



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH



Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,
2F,12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade

APPLICATION FOR THE COLLEGE LEAVING CERTIFICATE

To,
The Principal,
AISSMS College of Pharmacy,
Pune – 411 001.

Date: / /20

Respected Madam,

I am _____ here by request you kindly to issue me college Leaving certificate. I need the same for the following reason/s. (Please tick the appropriate option).

- (i) I have passed the B.Pharm. / M.Pharm. _____ exam. held in Nov.____/ May ____
- (ii) I wish to seek admission elsewhere for B.Pharm. / M.Pharm.
- (iii) I wish to seek admission elsewhere for Degree Non – B.Pharm. / M.Pharm Program.
- (iv) I wish to cancelled the Admission for getting / got the Job / Service.
- (v) I am furnishing below the relevant details.

(i) Academic year _____ Class to which first admitted in the college: B. Pharmacy /
M. Pharmacy Branch: _____

(ii) Last class in which studied: _____

(ii) Details of receipt of Rs. _____ which I paid for Leaving Certificate / Duplicate Leaving
Certificate is: Receipt no. _____ Date _____

(vi) I am enclosing herewith the following documents for your ready reference.

- (i) No Dues Certificate (original).
- (ii) Attested photocopy of last appeared examination result.
- (iii) Leaving Certificate receipt.

I have completed all the formalities of the College and No due remains on my name. I therefore request you kindly to issue me the College Leaving Certificate at the earliest.

Thanking you.

Yours sincerely,

Student Contact:
Student Email:

Name and Sign of Student

Remark of the Principal: _____



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Date :

NO DUES CERTIFICATE

Mr./Ms. Student of Passing A.Y B. Pharm /
M. Pharm (Branch) have Passed / Failed with Class. We are
hereby issuing no any dues of the Student remain with the College. The details are given below.

Student Contact:

Student Email:

Student clearance Signature from the College Authorities

- 1) Class Teacher/HoD-M.Pharm:..... 2) Central Store/Breakage dues in-charge (R.No.:102/105): -.....
3) APGA Co-ord. (R.No.:202)..... 4) Alumni Co-Ord:(R.No.:201)
5) Scholarship Section (R.No.:06)..... 6) Training & Placement Cell:
Dr. S. V. Gandhi
7) Sports Section.: 8) Anti-Ragging Cell Co-Ord: 9) N.S.S(R.No.:05).....
Mr. R. S. Manohar Mr. J. W. Gajbe

10) Laboratory Assistants:-

- A) Pharmaceutical Chemistry: (R.No.:114) 1)..... 2)
Mr.R.S.Manohar Mr.S.V.Kasbe.
B) Quality Assurance: (R.No.:103) 1)..... 2)
MR. R. Y. Chingale Mrs. A. S. Divate
C) Pharmaceutics: (R.No.: R.No.:08) 1) 2)
Mr. V. R. Kolambe; MR. S. V. Kasbe Mr.Sandeep R. Patil
D) Pharmacology: (R.No.:201) 1)..... 2).....
Mr.D.S.Tekawade Mr.Swapnil R.Patil
E) Pharmacognosy: (R.No.:203) 1) 2)
Mr. A. R. Kolambe Mrs. M. S. Tapale
11) Project (B.Pharm) / Research Guide (M.Pharm) 12) Office to Documents (R.No.06).....
13) Student profile submission. (R.No.:206)..... 14) Library (R.No.:301).....
Dr. Tina Saldanha
15) Account Section:(R.No.:07) 16) Office Superintendent: (R.No.06)

Remark (if any) _____

Signature of the Principal