



NO DUES CERTIFICATE

(B. Pharm. FY / SY / TY / Fin. Y) (M. Pharm. FY / SY)

Students Name: _____ SAP ID. _____

I hereby state that I have completed all the mandatory Formalities. I understand that necessary dues should be settled before issuance of Marksheet / Leaving Certificate / Full Transcript.

Sr. No.	Activity	Name of Staff	Sign
1.	Payment of breakage	Mr. Bhupendra Nirgun	
2.	Locker	Mr. Bhupendra Nirgun	
3.	Payment of dues towards fee	Mr. Prashant Bhatt	
4.	Co-curricular Activities Certificate copy	Dr. Arundhati Abhyankar	
5.	Join Facebook / LinkedIn / Twitter	Dr. Sandip Zine	
6.	Alumni Form / Registration	Dr. Kedar Prabhavalkar	
7.	Parents Teacher Meeting Feedback	Dr. Prabha Singh	
8.	Internship Certificate	Dr. Prabha Singh	
9.	Higher Studies data	Dr. Kavitikumar Patel	
10.	Job offer letter	Dr. Prachi Pimple	
11.	Library	Mrs. Sarika Phatak	
12.	Identity Cards	Mr. Ganesh Kale	
13.	Issued all previous result	Mrs. Rutuja More	

Students Sign with Date: _____

I hereby certify that the above dues have been settled by the concerned student.

Verified by Mrs. Sarika Phatak _____ Date: _____

Processed by Office Name: _____ Date: _____ sign _____