



# QUALITY EXCELLENCE AND RESEARCH CENTRE PUNE

Unit of Cyclone Pharmaceuticals Pvt Ltd  
104, Garnets Bay near Four Point By Sheraton Hotel Vimanm Nagar Pune 411014  
Mob.No. 7611000550/7875351001

Course: \_\_\_\_\_

Roll No. : \_\_\_\_\_  
(For office use)



1. Name of the applicant (in BLOCK LETTERS, as in 10 +2 mark sheet/UG/PG/PG Diploma certificate)

JADHAV GOURAV GAJANAN

2. Father's Name

GAJANAN JADHAV

3. Date of Birth Day 03 Month 04 Year 1995

4. Sex: Male ☒ Female ☐

5. Nationality ☒ Indian ☐ Others

5. Student's E-mail ID: gouravjadhav1547@gmail.com

6. Name of College or Current Organisation: Smt. Kashibai Navale College of pharmacy, pune.

[If he/she has this facility]

6. Address to which communication is to be sent: (Name not to be mentioned) (in BLOCK LETTERS)

Line 1 FIAT AT INDRAPRASTHA  
Line 2 PHASE 2 GUNCITY  
Line 3 ANAND NAGAR PUNE  
Line 4

Pin code 411051 Phone : \_\_\_\_\_ STD Code \_\_\_\_\_

Mobile : 7588423312

7. Educational Qualification (Attested copies must be enclosed)

Degree/Diploma	Year of Passing	% Marks	University/Institute
Master's (PH)	2021	81 CGPA	Pune University.

8. Experience Profile :





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11. Course Selection:

Name of Course : *Advance Certificate Course in Regulatory Affair*

Duration : *4 months*

### Declaration

I declare that all the information submitted in this application form is correct and complete. I acknowledge that the QERC INDIA reserves the right to vary or reverse any decision regarding admission on the basis of incorrect or incomplete information provided by me. I also acknowledged by QERC that QERC is a professional Training institute and not affiliated to any University and I accept the terms and conditions and will not have any complaint in this regards in Future.

I declare further that I had read & understood all contents of this application form & information Brochure and that I am bound by all their contents for all purpose.

The Payment Shall be done on Acc: 000505021182 IFSC: ICIC 0000005 In Favour of Cyclone Pharmaceuticals Pvt Ltd Pune.

Date : *23 Aug 2022*

*[Signature]*  
Signature of the Candidate

Fee Details: Amount: *8850 /-* (by. *Gouravjadhav 75470ping pay*)  
Transaction ID - *223512206340*  
UPI ID - *9673000554-2@okbizaxi's*  
Paid In

Bank Details:

Received By

### Approval:

The above candidate can be Considered for attending the selected Course .

Signature /-  
Course Director

Signature /-  
Course Co-ordinator

### Note:

1. Cancellation of Admission is permitted within 7 days of Admission. 10% Ammount of Total Fee will be deducted on cancellation.
2. Registration Fee is Non Refundable.
3. No transfere of admission will be allowed from one course to other Course.





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4. Alteration is not allowed in course duration.
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