

BHUJBAL KNOWLEDGE CITY
MET's Institute of Pharmacy
Adgaon, Nashik. 422 003

4th METRxPLORE 2019

9th February 2019

Undergraduate Research Conference

Registration/ Consent Form

Name of the student/s:

Year of study: III/IV B. Pharm.

Contact details: Mobile: -----

E-mail:-----

Name of the guide:

Contact details: Mobile: -----e-mail: -----

Name of the Institute/College:

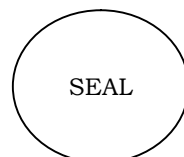
Area of research work: (tick appropriate)

(Pharmaceutics/ Pharmaceutical Chemistry/ Pharmacology/ Pharmacognosy)

Probable title of the research work:

Accommodation required: Yes No

Registration Fee: Rs. 250/ per person



(Principal)

(Guide)

(Students)

Note: For multiple entries; photocopy of this form can be used.

Do send the filled form to: metrxplore2018@gmail.com

Coordinators: Dr. S. S. Sonawane (9850819154), Dr. M. P. Patil (9850630624)