

Appendix-D
PRACTICAL TRAINING CONTRACT FORM FOR PHARMACISTS
SECTION I

This form has been issued to _____ (Name of student pharmacist), son /daughter of _____ residing at _____ who has produced evidence before me that he/she is entitled to receive the Practical Training as set out in the Education Regulations, 2020 made under section 10 of the Pharmacy Act, 1948.

Date: _____ **(The Head of Institution imparting practical training)**

SECTION II

I, _____ (Name of the Student Pharmacist) from _____ (Name of the Institution) accept _____ (Name of the Apprentice Master) of _____ (Hospital or Pharmacy) as my Apprentice Master for the above training and agree to obey and respect him /her during the entire period of my training.

(Student Pharmacist)

SECTION III

I, _____ (Name of the Apprentice Master) accept _____ as a (Name of the student pharmacist) trainee and I agree to give him /her training facilities in my organization so that during his /her training he /she may acquire:

1. Working knowledge of keeping of records required by the various Acts affecting the profession of pharmacy; and
2. Practical experience in -
 - 1) Stocking of Drugs and Medical Devices
 - 2) Inventory control procedures
 - 3) Handling of prescriptions
 - 4) Dispensing
 - 5) Patient counseling

I also agree that a Registered Pharmacist shall be assigned for his /her guidance.

(Apprentice Master)

Date: _____ **(Name & address of the Institution)**

SECTION IV

I certify that _____ (Name of student pharmacists) has undergone _____ hours training spread over _____ months dated from _____ to _____ in accordance with the details enumerated in SECTION III.

Date: _____ **(The Head of Institution imparting practical training)**

SECTION V

I certify that _____ (Name of student pharmacists) has completed in all respect his practical training under regulation 18 of the Education Regulations, 2020 made under section 10 of the Pharmacy Act, 1948. He had his practical training in an Institution approved by the Pharmacy Council of India.

Date: _____ **(Head of the Academic Institution)**