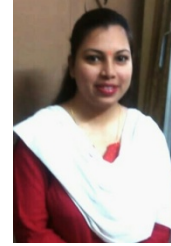


Faculty Information Form

(Fill-up as many entities as possible)

Name: PRATIKSHA JAYASWAL



1. Email: pratiksha.11sept@gmail.com
2. Contact number: 9889411939
3. Department: Faculty of Pharmaceutical Sciences, RU
4. Date of joining: 08.04.2019
5. Designation: Assistant Professor of Pharmaceutics
(Example: Assist. Prof. etc.)
6. List of Degree, conferring institutions and thesis title if any: Start with highest qualification.

Degree and conferring institutions (1)

M.PHARMA in Pharmaceutics, Sagar Institute of Pharma Scs, RGPV (M.P.)-2015

Degree and conferring institutions (2)

B.PHARMA , Pranveer singh Institute of Technology Kanpur , UPTU university Lucknow (U.P.)-2012

7. Specialization (less than 30 words): Give references of three best publications in this area.

Specialization in **Pharmaceutics**

8. Research interests (less than 100 words): Give reference of three best publications in this area.

I had done Research Work at the time of Master's degree on **novel drug delivery system** by choosing Floating Microspheres as a Medium.

9. Teaching Area:

Pharmaceutics

10. Professional Experience: 02yrs

Having 2 years experience in administration field at Mahendra Educational Pvt. Ltd.

11. Publications: (Except Rama Journals): Nil

12. Patents: Nil

13. Number of Projects with title	Completed Nil	Ongoing	Sanctioned	Submitted
--	-------------------------	----------------	-------------------	------------------