

SCHRÖDINGER

DEPARTMENT OF PHARMACOLOGY

PSG COLLEGE OF PHARMACY

COIMBATORE, TAMILNADU - 641 004



HANDS ON TRAINING AND WORKSHOP ON
"COMPUTER AIDED MOLECULAR MODELLING AND DYNAMICS"

Certificate of Participation

This is to certify that Dr. / Mr. / Ms. A. Sai Saranya
has participated in the two-days workshop on "Computer Aided Molecular Modelling
and Dynamics" held on 30th & 31st, October 2019.

Vinod Devaraji
Scientist, Schrodinger

Mr. A. Tamil Selvan
Convener


PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

Dr. M. Ramanathan
Principal



NARAYANA PHARMACY COLLEGE

(Approved by PCI & AICTE, New Delhi) (Affiliated to JNTUA Ananthapuramu)
Recognized u/s 2(F) & 12(B) of the UGC Act, 1956, New Delhi,
Chinthareddypalem, Nellore-524003, A.P. India.
Phone & Fax No :0861-2317966; Cell No :+91-9100051603
Email: principal.npc@narayanagroup.com Visit us:www.narayanapharmacycollege.com

FINANCIAL SUPPORT REQUEST FORM

1. Name of the staff member: A. Sai Saranya
2. Designations: Asso. Professor
3. Department : Pharmaceutical Analysis
4. Conference/publication/seminar/workshop/FDP certificate details Computer Aided Molecular Modelling And Dynamics
5. Date and duration of the programme: 30 & 31 October 2019
6. Associating professional body/agency: PSG College Of Pharmacy, Tamil Nadu
7. Financial support particulars (Rs):
 - i) Registration charges : _____
 - ii) Travelling- daily allowances : 2500
 - iii) Membership fees : _____
 - iv) others (if any) : _____

Date: 29 October 2019
Signature of the staff member: [Signature]

Recommendation of the principal with
Signature: [Signature]

Sanctioned/Not sanctioned

Accounts Department

Accounts Officer: [Signature]

Date : 29/10/19

[Signature]
PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

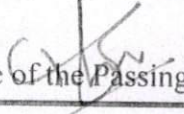
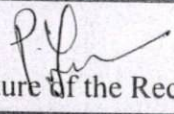
NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

No.

DEBIT / ADVANCE VOUCHER

Date: 29/10/19

Cheque no.	Cash ✓	Pay to <u>P. Yanadaiah</u>		
A/C Head _____				
2 days workshop (30/10/19 to 31/10/19)			2550	00
Rupees <u>Two Thousand Five</u>				
<u>Hundred and Fifty Rupees only.</u>				
			TOTAL	2550 00
Signature of the Passing Authority 			Signature of the Receptient 	

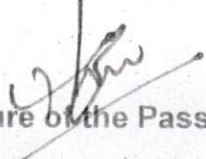
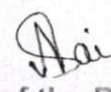
NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

No.

DEBIT / ADVANCE VOUCHER

Date: 29/10/19

Cheque No.	Cash ✓	Pay to <u>A. Sai Saranya</u>		
A/C Head _____				
Two Days workshop (30th & 31st October 2019)			2550	00
Rupees <u>Two Thousand Five</u>				
<u>Hundred and Fifty Rupees only.</u>				
			TOTAL	2550 00
Signature of the Passing Authority 			Signature of the Receptient 	

PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

THIS IS TO CERTIFY THAT
Ms. A. Sai Saranya

Attended a National webinar on

"Role of HPTLC in Fingerprint Analysis of Herbal Drugs and Formulations as per the Regulatory Perspective"

Conducted on


July 9, 2020 (Thursday)

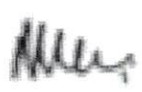
Jointly organized by

Anchrom Enterprises (I) Pvt. Ltd., Mumbai

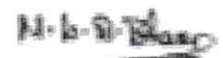
and

Shri Vishnu College of Pharmacy, Bhimavaram, (A.P)


Akshay Chaturvedi
Director,
ANCHROM, India


Dr. Kumar V. S. Narasim
Director
SVCP, A.P.


Dr. K. Prasad
Principal
SVCP, A.P.
PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002


Ms. N. L. D. Bhavani
Organising Secretary,
SVCP, A.P.



NARAYANA PHARMACY COLLEGE

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Email: principal.npc@narayanagroup.com Visit us:www.narayana-pharmacycollege.com

FINANCIAL SUPPORT REQUEST FORM

1. Name of the staff member: A. Sai Saranya
2. Designations: A.S.S.O. professor
3. Department: pharmaceutical Analysis
4. Conference/publication/seminar/workshop/FDP certificate details: Role of HPTLC in fingerprint Analysis of Herbal Drugs and formulations as per the Regulatory perspective
5. Date and duration of the programme: 09.10.2020
6. Associating professional body/agency: Shri Vishnu college of pharmacy, Bhimavaram
7. Financial support particulars(Rs):
 - i)Registration charges :-----
 - ii)Travelling- daily allowances- : 500/-
 - iii) Membership fees :-----
 - iv)others(if any) :-----

Date: 08/07/2020
Signature of the staff member: [Signature]

Recommendation of the principal with
Signature: [Signature]

Sanctioned/Not sanctioned

Accounts Department

Accounts Officer: [Signature]

Date: 8/7/20

[Signature]
PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

DEBIT / ADVANCE VOUCHER

Date : 07/09/2021

No.

Cheque no.

Cash

✓

Pay to P. Venkata Parani

A/C Head _____

A one week FDP (08/08/2021 to 13/08/2021)

2000

00

Rupees Two thousand Rupees

Only

TOTAL

2000

00

Signature of the Passing Authority

Signature of the Receptient

NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

DEBIT / ADVANCE VOUCHER

Date : 08/07/2020

No.

Cheque no.

Cash

✓

Pay to A. Salsaranya

A/C Head _____

Webinar (July 9th 2020)

500/-

00

Rupees Five Hundred Rupees

Only

TOTAL

00

00

Signature of the Passing Authority

Signature of the Receptient

PRINCIPAL

NARAYANA PHARMACY COLLEGE

NELLORE - 524 002



RATNAM

INSTITUTE OF PHARMACY

Pidathapur (V & P), Muthukur (M), SPSR Nellore - 524 346, A.P.

ONE WEEK FACULTY DEVELOPMENT PROGRAM
NEW PARADISM IN PHARMACEUTICAL EDUCATION AND RESEARCH.

CERTIFICATE OF PARTICIPATION

This is to certify that Prof. / Dr. / Mr/Mrs/Ms *A. saisaranya*
of *Narayana pharmacy college* Participated as
Delegate in a Faculty Development Programme organized by Ratnam Institute of
Pharmacy, Nellore, From 8-11-2021 to 13-11-2021

[Signature]
Convener

[Signature]
PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

[Signature]
Principal



NARAYANA PHARMACY COLLEGE

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Email: principal.npc@narayanagroup.com Visit us: www.narayanapharmacycollege.com

FINANCIAL SUPPORT REQUEST FORM

1. Name of the staff member: A. Saisaranya
2. Designations: ASSO Professor
3. Department: Pharmaceutical Analysis
4. Conference/publication/seminar/workshop/FDP certificate details: one week
faculty development program
New paradigm in pharmaceutical education and research
5. Date and duration of the programme: 8-11-2021 to 13-11-2021
6. Associating professional body/agency: Ratnam Institute of Pharmacy, Nellore
7. Financial support particulars (Rs):
 - i) Registration charges : _____
 - ii) Travelling- daily allowances- : _____
 - iii) Membership fees : _____
 - iv) others (if any) : _____

Date: 7/11/2021

Signature of the staff member: [Signature]

Recommendation of the principal with
Signature: [Signature]

Sanctioned/Not sanctioned

Accounts Department

Accounts Officer: [Signature]

Date: 21/11/21

[Signature]
PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

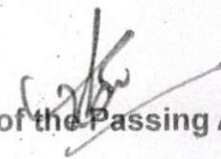
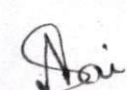
NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

DEBIT / ADVANCE VOUCHER

Date : 7/11/2021

No. _____

Cheque No.	Cash ✓	Pay to <u>A. Sai Saranya</u> A/C Head _____		
A one week FDP (8-11-2021 to 13-11-2021)			1000	00
Rupees <u>one thousand rupees</u> <u>only</u>			TOTAL	00
			1000	00
Signature of the Passing Authority 			Signature of the Receptient 	

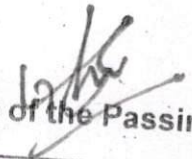
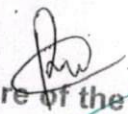
NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

DEBIT / ADVANCE VOUCHER

Date : 23/11/2021

No. _____

Cheque No.	Cash ✓	Pay to <u>P. Venkata Pavani</u> A/C Head _____		
One week FDP (24/11/2021 to 30/11/2021)			2515	00
Rupees <u>Two thousand five</u> <u>hundred fifteen Rupees Only</u>			TOTAL	00
			2515	00
Signature of the Passing Authority 			Signature of the Receptient 	

**PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002**

PHARMGREE' 22



Dr. M.G.R.
EDUCATIONAL AND RESEARCH INSTITUTE
DEEMED TO BE UNIVERSITY



UNIVERSITY WITH GRADED AUTONOMY STATUS
(An ISO 21001 - 2018 Certified Institution)
Pariyar E.V.R. High Road, Maduravoyal, Chennai -95, Tamilnadu, India.

FACULTY OF PHARMACY

Certificate of PARTICIPATION

PROUDLY PRESENTED TO

Dr. / Mr. /Mrs. /Ms. **A. Sai Saranya**
of **Narayana Pharmacy College**

for his / her Participation in **PHARMGREE'22 - NATIONAL CONFERENCE** on " Emerging Concepts In Pharmacogenomics & Pharmacovigilance" held on 21st and 22nd July 2022, organized by Faculty of Pharmacy, **Dr. M.G.R. Educational and Research Institute, Chennai.**

PRINCIPAL

C. S. Palanisamy

REGISTRAR

M. Srinivasan
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

SECRETARY



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Phone & Fax No :0861-2317966; Cell No :+91- 9392901053

Email: principal.upc@narayanagroup.com Visit us:www.narayanapharmacycollege.com

FINANCIAL SUPPORT REQUEST FORM

1. Name of the staff member: A. Sai Saranya
2. Designations: Asst. Professor
3. Department : Pharmaceutical Analysis
4. Conference/publication/seminar/workshop/FDP certificate details: Emerging Concepts In Pharmacogenomics And Pharmacovigilance
5. Date and duration of the programme: 1st And 2nd July 2022
6. Associating professional body/agency: Dr. M.S.R. Educational And Research Institute, Chennai
7. Financial support particulars(Rs):
 - i)Registration charges : _____
 - ii) Travelling- daily allowances- : 2196/-
 - iii) Membership fees : _____
 - iv) others(if any) : _____

Date: 30/07/2022

Signature of the staff member: [Signature]

Recommendation of the principal with

Signature: [Signature]

Sanctioned/Not sanctioned

Accounts Department

Accounts Officer: [Signature]

Date : 20/7/22

PRINCIPAL

NARAYANA PHARMACY COLLEGE

NELLORE - 524 002

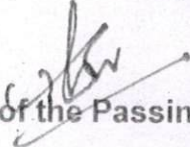
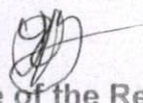
NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

DEBIT / ADVANCE VOUCHER

No.

Date : 20/07/2022

Cheque No.	Cash ✓	Pay to <u>X. Ratna Kumari</u> A/C Head _____		
Conference (21/7/22 & 22/7/22)			2196	00
Rupees <u>Two thousand One</u> <u>hundred Ninety Six Rupees Only</u>			TOTAL	2196 00
Signature of the Passing Authority 			Signature of the Receptient 	

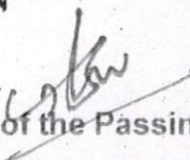

NARAYANA PHARMACY COLLEGE, NELLORE

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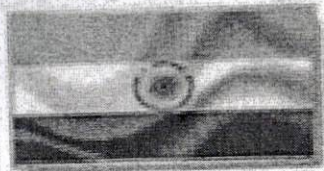
DEBIT / ADVANCE VOUCHER

No.

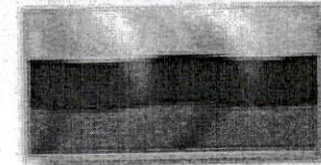
Date : 20/07/2022

Cheque No.	Cash ✓	Pay to <u>A. Sai Saranya</u> A/C Head _____		
Conference (21/7/22 and 22/7/22)			2196	00
Rupees <u>Two thousand One hundred</u> <u>Ninety Six Rupees Only</u>			TOTAL	2196 00
Signature of the Passing Authority 			Signature of the Receptient 	

PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002



**INTERNATIONAL SCIENTIFIC CONFERENCE
"UNIVERSITY SCIENCE: A LOOK INTO THE FUTURE"**

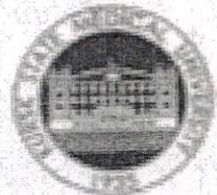


CERTIFICATE OF APPRECIATION

This is to certify that

A.Sai Saranya

*has actively participated as Speaker in the
International Scientific Conference "University Science: A
look into the future" dedicated to the 89th Anniversary of
Kursk State Medical University, co-hosted and organised in
India by Dr. M.G.R. Educational and Research Institute on
8th and 9th February, 2024*



B. Palanivelu
Prof. Dr. C.B. Palanivelu
Registrar
Educational and Research Institute

S. Geethalakshmi
Prof. Dr. S. Geethalakshmi
Vice Chancellor
Dr. M.G.R. Educational and Research Institute

ms
PRINCIPAL
MAHARANA PHARMACY COLLEGE
NELLORE - 524 002

A.C.S. Arun Kumar
Er. A.C.S. Arun Kumar
President
Dr. M.G.R. Educational and Research Institute





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Email: principal.npc@narayanagroup.com Visit us: www.narayanapharmacycollege.com

FINANCIAL SUPPORT REQUEST FORM

1. Name of the staff member: A. Sai Saranya
2. Designations: Asso. Professor
3. Department: Pharmaceutical Analysis
4. Conference/publication/seminar/workshop/FDP certificate details: University Science: A look into the future
5. Date and duration of the programme: 8/02/2024 - 9/02/2024
6. Associating professional body/agency: Dr. M.G.R. Educational and Research Institute, Chennai
7. Financial support particulars (Rs):
 - i) Registration charges :-----
 - ii) Travelling- daily allowances- :----- } 5000/-
 - iii) Membership fees :-----
 - iv) others (if any) :-----

Date: 7/02/2024

Signature of the staff member: A. Sai

Recommendation of the principal with
Signature: [Signature]

Sanctioned/Not sanctioned

Accounts Department

Accounts Officer: [Signature]

Date: 7/2/24

PRINCIPAL
NARAYANA PHARMACY COLLEGE
NELLORE - 524 002

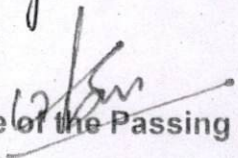
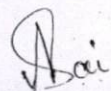
NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

DEBIT / ADVANCE VOUCHER

No.

Date: 07/02/24

Cheque No.	Cash <input checked="" type="checkbox"/>	Pay to <u>A. Sai Saranya</u> A/C Head _____	
Conference (08/02/24 to 09/02/24)			5000 00
Rupees <u>five thousand rupees</u> <u>only.</u>			TOTAL 5000 00
Signature of the Passing Authority 			Signature of the Receptient 

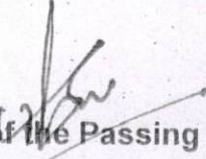
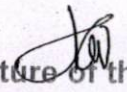
NARAYANA PHARMACY COLLEGE, NELLORE

(A unit of Narayana Educational Society)

DEBIT / ADVANCE VOUCHER

No.

Date: 25/07/2023

Cheque No.	Cash <input checked="" type="checkbox"/>	Pay to <u>M. K. R. Srinaveni</u> A/C Head _____	
Two Days International Workshop (26 th & 27 th July 2023)			2000 00
Rupees <u>Two Thousand Rupees</u> <u>Only</u>			TOTAL 2000 00
Signature of the Passing Authority 			Signature of the Receptient 

PRINCIPAL

NARAYANA PHARMACY COLLEGE
NELLORE - 524 002