



# JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES COLLEGE OF PHARMACY

( Approved by Tamil Nadu Govt. & Pharmacy Council of India - New Delhi, Affiliated to The Tamil Nadu Dr. M.G.R Medical University, Chennai )  
Thookanaickenpalayam, Gobichettipalayam (TK), Erode (DT) - 638506, Tamil Nadu.

## 6.3.3 PERCENTAGE OF TEACHING AND NON-TEACHING STAFF PARTICIPATING IN FACULTY DEVELOPMENT PROGRAMMES (FDP), PROFESSIONAL DEVELOPMENT /ADMINISTRATIVE TRAINING PROGRAMS DURING THE LAST FIVE YEARS

S. No	Academic Year	Total number of Teaching and Non-Teaching Staff Participating in Faculty Development Programmes (FDP), Professional Development/ Administrative Training Programs
1	2020 – 2021	29

Principal

JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506



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Thookanaickenpalayam, Gobichettipalayam (TK), Erode (DT) - 638506, Tamil Nadu.

## 6.3.3 Percentage of Teaching and Non – Teaching staff participating in Faculty Development Programmes (FDP), Professional Development/ Administrative Training Programs during the last five years

2020 - 2021

### TEACHING STAFF

S. No	Name of the Participant	Title of the FDP/ Professional Development/ Administrative Training Program	Dates (from-to) (DD-MM-YYYY)
1	DR. P. Perumal	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
2	DR. P. Mohanraj	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
3	DR. S. Suresh Kumar	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
4	Mr. K. K. Senthil Kumar	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
5	DR. M. Periasamy	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
6	DR. S. Selvaraj	FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
7	Mr. K. Raja	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
8	Mr. S. Kannan	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
9	Mrs. J. Priya	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
10	Mr. C. Sridharan	FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
11	Mrs. S. Gandhimathi	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
12	Mrs. K. Abhenaya	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
13	Mr. K. Balasubramanian	FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
14	Mr. S. Sharma	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020

Principal

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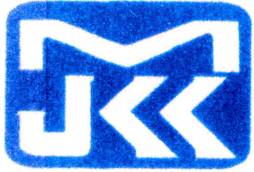
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15	Mr. K. G. Balasubramaniam	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
16	Mr. M. Pushparaj	FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
17	Ms. A. R. Gomathi	FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
18	Mr. K. Kannadhasan	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
19	Mr. S. Deepanchakkaravarthi	FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
20	Dr. S. Satheesh	FDP on Training on Handling of Instruments	14-09-2020 to 18-09-2020
		FDP on Terminologies of Drug Actions	22-02-2021 to 26-02-2021
<b>NON – TEACHING STAFF</b>			
21	Mr. O. R. Murugesan	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
22	Mr. K. Varatharajan	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
23	Mrs. C. Pavithra	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
24	Mrs. D. Hamsa	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
25	Mr. G. Gowriprasanth	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
26	Mrs. A. Deepa	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
27	Mrs. R. Devi	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
28	Ms. R. Mohana Priya	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020
29	Ms. M. Sharmila	Lab Safety and Lab Procedures Manual Guidelines	08-07-2020 to 09-07-2020

  
Principal

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**JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES  
COLLEGE OF PHARMACY**

**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**




**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that <sup>✓</sup>DR/Mr/Ms/Mrs ..... P. PEROMAL.....  
Working as an ..PROFESSOR & PRINCIPAL.... has participated in the Five Days  
Faculty Development Program on “**Training on Handling of Instruments**”  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.

  
**COORDINATOR**

  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

  
**PRINCIPAL**



**JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES  
COLLEGE OF PHARMACY**

**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**




**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that <sup>✓</sup> DR/Mr/Ms/Mrs ..... P. MOHANRAJ .....  
Working as an ..... PROFESSOR ..... has participated in the Five Days  
Faculty Development Program on **“Training on Handling of Instruments”**  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.

  
**COORDINATOR**

  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

  
**PRINCIPAL**



**JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES  
COLLEGE OF PHARMACY**

**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**



**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that <sup>DR</sup>DR/Mr/Ms/Mrs ..... *S. SURESH KUMAR*.....  
Working as an ..... *PROFESSOR*..... has participated in the Five Days  
Faculty Development Program on “**Training on Handling of Instruments**”  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode from 14.09.2020 to 18.09.2020.**

*A. Balakrishnan*  
**COORDINATOR**

*[Signature]*  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

*[Signature]*  
**PRINCIPAL**



# JKK MUNIRAJH INSTITUTE OF HEALTH SCIENCES COLLEGE OF PHARMACY

T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.




## Five Days Faculty Development Program

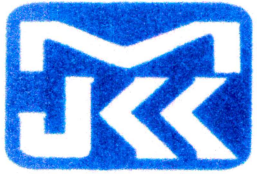
### Certificate of Participation

This is to certify that ✓ DR/Mr/Ms/Mrs ..... S. SURESH KUMAR ..... working as an ..... PROFESSOR ..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

  
**COORDINATOR**

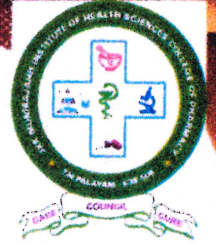
  
Principal  
JKK Munirajah Institute of Health Science  
College of Pharmacy, T.N.Palayam,  
Gobi (TK), Erode (DT) - 638 508

  
**PRINCIPAL**



**JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES  
COLLEGE OF PHARMACY**

**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**



**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/<sup>✓</sup>Mr/Ms/Mrs ..... K. K. SENTHIL KUMAR.....  
Working as an ASSOCIATE PROFESSOR..... has participated in the Five Days  
Faculty Development Program on **“Training on Handling of Instruments”**  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.

  
**COORDINATOR**

  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
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**PRINCIPAL**



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T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.



## Five Days Faculty Development Program

### Certificate of Participation

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>.....*K.K.SETHIL KUMAR*..... working as an .....*ASSOCIATE PROFESSOR*..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

*M. L. J.*  
**COORDINATOR**

*[Signature]*  
Principal  
JKK Munirajah Institute of Health Science  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

*[Signature]*  
**PRINCIPAL**



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COLLEGE OF PHARMACY**

**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**



**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that <sup>✓</sup>DR/Mr/Ms/Mrs ..... M. PERIYASAMY.....  
Working as an ..... PROFESSOR..... has participated in the Five Days  
Faculty Development Program on “**Training on Handling of Instruments**”  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.

  
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Principal  
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**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>.....*M. PERIYA SAMY*..... working as  
an .....*PROFESSOR*..... has participated in Five Days Faculty  
Development Program on "**Terminology of Drug Actions**" organized by Department  
of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy,**  
T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

*M. L. H.*  
**COORDINATOR**

*[Signature]*  
Principal  
JKK Munirajah Institute of Health Sciences-  
College of Pharmacy, T.N.Palayam,  
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*[Signature]*  
**PRINCIPAL**



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**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>.....*S. SELVARAJ*..... working as  
an .....*PROFESSOR*..... has participated in Five Days Faculty  
Development Program on "**Terminology of Drug Actions**" organized by Department  
of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy,**  
T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

*M. L. J.*  
**COORDINATOR**

*[Signature]*  
Principal  
JKK Munirajah Institute of Health Science  
College of Pharmacy, T.N.Palayam,  
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*[Signature]*  
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**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/✓Mr/Ms/Mrs ..... **K. RAJA** .....  
Working as an ..... **PROFESSOR** ..... has participated in the Five Days  
Faculty Development Program on “**Training on Handling of Instruments**”  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.



**COORDINATOR**



Principal

JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506



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**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/<sup>✓</sup>Mr/Ms/Mrs ..... S. KANNAN .....  
Working as an ASSOCIATE PROFESSOR ..... has participated in the Five Days  
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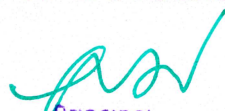


**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs .....<sup>✓</sup>S. KANNAN..... working as an .....~~ASSOCIATE PROFESSOR~~..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

  
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**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/Mr/Ms/Mrs ..... *Dr. PRIYA* .....  
Working as an *ASSOCIATE PROFESSOR* ..... has participated in the Five Days  
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*[Signature]*  
**COORDINATOR**

*[Signature]*  
Principal  
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*[Signature]*  
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**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup> ..... *J. PRIYA* ..... working as an ..... *ASSOCIATE PROFESSOR* ..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

*M. L. K.*  
**COORDINATOR**

*[Signature]*  
Principal  
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College of Pharmacy, T.N.Palayam,  
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*[Signature]*  
**PRINCIPAL**



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T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.



**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>.....*C. SRIDHARAN*..... working as an .....*ASSOCIATE PROFESSOR*..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

*M. L. J.*  
**COORDINATOR**

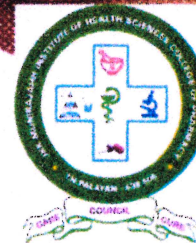
*[Signature]*  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
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*[Signature]*  
**PRINCIPAL**



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**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**



**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/Mr/Ms/Mrs ..... *S. GANDHIMATHI* .....  
Working as an ..... *ASSOCIATE PROFESSOR* ..... has participated in the Five Days  
Faculty Development Program on “**Training on Handling of Instruments**”  
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**COORDINATOR**

Principal  
JKK Munirajah Institute of Health Sciences  
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**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**




**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>..... **K. ABHENAYA**.....  
Working as an **ASSISTANT PROFESSOR**..... has participated in the Five Days  
Faculty Development Program on **“Training on Handling of Instruments”**  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.



**COORDINATOR**



Principal  
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**PRINCIPAL**



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COLLEGE OF PHARMACY**

T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.




**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup> ..... K. ABHENAYA ..... working as an ..... ASSISTANT PROFESSOR ..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

  
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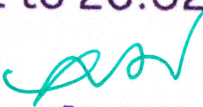


**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs .....<sup>✓</sup>K. BALASUBRAMANIYAN..... working as an .....ASSOCIATE PROFESSOR..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

  
**COORDINATOR**

  
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**PRINCIPAL**



**JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES  
COLLEGE OF PHARMACY**

**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**



**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/Mr/Ms/Mrs ..... *S. SHARMA* .....  
Working as an *ASSOCIATE PROFESSOR* ..... has participated in the Five Days  
Faculty Development Program on “**Training on Handling of Instruments**”  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode from 14.09.2020 to 18.09.2020.**

*[Signature]*  
**COORDINATOR**

*[Signature]*  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

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COLLEGE OF PHARMACY**

**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**




**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/<sup>✓</sup>Mr/Ms/Mrs K.G. BALASUBRAMANIAM.....  
Working as an ASSISTANT PROFESSOR... has participated in the Five Days  
Faculty Development Program on **“Training on Handling of Instruments”**  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.

  
**COORDINATOR**

  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

  
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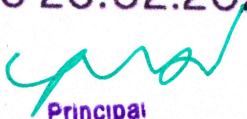


**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs ...<sup>✓</sup>K..G..BALASUBRAMANIAM..... working as an .....ASSITANT..PROFESSOR..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

  
**COORDINATOR**

  
Principal  
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## Five Days Faculty Development Program

### Certificate of Participation

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>.....*M...PUSHPARAJ*..... working as an .....*ASSISTANT...PROFESSOR*..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

*M.Y*  
**COORDINATOR**

*[Signature]*  
Principal  
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**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>.....*A.R. GOMATHI*..... working as an .....*ASSISTANT PROFESSOR*..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

*M. Y*

**COORDINATOR**

*Yasod*

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*Yasod*

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**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that DR/<sup>✓</sup>Mr/Ms/Mrs ..... **K. KANNADHASAN**.....  
Working as an ..... **ASSISTANT PROFESSOR**..... has participated in the Five Days  
Faculty Development Program on **“Training on Handling of Instruments”**  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.

  
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## Five Days Faculty Development Program

### Certificate of Participation

This is to certify that DR/Mr/Ms/Mrs ...<sup>✓</sup>K...KANNADHASAN..... working as an .....ASSISTANT...PROFESSOR..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

  
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**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs <sup>✓</sup>.....*S. DEEPANCHAKKARA VARTHI*..... working as an .....*ASSISTANT PROFESSOR*..... has participated in Five Days Faculty Development Program on "**Terminology of Drug Actions**" organized by Department of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy**, T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

Principal

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**FIVE DAYS FACULTY DEVELOPMENT PROGRAM**

**CERTIFICATE OF PARTICIPATION**

This is to certify that <sup>✓</sup> DR/Mr/Ms/Mrs ..... *S. SATHEESH* .....  
Working as an *ASSISTANT PROFESSOR* ..... has participated in the Five Days  
Faculty Development Program on “**Training on Handling of Instruments**”  
organized by **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode** from 14.09.2020 to 18.09.2020.

  
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**Five Days Faculty Development Program**

**Certificate of Participation**

This is to certify that DR/Mr/Ms/Mrs .....<sup>✓</sup> S. SATHESH ..... working as  
an ..... ASSISTANT PROFESSOR ..... has participated in Five Days Faculty  
Development Program on "**Terminology of Drug Actions**" organized by Department  
of Pharmacology, **JKK Munirajah Institute of Health Sciences College of Pharmacy,**  
T.N.Palayam, Erode from 22.02.2021 to 26.02.2021.

  
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**TRAINING PROGRAM FOR NON TEACHING STAFF**

**CERTIFICATE OF PARTICIPATION**

This is to certify that <sup>✓</sup>Mr/Ms/Mrs MURUGESAN. O.R  
has participated in the Administrative Training Program on "**Lab Safety and  
Lab Procedures Manual Guidance**" organized by the Department of  
Pharmaceutics, **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.**

*Alchenaya*  
**COORDINATOR**

*Yad*  
Principal  
JKK Munirajah Institute of Health Science:  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

*Yad*  
**PRINCIPAL**



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**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**



**TRAINING PROGRAM FOR NON TEACHING STAFF**

**CERTIFICATE OF PARTICIPATION**

This is to certify that Mr/Ms/Mrs VARATHARAJAN.K  
has participated in the Administrative Training Program on "Lab Safety and  
Lab Procedures Manual Guidance" organized by the Department of  
Pharmaceutics, JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.

*Alcheraya*  
**COORDINATOR**

*Principal*  
Principal  
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**T.N.PALAYAM, GOBICHETTIPALAYAM (TK), ERODE (DT), TAMILNADU.**

**TRAINING PROGRAM FOR NON TEACHING STAFF**

**CERTIFICATE OF PARTICIPATION**

This is to certify that Mr/Ms/Mrs PAVITHRA.C  
has participated in the Administrative Training Program on "Lab Safety and  
Lab Procedures Manual Guidance" organized by the Department of  
Pharmaceutics, JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.

*Alcheraya*  
**COORDINATOR**

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Principal  
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*Principal*  
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**TRAINING PROGRAM FOR NON TEACHING STAFF**

**CERTIFICATE OF PARTICIPATION**

This is to certify that Mr/Ms/Mrs ✓ HAMSA.D  
has participated in the Administrative Training Program on "Lab Safety and  
Lab Procedures Manual Guidance" organized by the Department of  
Pharmaceutics, JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.

*[Handwritten signature]*  
Principal

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*[Handwritten signature]*

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**CERTIFICATE OF PARTICIPATION**

This is to certify that <sup>✓</sup>Mr/Ms/Mrs GOWRIPRASANTH . G  
has participated in the Administrative Training Program on "**Lab Safety and  
Lab Procedures Manual Guidance**" organized by the Department of  
Pharmaceutics, **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.**

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**TRAINING PROGRAM FOR NON TEACHING STAFF**

**CERTIFICATE OF PARTICIPATION**

This is to certify that Mr/<sup>✓</sup>Ms/Mrs DEEPA . A .  
has participated in the Administrative Training Program on "Lab Safety and  
Lab Procedures Manual Guidance" organized by the Department of  
Pharmaceutics, JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.

  
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This is to certify that Mr/Ms/Mrs DEVI R  
has participated in the Administrative Training Program on "Lab Safety and  
Lab Procedures Manual Guidance" organized by the Department of  
Pharmaceutics, JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.

*Alcheraya*  
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*Principal*  
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**TRAINING PROGRAM FOR NON TEACHING STAFF**

**CERTIFICATE OF PARTICIPATION**

This is to certify that Mr/✓Ms/Mrs MOHANAPRIYA.R  
has participated in the Administrative Training Program on "Lab Safety and  
Lab Procedures Manual Guidance" organized by the Department of  
Pharmaceutics, JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.

  
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**TRAINING PROGRAM FOR NON TEACHING STAFF**

**CERTIFICATE OF PARTICIPATION**

This is to certify that Mr/✓Ms/Mrs SHARMILA.M  
has participated in the Administrative Training Program on "**Lab Safety and  
Lab Procedures Manual Guidance**" organized by the Department of  
Pharmaceutics, **JKK Munirajah Institute of Health Sciences College of  
Pharmacy, T.N.Palayam, Erode, from 08.07.2020 to 09.07.2020.**

*[Signature]*  
**COORDINATOR**

*[Signature]*  
Principal  
JKK Munirajah Institute of Health Sciences  
College of Pharmacy, T.N.Palayam,  
Gobi (Tk), Erode (Dt) - 638 506

*[Signature]*  
**PRINCIPAL**