPURAMU, ATP
in PHARMACEUTICS (PHCETS)(SFN), under OC_GIRLS_SVU category.**

Tuition Fee fixed for the college/course is Rs. 110000 /- .

Tuition fee to be paid by the candidate is Rs. 0 /- .**

** The students of various categories will be considered for Jagannanna Vidya Deevana (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

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5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
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9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.



CONVENOR

APPGECET - ADMISSIONS 2020

**PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.**



(21)

ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGET - 2020

Hall Ticket No.	6639010240	Rank:	2469.00
Name:	MUNNANGI SUKANYA	Father's Name:	MUNNANGI ANANDARAO
Gender:	FEMALE (F)	Caste/ Region:	BC_A/ AU

PROVISIONAL ALLOTMENT ORDER (for PGET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

**K V S R SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCI.S (VRSP1), VIJAYAWADA, KRI
in PHARMACEUTICS (PHCETS)(SFN), under BC_A_GEN_UR category.**


Tuition Fee fixed for the college/course is Rs. 54400 /- .

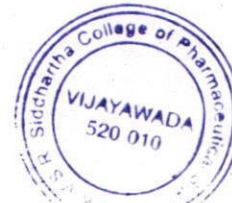
Tuition fee to be paid by the candidate is Rs. 54400 /- .**

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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



CONVENOR
APPGET - ADMISSIONS 2020

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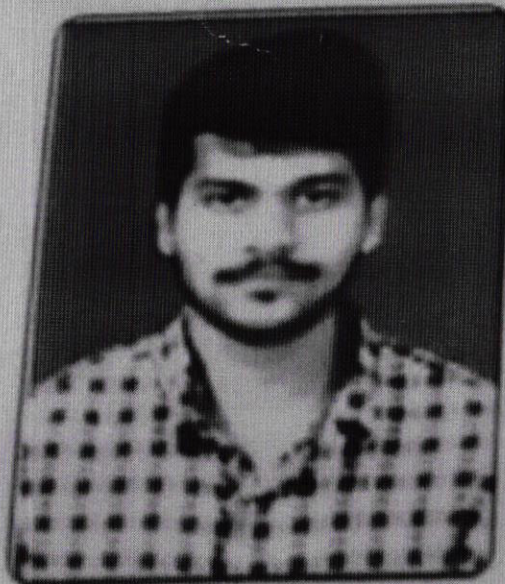


GITAM

(DEEMED TO BE UNIVERSITY)

(EMULATED UNDER THE UGC Act, 1956)

VISAKHAPATNAM • HYDERABAD • BENGALURU



MURAPALA VIVEK

122025101008

M.Pharm-PHARMACEUTICS

2020-2022

Institute of Pharmacy

Visakhapatnam

M. Vivek

Student

[Handwritten signature]



Registrar

PRINCIPAL
K.V.S. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA

PROVISIONAL ALLOTMENT ORDER

Date: 31-12-2020


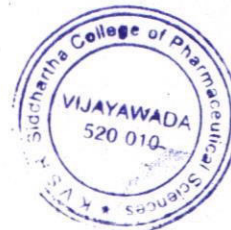
Application Number	: 301293
Mode of Admission	: Online Counselling
Name of the Student	: MURAPALA VIVEK
Name of the Parent / Guardian	: MURAPALA SRINIVASA RAO
Gender	: Male
Category	: OBC
Institute	: GITAM Institute of Pharmacy , Visakhapatnam
Program	: Pharmaceutics

Admission will be confirmed subject to the following conditions:

- The candidate will be eligible for admission only if he fulfils the eligibility criteria prescribed by GITAM (Deemed to be University) in his qualifying examination. The remaining amount of fee should be paid by the candidate before the commencement of classwork.
- The candidate has to report to the Principal, GITAM Institute of Pharmacy, GITAM (Deemed to be University), Visakhapatnam with the following certificates in original, and submit two sets of self-attested photocopies and four latest passport size photos for the purpose of registration to confirm his admission.
 1. X class marks memo and pass certificate.
 2. Degree marks memo and pass certificate.
 3. Transfer and conduct certificates.
 4. Medical certificate (in case of PH candidates).
 5. Integrated community certificate (in case of SC/ST candidates).
- The original certificates will be physically verified for authenticity and the same will be returned to the candidate. However, it is mandatory that the candidate should submit the original Transfer & Conduct certificate.
- If any candidate does not report to the Principal on or before 01st November 2020, his provisional allotment of seat will be cancelled. The fee paid will be refunded after deducting the prescribed charges as per UGC guidelines on submission of his request through Online Admission Portal.
- Due to any reason, If the admitted candidate chooses to withdraw from his course of study after 10th November 2020, the fee amount paid by the candidate will not be refunded under any circumstances and no further correspondence shall be entertained in this regard.

Signature of the
CandidateSignature of the
Parent / GuardianSignature of the
Coordinator

 P A V S SEKHAR
 Director Admissions


 PRINCIPAL
 K.V.S.R. SIDDHARTHA COLLEGE OF
 PHARMACEUTICAL SCIENCES
 VIJAYAWADA-520 010.


416 APH140059

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ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No.	6639021264	Rank:	3039.00
Name:	PALLEM SANTHI	Father's Name:	PALLEM SRINIVASA RAO
Gender:	FEMALE (F)	Caste/ Region:	SC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGCET CANDIDATES)

Print

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

JNTUA-OIL TECHNOLOGICAL RESEARCH INSTITUTE-SELF FINANCE (OTRISF1), ANANTAPURAMU, ATP
in **PHARMACOLOGY (PHCOLG)(SFN)**, under SC_GIRLS_UR category.


Tuition Fee fixed for the college/course is Rs. 90000 /- .


Tuition fee to be paid by the candidate is Rs. 0 /- .**

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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010


CONVENOR
APPGE CET - ADMISSIONS 2020

*** This computer generated Provisional Allotment Order does not require any authentication. ***



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGET - 2020

Hall Ticket No.	6639010270	Rank:	244.00
Name:	PALUTLA SAI PRAVALLIKA	Father's Name:	PNSREENIVASARAO
Gender:	FEMALE (F)	Caste/ Region:	OC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGET CANDIDATES)

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**SRI VISHNU COLLEGE OF PHARMACY (SCPB1), BHIMAVARAM, WG
in PHARMACEUTICS (PHCETS)(RGS), under OC_GEN_AU category.**

Tuition Fee fixed for the college/course is Rs. 69000 /- .

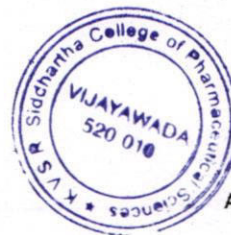
Tuition fee to be paid by the candidate is Rs. 69000 /- .**

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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICS
VIJAYAWADA-520 010.



CONVENOR
APPGET - ADMISSIONS 2020

26



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No.	6639010280	Rank:	347.00
Name:	PATIBALLA VENKATA NAGA SAI BINDU MADHAVI	Father's Name:	P V N R G VAMSI KRISHNA
Gender:	FEMALE (F)	Caste/ Region:	OC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGE CET CANDIDATES)

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SRI VENKATESWARA COLLEGE OF PHARMACY (SVCP1), CHITTOOR, CTR
in **PHARMACEUTICS -DRUG REGULATORY AFFAIRS (PHCTDR)(RGS)**, under OC_GEN_UR category.

Tuition Fee fixed for the college/course is Rs. 66700 /- .

Tuition fee to be paid by the candidate is Rs. 66700 /- .**

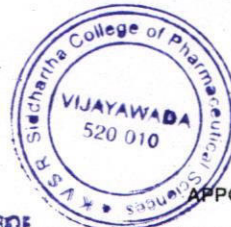
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PRINCIPAL

K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA



CONVENOR

APPGE CET - ADMISSIONS 2020

*** This computer generated Provisional Allotment Order does not require any authentication. ***

-----Printed as on Dt: 18-02-2021 -----



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION



APPGECEt - 2020

JOINING REPORT

Hall Ticket No.: 6649020629
Name: PENCHIKALA NAGA PAVANI

Rank: 4601.00
Father's Name: PENCHIKALA KASAI AH

Based on your acceptance to join SCPB1, PHCOLG through Self Reporting System on Date : 18/02/2021

Your joining details are confirmed vide Admission No : 15028.

Note: Submit this along with Provisional Allotment Order already downloaded to the college.

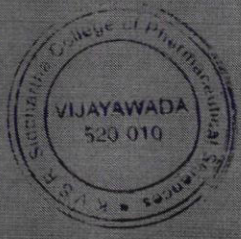


CONVENOR
APPGECEt - ADMISSIONS 2020

*** This computer generated Joining Report does not require any authentication. ***
-----Printed as on Dt: 18-02-2021 -----

Handwritten signature

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



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ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No.	6649020E29	Rank:	4601.00
Name:	PENCH(KALA NAGA PAVANI)	Father's Name:	PENCHIKALA KASAJAH
Gender:	FEMALE (F)	Caste/ Region:	OC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGECET CANDIDATES)

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**SRI VISHNU COLLEGE OF PHARMACY (SCPBI), BHIMAVARAM, WG
in PHARMACOLOGY (PHCOLG)(RGS), under OC_NCC_GIRLS_AU(0) category.**

Tuition Fee fixed for the college/course is Rs. 69000 /-.

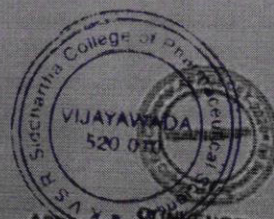
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PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES,
VIJAYAWADA-520 010



CO-ORDINATOR
APPGE CET - ADMISSIONS 2020

*** This computer generated Provisional Allotment Order is valid only after verification ***
Printed at on Dt. 18-02-2021



DEPARTMENT OF PHARMACEUTICAL ENGINEERING & TECHNOLOGY
INDIAN INSTITUTE OF TECHNOLOGY (BANARAS HINDU UNIVERSITY)

Varanasi – 221 005, Uttar Pradesh

E-mail: head.phe@iitbhu.ac.in; URL: www.iitbhu.ac.in/phe

88 Years of Excellence in Pharmaceutical Education & Research



26 May 2020

Call letter for counselling (online document verification) for admission to M.Pharm. Programme 2020-21

Dear Candidate,

This has reference to your application for admission to M Pharm Programme (2020-21) in our Department. The admission to M Pharm Programme will be made on the basis of the **Merit of GPAT Score** and after the online (email/telephone) verification of the scanned copies of self-attested certificates and testimonials (listed below).

Therefore, you are requested to email the scanned copies (quality clear images) of the following documents (Se. No. 1 to 6; all certificates in a single pdf file; with application no as file name) to the mail id: head.phe@iitbhu.ac.in within 24 hours of receipt of this email and also be available for online (email/telephone) counselling/interaction/document verification process during **27th May 2020 to 02nd June 2020**.

1. **Duly self-attested** copy of GPAT score card.
2. **Duly self-attested** copy of birth certificate/matriculation certificate.
3. **Duly self-attested** copy of degree certificate, marks sheets/grade sheets (with conversion formula of grades into percentage) of all the examinations passed (Matriculation, Intermediate and B Pharm*).


*If the result of qualifying examination (B Pharm) is not declared, you are required email a certificate (The proforma is available in our admission portal) from the Head/Principal/Director of the Department/Institution in which you appeared for the qualifying examination (if not already submitted), that you have completed all requirements of the qualifying examination (B Pharm) before the date of counselling **OR** a bonafide certificate from the same that all the requirements of qualifying examination will be completed by date of registration in the Department and final results will be available by **30th September, 2020**.

4. **Duly self-attested** copy of SC/ST/OBC (non-creamy layer)/EWS certificate in the prescribed format. OBC certificate should not be dated prior to six months from **1st May, 2020**. **ORIGINAL has to be shown/submitted at the time of physical registration**. For more details refer to the admission brochure page no. 8 (3.A).
5. **Duly self-attested** copy of physically challenged (PC) certificate, if applicable. **ORIGINAL has to be shown/submitted at the time of physical registration**.
6. **Duly self-attested** copy of Medical fitness certificate from any registered medical practitioner. **ORIGINAL has to be shown/submitted at the time of physical registration**.

The candidates who are unable to email the soft copies of any of above certificate, they have to attach an undertaking letter stating that he/she will submit the those valid certificates at the time of physical registration **OR** on or before 30 September 2020. Fulfilling the minimum eligibility criteria is mandatory for securing admission. The candidates who do not respond to this email and do not email the desired valid documents within the stipulated time, will be debarred from the admission.

Selected candidates will receive the provisional admission offer letter from our office through email only. Upon the receipt of admission offer, the candidates will be required to pay the admission fee and email the e-receipt of the academic fee to head.phe@iitbhu.ac.in by the **said date**, failing which your seat will be offered to the waiting list candidate, during the further round(s) of admission offer.

P.V. Ravikiran


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.
Head, Pharmaceutical Engg. & Tech.,
IIT (BHU) Varanasi

Y16BPH140065

9951892655

17/12/2020

Vijayawada.

To

The principal sir,

KVSR Siddhartha college of pharmaceutical
Sciences,

Vijayawada.

5200010.

Respected sir,

This is P.V. Ravikiran of Roll No - Y16BPH140065 From the batch

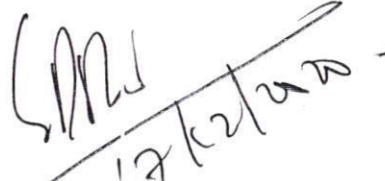
2016-20. Sir I have submitted for the Transfer certificate and migration

certificate So, Sir please give me permission to collect the T.C

to me on my behalf as you already aware of my accident so,

I am unable to travel and I will take the responsibility of any further conditions.

Thanking you sir,


17/12/2020 -
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYA WADA-520 010.

Yours faithfully,

P.V. Ravikiran

Y16BPH140065.

PH. No:- 9951892655.



National Institute Pharmaceutical Education and Research (NIPER)

Ahmedabad, Guwahati, Hajipur, Hyderabad, Kolkata, Raebareilly, S.A.S. Nagar

NIPER Joint Entrance Examination 2020 - Master's Program Provisional Seat Allotment Letter

Dear Candidate,

Congratulations! This is to inform you have been allotted following program as per your choice preference and AI Rank for NIPER JEE 2020 for M.S. (Pharm.)/ M.Pharm./ M.Tech.(Pharm.) admission of 2020-2022 Batch.

Application No. N004254
 Candidate Name: RUNESH PODILI
 Rank: 573
 Choice No. 17
 Category Allotted: OBC
 Course Allotted: M.S. (Pharm) Medicinal Chemistry
 Institute Allotted: National Institute of Pharmaceutical Education and Research Guwahati
 Applicable Fee: Rs. 78625



Undertaking:-

- I undertake that my admission is provisional subject to the submission and verification of valid document mentioned overleaf.
- I declare, that in case I am unable to submit above mentioned certificates/documents for physical verification/validation within the time limit that is notified by the NIPER-JEE 2020, I shall not claim any equity on account of admission against the allotted seat. I also state that I am well aware of the fact that my admission is completely subject to the physical verification/validation of my original certificates otherwise my admission is liable to be cancelled & all the fees deposited by me shall be forfeit.
- I agree, that if any falsified records are detected at any stage of admission or during the course of study & even after I pass out my course, my admission to the course shall be liable to be cancelled or the degree awarded by the NIPER shall be taken back, further, I will be debarred from attending any course at NIPER for the next 05 (Five) years and in addition a criminal case under relevant section(s) of law in force may be initiated against me.
- I undertake that I shall abide by the Rules & Regulations of the NIPER. I also hereby undertake that I shall accept the decision of the NIPER-JEE Committee-2020 as final if the seat allotted to me is taken back or if my admission is cancelled due to submission of incorrect certificates/non-submission of certificates within the duration of time allotted as above, to furnish the same.
- I further declare that I have submitted the result of qualifying degree exam / will submit the result of qualifying degree/certificate as stated above, before the commencement of Final Semester examination at respective NIPER, otherwise my provisional admission shall be cancelled and full fees deposited by me shall be forfeited and no claim will be made by me.
- I have a knowledge that as per the norms of NIPER a fellowship is given to all successful candidates who have granted admission in M.S. (Pharm.)/M.Pharm./ M.Tech. (Pharm.) programme through NIPER JEE 2020 counselling. I understand if till date I do not submit my result of qualifying examination and other required documents mentioned overleaf as per the NIPER JEE 2020 norms. I would not be eligible for fellowship and further till that date I will not claim any fellowship from the NIPER.

PRINCIPAL

K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



(Signature of Student)

Y16BPL

Tharun P

67 (31)

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0031421970

SURNAME/PRIMARY NAME Powduri	GIVEN NAME Tharun	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Tharun Powduri	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH DORNALA	DATE OF BIRTH 11 JUNE 1997	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME University of North Texas University of North Texas	SCHOOL ADDRESS 1155 Union Circle #311067, Denton, TX 76203
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Jamal King Intl Student & Scholar Services Advisor	SCHOOL CODE AND APPROVAL DATE DAL214F00610000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Science/Studies 11.0401	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 09 DECEMBER 2020
START OF CLASSES 11 JANUARY 2021	PROGRAM START/END DATE 08 JANUARY 2021 - 31 MAY 2023	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,754	Personal Funds	\$ 32,718
Living Expenses	\$ 13,189	Funds From This School	\$
Expenses of Dependents (0)	\$	Funds From Another Source	\$ 0
Books, Insurance	\$ 3,775	On-Campus Employment	\$
TOTAL	\$ 32,718	TOTAL	\$ 32,718

REMARKS

Tuition/fees subject to change.

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

<input checked="" type="checkbox"/> SIGNATURE OF: Jamal King, Intl Student & Scholar Services Advisor	DATE ISSUED 15 October 2020	PLACE ISSUED Denton, TX
--	---------------------------------------	-----------------------------------

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

<input checked="" type="checkbox"/> SIGNATURE OF: Tharun Powduri	DATE
<input checked="" type="checkbox"/> NAME OF PARENT OR GUARDIAN	SIGNATURE
ADDRESS (city/state or province/country)	DATE

Handwritten signature

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.

SEVIS ID: N0031421970 (F-1)

NAME: Tharun Powduri

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		


PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No.	6639021411	Rank:	4881.00
Name:	PUNUGUPATI ROJA	Father's Name:	PUNUGUPATI RAVI KUMAR
Gender:	FEMALE (F)	Caste/ Region:	OC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGE CET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

VIGNAN PHARMACY COLLEGE (VPCV1), VADLAMUDI, GTR
in **PHARMACEUTICAL ANALYSIS (PHANLS)(RGS)**, under OC_GIRLS_AU category.

Tuition Fee fixed for the college/course is Rs. 69500 /- .

Tuition fee to be paid by the candidate is Rs. 69500 /- .**

** The students of various categories will be considered for Jagannanna Vidya Deevana (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is **20.02.2021 (before 5.00PM)**. Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.

[Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



CONVENOR
APPGE CET - ADMISSIONS 2020



VIGNAN PHARMACY COLLEGE

Affiliated to JNTUK. www.vignanpharmacycollege.in



PUNUGUPATI ROJA

Reg.No : 20AB1S1605

Course : M.Pharmacy

BloodGroup : B+VE

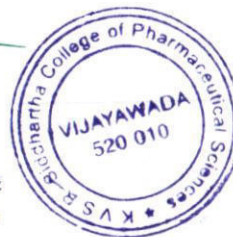
Valid Until : 2020-2022

[Handwritten Signature]
principal


Vadlamudi, Guntur Dist., A.P - 522 213.

[Handwritten Signature]

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



33




MANIPAL
ACADEMY of HIGHER EDUCATION
(Deemed to be University under Section 3 of the UGC Act, 1956)

SUSMITH MANINDRA KUNDURU

MPharm Pharmaceutics

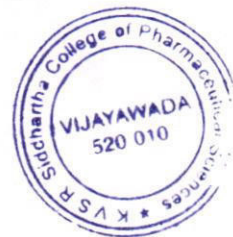
M C O P S, Manipal



ID#: 200603016 **VALID THRU : Oct 2022**

Signature

PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No.	6639010364	Rank:	3670.00
Name:	TABETI RATNA DEEPIKA	Father's Name:	TABETI MANI BABU
Gender:	FEMALE (F)	Caste/ Region:	SC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGE CET CANDIDATES)

Print

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

SRI PADMAVATHI SCHOOL OF PHARMACY (SPSP1), TIRUPATHI, CTR
in PHARMACEUTICAL ANALYSIS (PHANLS)(RGS), under SC_GEN_SVU category.

Tuition Fee fixed for the college/course is Rs. 55000 /- .

Tuition fee to be paid by the candidate is Rs. 55000 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates.

PRINCIPAL
SRI PADMAVATHI SCHOOL OF PHARMACY
PHARMACEUTICAL SCIENCES
TIRUPATHI, ANDHRA PRADESH



LETTER OF ACCEPTANCE

Date of Issue: October 09, 2020



SAULT
COLLEGE

U. Karthik
35

Congratulations! You have been offered admission to Sault College!

PERSONAL INFORMATION

Family Name: Uppalapati	CAQ: No
Given Name: Karthik	Student's Full Mailing Address: Flat No-G-6, Poojatowers, Mailurai Center, Gollapudi, Vijayawada Krishna, Andhra Pradesh 521225, India
Date of Birth: April 21, 1999	
Student ID #: 20050120	Referring Agent (if applicable): IDP - India

INSTITUTIONAL INFORMATION

Name of Contact: International Admissions and Records Phone: 1-705-759-2554 ext. 2772 Email: international.admissions@saultcollege.ca	Full Name and Address of Institution: Sault College 443 Northern Ave Sault Ste Marie, Ontario, P6B 4J3, Canada
Type of School/Institution: Public	
Website: www.saultcollege.ca/international	Designated Learning Institution #: O19395677683

PROGRAM INFORMATION

Academic Status: Full-Time Program of Study: Health Care Administration (2186) Campus: Main Program Length: 2 Semester(s) (Consecutive) Start Date: January 11, 2021 Approx. Completion Date: August 20, 2021 Credential: Ontario College Graduate Certificate (Post-Graduate) Level of Study: Level 1 Hours of Instruction: 20 Exchange Program: No	Fee Structure: TOTAL DUE: \$2,500.00 by October 23, 2020 \$6,795.70 by November 15, 2020 \$8,005.70 by April 16, 2021 Tuition Fees: \$15,899.40 Mandatory Ancillary Fees: \$1,402.00 Total Annual Fees: \$17,301.40*
Internship/Work practicum: Not Available	Scholarship/Teaching Assistantship/Other Financial Aid: No
Conditions of Acceptance: • N/A	Expiry of Letter of Acceptance: January 04, 2021

Note: *Tuition and fees quoted are for the first two semesters of a program and are subject to change. This is not an invoice of fees but serves as an estimate of fees. This LOA does not reflect any prior payments made to Sault College.

Your tuition and ancillary fees are available on the Sault College student portal at <https://my.saultcollege.ca>. For a full list of required ancillary fees, please visit www.saultcollege.ca/Admissions/Tuition.asp

Please review our refund and withdrawal process. It is available on our website at www.saultcollege.ca/Admissions/RefundPolicy.asp. No deferrals or refunds will be possible based solely on preference of delivery mode.

Karli Campbell, Registrar
Sault College

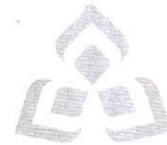
K. Campbell

[Signature]
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.



LETTER OF ACCEPTANCE

Date of Issue: October 09, 2020



SAULT
COLLEGE

TO CONFIRM YOUR SEAT AT SAULT COLLEGE:

1. You must pay your first deposit amount as listed above. Your payment will hold your seat in the program and confirms your commitment to start your studies in the delivery mode that is available (e.g. on-campus, remote delivery online, or a combination of on-campus and remote online learning). If the first payment is not received in full before the expiry date listed above, your letter of acceptance will be revoked.
2. You must upload proof of payment to your application portal. Once payment has been received, a PDF receipt will be loaded to your application portal.
3. You must provide proof that you have a valid study permit to study in Canada. Upload your port of entry introductory letter (approval to receive a study permit), your study permit or copy of your stamped visa to your application portal no later than the date indicated below otherwise your letter of acceptance may be revoked:
 - August 15 (September/Fall programs)
 - December 15 (January/Winter programs)
 - April 15 (May/Summer programs)
4. You are required to read the arrival guide on www.saultcollege.ca/international carefully as it contains important policies, procedures and arrival information.
5. You are required to arrive on campus at least 1 week prior to the start of term to attend the mandatory International Student Orientation.

PAYMENT OPTIONS FROM OUTSIDE OF CANADA:

- Sault College uses CIBC International Student Pay exclusively for all international payments made from accounts outside of Canada. Please use the CIBC International Student Pay secure online platform at <https://pay.cibc.com/sault>. You will receive a quote in your local currency and can choose from the following payment options: Bank wire; Visa and Mastercard, China UnionPay, or ACH Direct Debit. Keep a copy of your proof of payment and load it to your application portal.

PAYMENT OPTIONS FROM WITHIN CANADA:

- Pay by Visa or Mastercard by going to the Online Tuition Payment in the Financial Records section of the Sault College student portal. Keep a copy of your proof of payment and load it to your application portal.
- Complete an online transfer from your bank account by adding the college as a payee/bill payment and using your 8-digit student number as the account number. Keep a copy of your proof of payment and load it to your application portal.
- Call the Financial Services Office at (705) 759-2554 ext. 2300 to make a payment with Visa or Mastercard.

IMPORTANT INFORMATION

Scholarships and Bursaries: This letter of admission lists the payment amount that you owe, less the applicable scholarship or bursary, as well as indicates your payment schedule. Scholarships and bursaries are non-refundable, non-cashable, non-transferable and subject to change. If you qualify for a scholarship or bursary as indicated above, the funds listed are in Canadian dollars and will be applied to your account prior to registration. Please visit your Sault College student portal for your personal statement of fees.

Sault College Student Portal: Students are required to become familiar with the Sault College student portal at <https://my.saultcollege.ca>.

Username: 8-digit Student ID as listed above

Password: welcome and your 6 digit postal code/zip/pin (e.g. welcome6a5l3 or welcome90210). If you do not have a 6-digit postal code, your password is welcome000000.

If you experience difficulty logging in, please use the "Help" link on the top right-hand side of the screen.

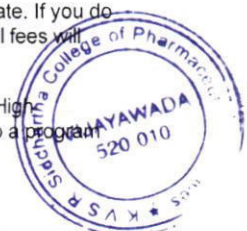
Mandatory Requirements: Students accepted to the following programs must complete mandatory health and safety requirements to be eligible for work-integrated learning experiences:

Program	Standard First Aid/CPR Level C	Standard First Aid/CPR BLS	WHMIS N95 Mask Fit Test	Police Record Check
Child and Youth Care	X		X	X
Early Childhood Education	X		X	X
Social Service Worker	X		X	X
Occupational Therapist Assistant and Physiotherapist Assistant	X		X	X
Personal Support Worker		X	X	X
Personal and Developmental Support Services		X	X	X
Fitness and Health Promotion	X		X	X
Practical Nursing		X	X	X
Protection, Security and Investigation				X
Gerontology			X	X

These requirements must be met before your placement starts. It is your responsibility to ensure that you are eligible to participate. If you do not have these requirements but wish to acquire them, please contact conedregistration@saultcollege.ca. Please note, additional fees will apply.

Canadian Study Permit: You must apply for a Canadian Study Permit as soon as possible at the nearest Canadian Embassy, High Commission or Consulate. For more information, please visit www.cic.gc.ca. International students who have been accepted into a program

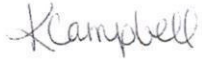
PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010



with a co-op placement or an unpaid field placement are required to have a co-op work permit, even if the activity is paid or unpaid, on or off campus or full- or part-time. It is your responsibility to ensure you have the proper authorization. If you are in a program that requires a placement you will have a co-op work permit information letter attached to this letter of admission. If you withdraw, cease to attend classes or become part-time, you should be aware that we will inform Immigration and Citizenship Canada of your change in status.

We look forward to having you study at Sault College!

Sincerely,



Karli Campbell, Registrar
Sault College



PRINCIPAL
K.V.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No. 6639021825	Rank: 719.00
Name: VASEEMUNNISA MOHAMMAD	Father's Name: SHAIK MUFASAR HUSSAIN
Gender: FEMALE (F)	Caste/ Region: BC_E/ AU

PROVISIONAL ALLOTMENT ORDER (for PGE CET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

K V S R SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCI.S (VRSP1), VIJAYAWADA, KRI
in **PHARMACEUTICAL CHEMISTRY (PHCHEM)(SFN)**, under OC_GEN_UR category.

Tuition Fee fixed for the college/course is Rs. 54400 /- .

Tuition fee to be paid by the candidate is Rs. 54400 /- .**

** The students of various categories will be considered for Jagannanna Vidya Deevana (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is **20.02.2021 (before 5.00PM)**. Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.

PRINCIPAL

**K. S. R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES**

VIJAYAWADA-520 010



CONVENOR

APPGE CET - ADMISSIONS 2020

*** This computer generated Provisional Allotment Order does not require any authentication. ***

-----Printed as on Dt: 18-02-2021 -----



ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGET - 2020

Hall Ticket No. 6639010404
Name: VEMURI LAKSHMI POOJITHA
Gender: FEMALE (F)

Rank: 150.00
Father's Name: VEMURI SRINIVASA RAO
Caste/ Region: OC/ AU

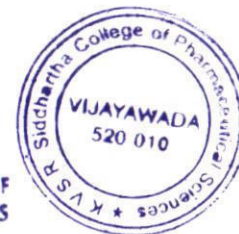
Print

PROVISIONAL ALLOTMENT ORDER (for PGET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

AU COLLEGE OF PHARMACEUTICAL SCIENCES-SELF FINANCE (AUCPSF1), VISAKHAPATNAM, VSP
in DRUG REGULATORY AFFAIRS (PHDRAF)(SFN), under OC_GEN_AU category.


PRINCIPAL
K.S.R. SIDDHARTHA COLLEGE OF
PHARMACEUTICAL SCIENCES
VIJAYAWADA-520 010.





ANDHRA PRADESH STATE COUNCIL OF HIGHER EDUCATION

APPGE CET - 2020

Hall Ticket No.	6639010405	Rank:	2749.00
Name:	VEMURI RUPA SREE DEVI	Father's Name:	VEMURI SRINIVASA RAO
Gender:	FEMALE (F)	Caste/ Region:	OC/ AU

PROVISIONAL ALLOTMENT ORDER (for PGE CET CANDIDATES)

This is to inform that the options exercised by the candidate have been processed based on merit, rank, local area, sex, category, EWS, Special Reservation Category (CAP/PH/NCC/SPORTS) etc and the candidate has been allotted a seat in

K V S R SIDDHARTHA COLLEGE OF PHARMACEUTICAL SCI.S (VRSP1), VIJAYAWADA, KRI
in **PHARMACEUTICS (PHCETS)(SFN)**, under SC_GEN_AU category.


Tuition Fee fixed for the college/course is Rs. 54400 /- .

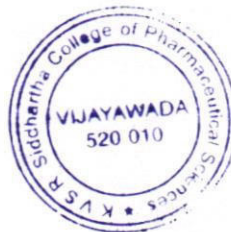
Tuition fee to be paid by the candidate is Rs. 54400 /- .**

** The students of various categories will be considered for Jagananna Vidya Deevena (RTF) subject to verification and eligibility criteria prescribed by State Government of Andhra Pradesh vide G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O.MS.No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time. In the event of the candidate found not eligible for fee reimbursement at later date, the candidate shall have to pay the tuition fee. Those are not eligible for reimbursement as prescribed in G.O. MS. No. 72 of Social Welfare dept., dated 18.10.2014 and G.O. MS. No. 77 of Social Welfare dept., dated 25.12.2020, and amendments from time to time, shall pay the annual tuition fee. The amount of tuition fee to be paid by the candidate to respective colleges is as given in the G.O. MS. No. 3 APHERMC dated 18.01.2021 and amendments from time to time.

Instructions to Candidates:

1. Reporting through 'Candidates Login' from the website <https://appgecet.nic.in> through self-reporting system or from a nearby help line center.
2. Take print out of two copies of joining report and report to the allotted college with all original certificates. Submit a copy of joining report and obtain acknowledgment on 2nd copy from the College where you have reported and retain the same with you.
3. Both Self-reporting and reporting at the allotted college is compulsory to retain the present allotment. The last date for Self-reporting and reporting at the allotted College is **20.02.2021 (before 5.00PM)**. Pay all necessary fees if any to the allotted college.
4. If you do not report through Self-reporting system and/or not reporting at the allotted college, the provisional allotment will be stands cancelled and you have no claim on the seat allotted.
5. The academic credentials verified if found false at a later date, your allotment will be cancelled and you are also liable for criminal prosecution.
6. RGS or SFS [STIPENDARY], RGN OR SFN[NON-STIPENDARY].
7. Candidates who got more than one allotment by virtue of their eligibility, can choose one college/course allotment through self reporting system before joining the college. The other allotments will become null and void and they will be offered to other meritorious candidates in next phase of counselling.
8. A candidate having more than one allotment, self-reporting and reported at college but wish to change his college shall have to cancel his allotment from already reported college and can change to another college with in stipulated date.
9. Allotments in pharmacy colleges are subjected to approval of Pharmacy Council of India.


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K.V.S.R. SIDDHARTHA COLLEGE OF
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VIJAYAWADA-520 010



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