

CERTIFICATE

Class: _____

Year: _____

This is to certify that Mr./Miss. _____

of B. PHARM SEMESTER – IV at _____

Enrollment No. _____ & Roll No. _____ has satisfactory
completed his/her _____ out of _____ experiments/practical of the subject

Pharmacology I – BP408P for the academic year 20__ to 20__.

Signed by:

Head of Department

External Examiner

Subject Teacher

Date of certified: