

BIODATA

PERSONAL DETAILS

Full Name : Mr. Brahmadi Shankar Reddy
Specialization : Pharmacy Practice
Designation : Assistant Professor
Department : Pharmacy Practice
Date of Joining: 15.07.2019
Mobile : 9632514191
Email ID : bsreddi2005@gmail.com
PCI Registration No.: BH-P-23-5199203

EDUCATIONAL QUALIFICATIONS

Qualification	Institution	University	Year	Percentage/CGPA
B. Pharm	HKES'S College of Pharmacy Kalaburagi	RGUHS Bangalore	2012	55%
M. Pharm	HKES's MTRIPS Kalaburagi	RGUHS Bangalore	2015	75%

PROFESSIONAL EXPERIENCE

- ❖ Total Teaching Experience: 11 Years
- ❖ Total Industry Experience (if any): NIL
- ❖ Organization – Rajiv Memorial Education Societies College of Pharmacy, Kalaburagi
- ❖ Role/Designation– Assistant Professor

RESEARCH, PUBLICATIONS, BOOKS & PATENTS

- ❖ Number of Publications: National 19 International 03
- ❖ Number of Patents: Nil
- ❖ Author for no of Books :Nil
- ❖ Number of Projects / Grants Received :Nil

No of Workshops Conducted: NIL

No of Conferences/ Seminars Conducted: 01

No of FDP Conducted: NIL

No of Workshops Attended: 06

No of Conferences/ Seminars Attended: 07

No of FDP Attended: 02

ACHIEVEMENTS & AWARDS: -----

PROFESSIONAL MEMBERSHIPS: ----- KA/LM-1506

Declaration

I hereby declare that the above information is true to the best of my knowledge.

Name: Mr. B Shankar Reddy