



Date: 09/01/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. E. Venkateshwarulu
2. Designation: : Professor
3. Department : Pharmacology.
4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____

6. Associating Professional Body/Agency: Association of pharmaceutical

7. Financial Supports Particulars (Rs.)

Teachers of
India

- a. Registration charges : _____
- b. Travelling allowances : _____
- c. Membership fee : 3,000/-
- d. Other if any : _____

Date: _____ Signature of the Staff Member

Esps3

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____

Esps3

✓
Sansactioned/ Not Sanctioned

Accountant: Rejitha
Date: 02/01/2022



Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

Date: 02/01/2022

To
The principal
Vaagdevi College of pharmacy
Ramnagar, Hanamkonda

SUB:- Financial support for professional body membership

Respected Sir,

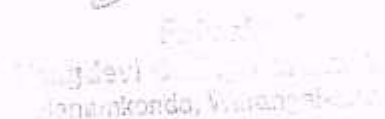
I, Dr. E. Venkateshwarlu working as professor in this institution. As subject cited above requesting you to sanction the Rs. 3,000 amount for membership in Association of Pharmaceutical Teachers of India

Thanking you




Yours faithfully

Dr. E. Venkateshwarlu


Vaagdevi College of Pharmacy
Hanamkonda, Warangal




Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

Date : 23-04-2022



TL/LM-840

**ASSOCIATION OF
PHARMACEUTICAL TEACHERS
OF INDIA**

By approval of the Executive Council has elected

Dr. Eggadi Venkateshwarlu

As a Life Member

of the Association, a form for better
intercommunication and promotion of excellence
in Pharmacy Education



Hon. Secretary

Hon. President



Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

Date: 02/01/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. B.S. Shekhavara Bhava
2. Designation: : Professor
3. Department : Clinical pharmacy and pharm.D
4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____
6. Associating Professional Body/Agency: Association of pharmaceutical teachers
of INDIA
7. Financial Supports Particulars (Rs.)
 - a. Registration charges : _____
 - b. Travelling allowances : _____
 - c. Membership fee : 3,000
 - d. Other if any : _____

Date: _____

[Signature]
Signature of the Staff Member

1. Recommendations of the HOD : [Signature]
2. Recommendations of the Principal : _____

Sansactioned/ Not Sanctioned

Accountant: [Signature]

Date: 02/01/2022



[Signature]
Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

2/01/2022
Warangal.

To
The Principal,
Vaagdevi College of Pharmacy,
Hanamkonda.

Respected Sir,

Sub: Financial Support towards APTI membership - req²

To the Subject cited above, I request you to support
financially for an amount of Rs 3000/- to register
in APTI. Kindly do the needful.

Thanking you Sir

Yours Sincerely,



Dr. B. S. Sharvada Bhaskar
Dept. of Pharm-D,
Vaagdevi COP, Hanamkonda

Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001



Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

Date : 28-04-2022



TL/LM-846

ASSOCIATION OF PHARMACEUTICAL TEACHERS OF INDIA

By approval of the Executive Council has elected

Dr B S SHARVANA BHAVA

As a Life Member

of the Association, a form for better
intercommunication and promotion of excellence
in Pharmacy Education



Hon. Secretary

Hon. President



Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001



Date: 02/01/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. Pavani Sairam
2. Designation: : Professor
3. Department : pharmaceutics
4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____

6. Associating Professional Body/Agency: Association of pharmaceutical Teachers of India

7. Financial Supports Particulars (Rs.)

- a. Registration charges : _____
- b. Travelling allowances : _____
- c. Membership fee : 3000
- d. Other if any : _____

Date: _____

S. Pavani
Signature of the Staff Member

1. Recommendations of the HOD : Y. Shivan

2. Recommendations of the Principal : _____

↖
Sansactioned/ Not Sanctioned

Accountant: [Signature]

Date: 02/01/2022



[Signature]
Principal
Vaagdevi College of Pharmacy
Hanamankonda, Warangal-506 001

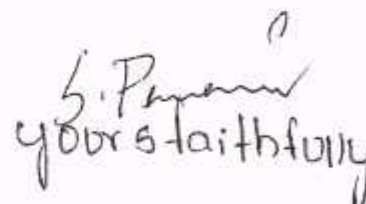
Date : 02/01/2022

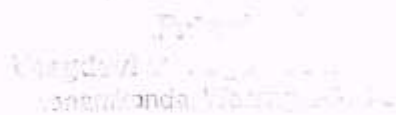
To.
The principal,
Vaagdevi college of pharmacy,
Rannagar, Hanamkonda.

SUB : Financial support for professional body membership
Respected Sir,


P, Dr. Parani Srisam, working as professor in
this institution. As subject cited above requesting you to
sanction the Rs 3,000 amount for membership in Association
of pharmaceutical Teachers of India.

Thanking you


yours faithfully
Dr. Parani Srisam


Vaagdevi College of Pharmacy
Hanamkonda, Warangal




Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

Date : 18-04-2022



TL/LM-834

ASSOCIATION OF PHARMACEUTICAL TEACHERS OF INDIA

By approval of the Executive Council has elected

Dr Pavani Sriram

As a Life Member

of the Association, a form for better
intercommunication and promotion of excellence
in Pharmacy Education



Hon. Secretary



Hon. President

Principal

Vaagdevi College of Pharmacy
Hanamkonda, Warangal-508 001



Date: 02/01/2022

Financial Support Request Letter

1. Name of the Staff Member : Mrs. T. Rajani
2. Designation: : Asst. professor
3. Department : Pharmaceutics
4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____
6. Associating Professional Body/Agency: Association of pharmaceutical
7. Financial Supports Particulars (Rs.) Teachers of India
 - a. Registration charges : _____
 - b. Travelling allowances : _____
 - c. Membership fee : 3,000/-
 - d. Other if any : _____

Date: _____

Signature of the Staff Member T. Rajani

1. Recommendations of the HOD : [Signature]
2. Recommendations of the Principal : _____

Sanctioned/ Not Sanctioned

Accountant: [Signature]

Date: 02/01/2022



Date : 02/01/2022

TO
The Principal
Vaagdevi college of pharmacy
Ramnagar, Hanumakonda.

SUB :- Financial support for professional body membership.

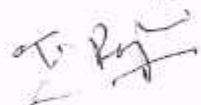
Respected sir,

I, Mrs. T. Rajani working as assistant professor in this institution. As subject cited requesting you to sanction the Rs. 3,000 amount for membership in Association of pharmaceutical teachers of India.

Thanking you.


Yours faithfully,

Mrs. T. Rajani.




Mrs. T. Rajani
Assistant Professor




Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

Date : 18-04-2022



TL/LM-835

ASSOCIATION OF PHARMACEUTICAL TEACHERS OF INDIA

By approval of the Executive Council has elected

Mrs Rajani Thoutreddy

As a Life Member

of the Association, a form for better
intercommunication and promotion of excellence
in Pharmacy Education



Hon. Secretary

Hon. President



Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001



Date: 01/02/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. K. Praveen Kumar
2. Designation: : Professor
3. Department : Pharmaceutical chemistry
4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____

6. Associating Professional Body/Agency: Association of pharmacy professional

7. Financial Supports Particulars (Rs.)
 - a. Registration charges : _____
 - b. Travelling allowances : _____
 - c. Membership fee : 2000/-
 - d. Other if any : _____

Date: _____ Signature of the Staff Member [Signature]

1. Recommendations of the HOD : [Signature]
2. Recommendations of the Principal : _____

/ Sansactioned/ Not Sanctioned

Accountant: [Signature]

Date: 01/02/2021



[Signature]
Principal
Vaagdevi College of Pharmacy
 Hanamkonda, Warangal-506 001



Date: 01/02/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. K. Praveen Kumar
2. Designation: : Professor
3. Department : Pharmaceutical chemistry
4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____
6. Associating Professional Body/Agency: Association of pharmacy professional
7. Financial Supports Particulars (Rs.)
 - a. Registration charges : _____
 - b. Travelling allowances : _____
 - c. Membership fee : 2000/-
 - d. Other if any : _____

Date: _____

Signature of the Staff-Member

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____

Sansactioned/ Not Sanctioned

Accountant: [Signature]

Date: 01/02/2021



[Signature]

Principal

Vaagdevi College of Pharmacy
 Hanamkonda, Warangal-506 001

Association of Pharmacy Professionals



devoted to pharmacy profession...

Membership Certificate

This is to certify that DR. PRAVEEN KUMAR KUSUMA, Associate Professor, Department of Pharmaceutical Chemistry, Vaagdevi College of Pharmacy, Ramnagar, Hanamkonda, Warangal, Telangana is a life member of 'Association of Pharmacy Professionals' with effect from February 26, 2021. He fulfils all the requirements to be a life member of APP and his membership number is APP/TS/LM-156H/21. He is granted membership together with all rights and responsibilities thereof.




Dr. Rajiv Dahiya
(President)

APP/TS/LM-156H/21

ASSOCIATION OF PHARMACY PROFESSIONALS

(Registered under Societies Registration Act, 1959)

ROSE-350, New Minal Residency, K. K. Road, Bhopal-462023 (M.P.), India

Vaagdevi College of Pharmacy
Hanamkonda, Warangal-508 001



Date: 25/01/2020

Financial Support Request Letter

- 1. Name of the Staff Member : Dr. Y. Shivan Kumar
- 2. Designation: : Professor
- 3. Department : Pharmaceutics
- 4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____

6. Associating Professional Body/Agency: Association of Pharmacy Professionals

7. Financial Supports Particulars (Rs.)

- a. Registration charges : _____
- b. Travelling allowances : _____
- c. Membership fee : 2000/-
- d. Other if any : _____

Date: _____ Signature of the Staff Member

1. Recommendations of the HOD : Y. Shivan Kumar

2. Recommendations of the Principal : _____

↙
Sansactioned/ Not Sanctioned

Accountant: Rajiv

Date: 25/01/2020



Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

The principal

Date: 25/01/2020

Vaagdevi college of pharmacy,

Ramnagar, Hanamakonda.

sub:- Financial support for profesional body
Membership

Respected sir,

I Dr. shrovan kumar working
as professor in this intitution .As subject cited
above requesting you to saction the Rs 2000/-
for membership in "Association of pharmacy professionals

Thanking you.

Y. Shrovan
yours faithfully

Dr. Shrovan kumar.



Principal

Vaagdevi College of Pharmacy
Hanamakonda, Warangal-506 001

Association of Pharmacy Professionals



devoted to pharmacy profession...

Membership Certificate

This is to certify that DR. Y. SHRAVAN KUMAR *Professor & HOD, Department of Pharmaceutics, Vaagdevi College of Pharmacy, Hanamkonda, Warangal, Telangana* is a life member of the 'Association of Pharmacy Professionals' with effect from *2nd February, 2020*. He fulfils all requirements to be a life member of APP and his membership number is **APP/TS/LM-129/20**. He is granted membership together with all the rights and responsibilities thereof.



Dr. Rajiv Dahiya
(President)

APP/TS/LM-129/20

ASSOCIATION OF PHARMACY PROFESSIONALS

(Registered under the Societies Registration Act, 1860)

ROSE-350, New Minal Residential Colony, Hanamkonda, Warangal-506 001, India

Principal

Vaagdevi College of Pharmacy

Hanamkonda, Warangal-506 001





Date: 25/01/2020

Financial Support Request Letter

1. Name of the Staff Member : Ms. T. Rajani
2. Designation: : Asst. Professor
3. Department : Pharmaceutics
4. Conference/Publication/Membership fee/Workshop/FDP details:

5. Date and duration of the Program : _____

6. Associating Professional Body/Agency: Association of Pharmacy Professional

7. Financial Supports Particulars (Rs.)

- a. Registration charges : _____
- b. Travelling allowances : _____
- c. Membership fee : 2000/-
- d. Other if any : _____

Date: _____ Signature of the Staff Member

[Handwritten Signature]
Y. Sharan

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____

✓
 Sansactioned/ Not Sanctioned

Accountant: [Signature]
 Date: 25/01/2020



[Signature]
Principal
Vaagdevi College of Pharmacy
 Hanamkonda, Warangal-506 001

DATE :- 25/11/2020

To,
The principal,
Vaagdevi college of pharmacy
Ramnagar, Hanumakonda

Sub: - Financial support for professional body membership
Respected sir,

I Mrs. Rajani working as professor in this
Institution. As subject stated above requesting you to
Sanction the Rs 2000/- amount for membership in
Association of pharmacy professionals

Thanking you.


Your's faithfully

Mrs. Rajani




Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001




Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001

Association of Pharmacy Professionals



devoted to pharmacy profession...

Membership Certificate

This is to certify that Mrs. Rajani Thoutreddy, *Assistant Professor, Vaagdevi College of Pharmacy, Hanamkonda, Warangal, Telangana* is a life member of the 'Association of Pharmacy Professionals' with effect from *2nd February, 2020*. She fulfils all requirements to be a life member of APP and his membership number is **APP/TS/LM-191/20**. She is granted membership together with all the rights and responsibilities thereof.



APP/TS/LM-191/20

Dr. Rajiv Dahiya
(President)

ASSOCIATION OF PHARMACY PROFESSIONALS

ROSE-350, New Minors Road, Bhopal-462023 (MP), India



Principal
Vaagdevi College of Pharmacy
Hanamkonda, Warangal-506 001