F. No. SU/2022/731(2)

Dated: 08.04.2022

MEMORANDUM

SUBJECT: TO START A VALUE-ADDED CERTIFICATE
COURSE IN "QUALITY ASSURANCE IN
CLINICAL LABORATORY" IN THE DEPARTMENT
OF BIOCHEMISTRY, SANTOSH MEDICAL
COLLEGE & HOSPITAL, GHAZIABAD, DELHI
NCR *******

With reference to her letter on the subject cited above, Dr. Juhi Aggarwal, Prof & HOD of Biochemistry is informed that the changes for starting a Value-Added Certificate Course on "QUALITY ASSURANCE IN CLINICAL LABORATORY" has been considered and approved by the Board of Studies, Academic Council and the Board of the Management in their meetings held on 23.03.2022, 24.03.2022 and 30.03.2022 respectively and granted permission to start the above certificate course on the following terms and conditions:-

1. Name of the Course

"QUALITY ASSURANCE IN CLINICAL LABORATORY"

2. Duration of the Course

1 Month 16 Hours (Every Saturday 1:00 PM to 5:00 PM)

3. Eligibility Criteria

MBBS STUDENTS BATCH (2021-2022)

4. Course Fee:

Rs.500 per student

5. Course Director:

Dr. Juhi Aggarwal, Professor & HOD of Biochemistry

6. Course Methodology

PPT/ GROUP DISCUSSION/ GUEST LECTURE

7. Syllabus

DAY 1- Introduction & Pre- analytical process

DAY 2- Analytical process- Part I

DAY 3- Analytical process- Part II

DAY 4- Post Analytical process followed by Course Evaluation Test

The above is circulated to all teaching staff and concerned students of Santosh Medical College & Hospital for their information and necessary action.

The Course Director is informed that the students will be required to submit their <u>APPLICATION</u> in the Prescribed Format [Annexure -1] for participating in the Value Added/Fellowship Programme.

The Course Director is further informed that he/she will be required to submit the details of <u>Course Completion Intimation</u> and request for <u>Certificates</u> in the Prescribed Format [Annexure - 2] to the Registrar for further necessary action.

DR. ALPANA AGRAWAL REGISTRAR

REGISTRAF

Encl.: Annexure-1 & 2 as above

Distribution: As above

Copy to:

- 1. The Secretariat
- 2. The Chancellor
- 3. The Vice Chancellor
- 4. Dean, Santosh Medical College & Hospital
- 5. Medical Superintendent, Santosh Hospital
- 6. HOD of the Department of Biochemistry
- 7. Director IQAC
- 8. Dean Research
- 9. Finance Department
- 10. Guard File



Application for Admission to Value Added Courses / Fellowship Courses

	Month :	Year :		
1.	Programme (Tick the relevant)	Value Added	/ Fellowship	
2.	Name of the Programme			
3.	Name of the student (In Block Letters)			
4.	Name of the Institution Woking / Studying			-
5.	Address of the Institution Working / Studying			10
6.	Designation / Year of Study			
7.	Course Studying in the University			
8.	Department (if any)			en ince
		Degree	Month & Year of Completion	
9.	Academic Qualifications	UG		
		PG		
		Ph.D. Any others		
10.	Residential Address			
11.	Mobile Nos.	- 174 Mil 1941 - 200 - 1950		
12.	Official E-mail ID			
13.	Personal E-mail ID			-
14.	Date of Birth	The Section At Texander		
15.	Aadhar Number			
16.	Course Fee			
17.	Amount paid towards Course Fee			
18.	Amount of Fee Concession obtained			
19.	Date of payment of fee		1 24 - 1 Her	
20.	Mode of payment	Cash Cheque		-

Date	:
Station	:

Signature

Signature of Course Director

Forwarding Authority (HOD)



To
The Registrar Date: ___
Santosh Deemed to be University
Ghaziabad, NCR Delhi

Course Completion intimation and request for Certificates

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successfully comple	eted the said course conducted	from _			_ to	an	d that
they may be issued	the respective Certificates acco	rdingly.	. *				

S. No.	Name of the Student	Completed / Not Completed
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