

O/c



Mylan Laboratories Limited

Plot No. 564/A/22, Road No. 92, Jubilee Hills,
Hyderabad - 500 096, Telangana, India
Tel: +91-40-30866666, 23550543, Fax : 30866699
E-Mail : mylan.india@mylan.in
Web : www.mylanlabs.in
CIN : U24231TG1984PLC005146

MLLAGB/EHS/MPCB/2022/07

June 18, 2022

To,

The Sub Regional Officer,
Maharashtra Pollution Control Board,
Paryavaran Bhavan, Plot No. A-4/1, Near Seth Nandlal Hospital,
MIDC Industrial Area,
Chikalthana, Aurangabad – 431 210

Sub: - Submission of Bio-Medical Waste Annual Returns in FORM-IV as per Rule 13 for the calendar year January 2021 – December 2021

Ref: BMW Authorization Order No. SRO-AURANGABAD I/BMW_AUTH/1908000398 - 2019

Respected Sir,

With reference to above subject, herewith we are submitting the Online submission copy of Annual Returns about generation & disposal of Bio Medical Waste for Calendar year - 2021 along with attachments.

Kindly acknowledge the same for our office records.

Thanking You

Your faithfully
For Mylan Laboratories Ltd

Authorized Signatory



Encl.: Online submission copy of Annual Returns of Form - IV for Biomedical waste.

CC: i. The Member Secretary, MPCB, Sion, Mumbai.
ii. Regional Officer, MPCB, Aurangabad



Form - IV
(See rule 13)
Bio Medical Waste Annual Return for the Calendar Year - 2021

Application Type: Industry	Calendar Year 2021	Submit To SRO-Aurangabad I	
1) Particulars			
i) First Name ANIL	ii) Middle Name SUBHASHCHANDRA	iii) Last Name TANEJA	
iv) Designation Head Of OSD Site Operations	v) Aadhaar No 546066635826	vi) PAN No ACDPT8042J	
vii) Address as per Aadhaar Card Flat No B - 301, I V Y Botanica, Wagholi, Near J S P M College Wagholi, Pune, Maharashtra 412207	viii) Tel. No. 0240666888	ix) Fax No. 02406668777	
x) e-mail kishor.pawar@viatris.com	xi) URL of website www.viatris.com		
2) Details of the Industry			
i) Name of the Industry Mylan Laboratories Limited	ii) Email kishor.pawar@viatris.com	iii) Name of the contact person Mr Kishor Pawar	
iv) Contact No. 8888870287			
3) Address of the Industry			
i) Building Name/Building No./Survey Number Plot No. H -12 & H - 13	ii) Street / Village MIDC, Waluj	iii) City / Taluka Gangapur	
iv) District Aurangabad	v) Pin-Code Number 431136	vi) Near by Landmark	
vii) Latitude coordinate 198595.84	viii) Longitude coordinate 752206.14	ix) Ownership Private	
Details of valid Combined Consent and BMW Authorization (CCA)			
i) Authorization No. SRO-AURANGABAD I/BMW_AUTH/1908000398 - 2019	ii) Authorization validity Date Aug 22 2022 12:00:00:AM		
5) Status of Consents under Water Act and Air Act			
i) Consent Number Format1.0/AS(T)/UAN No. 0000132338/CR/2205000615	ii) Consent validity Date Apr 30 2026 12:00:00:AM		
6) Total No of Beds (As per valid Authorization)			
7) Registration Number (e.g. Bombay Nursing Home reg. no.,MSDC,MBTC)		SRO-AURANGABAD I/BMW_AUTH/1908000398 - 2019	
8) Registration Expiry Date		Aug 22 2022 12:00:00:AM	
9) Faculty of Medicine			
10) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of M/s. Water Grace Products , Aurangabad			
11) Details of BMW			
i) Authorized BMW Quantity Kg/month (as per valid CCA)			
Yellow 900.00000	Red 5.00000	Blue 5.00000	White 5.00000

ii) Bio Medical Waste Generated (Kg/month)			
Yellow 156.65000	Red 0.08900	Blue	White
iii) Quantity of Biomedical waste given to CBMWTFD (kg/Month)			
Yellow 156.6500	Red 0.0890	Blue	White
General Solid Waste			
12) Details trainings conducted on BMW			
i) Number of trainings conducted on BMW Management.			
11			
ii) Number of personnel trained			
27			
iii) Number of personnel trained at the time of induction			
11			
iv) number of personnel not undergone any training so far			
v) whether standard manual for training is available?			
Yes			
vi) any other information			
NA			
13) Details of the accident occurred during the year			
i) Number of Accidents occurred			
ii) Number of the persons affected			
iii) Remedial Action taken (Please attach details if any)			
No			
iv) Any Fatality occurred, If yes details.			
No			
14) Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?			
No			
15) Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?			
Yes			
17) Whether HCE intended to Sale / Handover liquid BMW for R&D purpose			
No			
Place AURANGABAD	Designation DGM-EHS	Date 16-06-2022	

Annuxure - 1

Generation & Disposal record of Biomedical waste from Jan.21 to Dec.21

Sr.No	Month	Microbial waste Qty. (Kg)	OHC waste Qty. (Kg)			
		Yellow	Yellow	Red	Blue	White
1	Jan-21	73	0.098	0	0	0
2	Feb-21	134	0.181	0	0	0
3	Mar-21	97	0.089	0	0	0
4	Apr-21	93	0.148	0	0	0
5	May-21	145	0.139	0	0	0
6	Jun-21	215	1.705	1.063	0	0
7	Jul-21	195	0.178	0	0	0
8	Aug-21	161	0.213	0	0	0
9	Sep-21	197	0.175	0	0	0
10	Oct-21	146	0.22	0	0	0
11	Nov-21	184	0.175	0	0	0
12	Dec-21	229	7.428	0	0	0
Total		1869	10.75	1.063	0	0
AVE		155.75	0.90	0.089	0	0



Mylan

Mylan, Aurangabad

Biomedical Waste Committee Meeting – Attendance Record

Meeting No: 01/2021			Venue: Microsoft Team	
Date: 24/03/2021			Time: 15:30 hrs.	
S. No.	Name	Employee ID	Department	Signature

Annexure - 1

Sr.No	Full Name	User Action	Timestamp
1	Pravin Machindranath Salunkhe	Joined	3/24/2021, 3:29:24 PM
2	Kishor Pawar	Joined	3/24/2021, 3:29:40 PM
3	Prashant Thorat	Joined	3/24/2021, 3:30:01 PM
4	Mahesh Gawade	Joined	3/24/2021, 3:30:31 PM
5	Suhas Suryawanshi	Joined	3/24/2021, 3:30:42 PM
6	Dnyandev Suryawanshi	Joined	3/24/2021, 3:31:03 PM
7	Rahul Deshmukh	Joined	3/24/2021, 3:32:06 PM

IS
24/03/2021

Biomedical Waste Committee - Minutes of the Meeting

Meeting No.: 01/2021

Held On: 24.03.2021

Sr. No	Observation/ Recommendation discussed in Meeting	Action Plan/ Corrective Action	Person Responsible	Target Date of Completion	Overdue	Status as on 24.03.2021	Remarks
1.0 Review of Previous Committee Meeting Minutes							
1.1	Bar code system shall be established for bags or container containing biomedical waste to be sent out of premises.	Intimation given to M/s Water Grace product for Bar code system.	Mr. Kishor Pawar	--	--	In progress As intimated by M/s Water Grace product Bar code system is under establishment for bags or container of Biomedical waste for receiving.	Bar code system shall be established for bags or container containing biomedical waste to be sent out of premises.
1.2	New company employees are not given the vaccination of Hepatitis B.	List of New company Employees shall be provided by HR/Training Department to OHC	Mr. Dnyandev Suryawanshi Dr. Subhas Suryawanshi.	--	--	Pending	--
1.3	Newly procured five nos of Oxygen Cylinder HPT certificate shall be maintained	Informed to Purchase Dpt. for availability of HPT Certificate	Mr. Mahesh Gawade Dr. Subhas Suryavanshi	--	--	Complied Certificate of Hydraulic Pressure Testing (HPT) was received and kept in file.	--

Biomedical Waste Committee -Minutes of the Meeting

Meeting No.: 01/2021

Held On: 24.03.2021

Sr. No	Observation/ Recommendation discussed in Meeting	Action Plan/ Corrective Action	Person Responsible	Target Date of Completion	Overdue	Complied Identification number was given & displayed.	Remarks
1.4	Identification No shall be provide to new procured Oxygen Cylinder for OHC	Identification no label shall be provided by EHS	Mr. Mahesh Gawade	--	--	--	--
2.0 Suggestions and Recommendations by committee members							
2.1	Biomedical waste category display Poster/board not displayed in Washing Area	Biomedical waste category display Poster/board to be displayed in Washing Area	Mr. Pravin Salunkhe/Mr. Rahul Deshmukh	31.03.21	--	--	--
2.2	Inventory stock of Vaccination of Hepatitis B & Tetanus to be checked in OHC.	Tetanus vaccination to be procured.	Pravin Salunkhe/Dr. Subas Suryawanshi	30.04.21	--	--	--
2.3	Hepatitis B Vaccination shall be done to QC micro lab & ETP persons those are handling of biomedical waste.	List of Employees shall be provided by QC micro lab & ETP area to OHC. Record shall be maintained	Pravin Salunkhe/Dr. Subas Suryawanshi	30.04.21	--	--	--

Prepared By:

Pravin Salunkhe
25/03/2021

C to: All Committee Members

Approved By:

Pravin Salunkhe
25/03/2021

Annexure - 1

Sr.No	Full Name	User Action	Timestamp
1	Pravin Machindranath Salunkhe	Joined	9/30/2021, 2:27:24 PM
2	Kishor Pawar	Joined	9/30/2021, 2:27:40 PM
3	Prashant Thorat	Joined	9/30/2021, 2:27:56 PM
4	Mahesh Gawade	Joined	9/30/2021, 2:28:31 PM
5	Suhas Suryawanshi	Joined	9/30/2021, 2:29:12 PM
6	Dharmendra Patil	Joined	9/30/2021, 2:36:15 PM
7	Suryakiran Waghchoure	Joined	9/30/2021, 2:38:23 PM
8	Jagdish Kudale	Joined	9/30/2021, 2:38:29 PM

PS
30/9/2021

Biomedical Waste Committee -Minutes of the Meeting

Meeting No.: 02/2021

Held On: 30.09.2021

Sr. No	Observation/ Recommendation discussed in Meeting	Action Plan/ Corrective Action	Person Responsible	Target Date of Completion	Overdue	Status as on	Remarks
1.0 Review of Previous Committee Meeting Minutes							
1.1	Bar code system shall be established for bags or container containing biomedical waste to be sent out of premises.	Intimation given to M/s Water Grace product for Bar code system.	Mr. Kishor Pawar	--	--	In progress As intimated by M/s Water Grace product Bar code system is under establishment for bags or container for biomedical waste for receiving.	Bar code system shall be established for bags or container containing biomedical waste to be sent out of premises.
1.2	New company employees are not given the vaccination of Hepatitis B.	List of New company Employees shall be provided by HR/Training Department to OHC	Mr. Suryakiran Waghchourge/ Dr. Suhans Suryawanshi.	--	--	Pending	Need to discuss with Plant Head
1.3	Biomedical waste category display Poster/board not displayed in Washing Area	Biomedical waste category display Poster/board to be displayed in Washing Area	Mr. Pravin Salunkhe/Mr. Rahul Deshmukh	--	--	Complied Biomedical waste category board was displayed in Washing Area (QC microlab)	--

Biomedical Waste Committee -Minutes of the Meeting

Meeting No.: 02/2021

Held On: 30.09.2021

Sr. No	Observation/ Recommendation discussed in Meeting	Action Plan/ Corrective Action	Person Responsible	Target Date of Completion	Overdue	Status as on	Remarks
1.4	Inventory stock of Vaccination of Hepatitis B & Tetanus to be checked in OHC.	Tetanus vaccination to be procured.	Mr. Pravim Salunkhe/Dr. Suhas Suryawanshi	--	--	Complied Inventory stock of Vaccination of Hepatitis B & Tetanus is checked in OHC and found adequate quantity.	--
1.5	Hepatitis B Vaccination shall be done to QC micro lab & ETP persons those are handling of biomedical waste.	List of Employees shall be provided by QC micro lab & ETP area to OHC. Record shall be maintained	Mr. Pravim Salunkhe/Dr. Suhas Suryawanshi	--	--	Complied Hepatitis B Vaccination is provided to ETP, QC micro lab & OHC persons and record is maintained in Form- 000493051(List of Employees who are vaccinated for Hepatitis B)	--
2.0	Suggestions and Recommendations by committee members						
2.1	Catergory wise biomedical waste containers shall be procured for QC micro lab and OHC	PR shall be raised of biomedical waste containers.	Mr. Mahesh Gawade/Mr.Pr avin Salunkhe	31.10.21	--	--	--


Biomedical Waste Committee -Minutes of the Meeting

Meeting No.: 02/2021

Held On: 30.09.2021


Sr. No	Observation/ Recommendation discussed in Meeting	Action Plan/ Corrective Action	Person Responsible	Target Date of Completion	Overdue	Status as on	Remarks
2.2	Management of Biomedical waste training shall be conducted once in year those persons are involved in handling of biomedical waste.	Management of Biomedical waste training shall be conducted to OHC, QC microlab and ETP persons.	Mr. Pravim Salunkhe/Mr. Mahesh Gawade	31.10.21	--	--	--

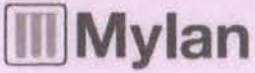
Prepared By:


 30/09/2021
 Pravin Salunkhe

C to: All Committee Members

Approved By:


 30/09/2021
 Pravin Salunkhe

	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		

1. Reference of the governing procedure: SOP-000486495 Training of Pooled Staff

2. Content:

Date of Training : 16/01/21	Time : From 14.01 To 14.15
Venue : ETP Job	Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment

Method of Training : Classroom On the Job Other verbal (Specify)



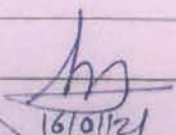
Course / Document Title : Handling of biomedical waste

Course / Document No. : -

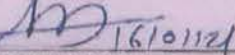
Version : -

Name of trainer : Santosh Mangale

Name of agency : S.D. Engineering

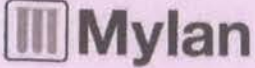
S. No.	Name	Code	Signature
1)	Dattatray Modase	799065	
2)	Jalish Bombarde	799066	
<u>NA.</u>			
			 16/01/21

Remarks: satisfactory

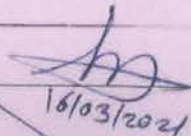
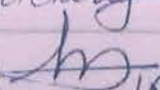
Trainer (Sign & Date)  16/01/21

SOP-000486495_FORM-000490864_Version-8.0


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	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		

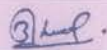



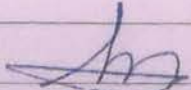
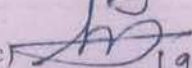
- Reference of the governing procedure: SOP-000486495 Training of Pooled Staff
- Content:

Date of Training : 16/03/2021		Time : From 17.10 To 17.30	
Venue : ETP Jab		Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment	
Method of Training : <input type="checkbox"/> Classroom <input type="checkbox"/> On the Job <input checked="" type="checkbox"/> Other <u>Verbal</u> (Specify)			
Course / Document Title : <u>Handling of biomedical waste</u>			
Course / Document No. : NA		Version : NA	
Name of trainer : <u>Santosh Mangale</u>		Name of agency : <u>S.D. Engineering</u>	
S. No.	Name	Code	Signature
1)	<u>Balu Jethu</u>	<u>799068</u>	<u>Balu</u>
2)	<u>Dattatray Modase.</u>	<u>799065</u>	<u>DJ</u>
NA			
 16/03/2021			
Remarks: <u>Satisfactory</u>			
Trainer (Sign & Date)  16/03/2021			


SOP-000486495_FORM-000490864_Version-8.0

 Mylan	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		

- Reference of the governing procedure: SOP-000486495 Training of Pooled Staff
- Content:

Date of Training : 19/05/2021		Time : From 11.31 To 12.45	
Venue :		Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment	
Method of Training : <input type="checkbox"/> Classroom <input type="checkbox"/> On the Job <input checked="" type="checkbox"/> Other <u>Verbal</u> (Specify)			
Course / Document Title : <u>Handling of Biomedical waste</u>			
Course / Document No. : <u>NA</u>		Version : <u>NA</u>	
Name of trainer : <u>Santosh Mangate</u>		Name of agency : <u>S.D. Engineering</u>	
S. No.	Name	Code	Signature
1)	Balasaheb S. Khose	799064	
2)	She She RAO Bhalke	799069	
3)	Manjutsambhaji Hontao	947961	
4)	SOPAN ghodke	747984	
		NA	 19/05/2021
Remarks: <u>Satisfactory</u>			
Trainer (Sign & Date)  19/05/2021			

SOP-000486495 FORM-000490864 Version-8.0

	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		

1. Reference of the governing procedure: SOP-000486495 Training of Pooled Staff

2. Content:


Date of Training : 07/07/2024	Time : From 16.16 To 16.30
Venue : ETP Job	Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment
Method of Training : <input type="checkbox"/> Classroom <input type="checkbox"/> On the Job <input checked="" type="checkbox"/> Other <u>verbal</u> (Specify)	
Course / Document Title : <u>Handling of Biomedical waste</u>	

Course / Document No. : NA	Version : NA
Name of trainer : <u>Santosh Mangale</u>	Name of agency : <u>S.D.Engineering</u>

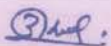
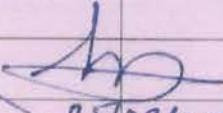

S. No.	Name	Code	Signature
01	<u>Pratik Lohar</u>	<u>799072</u>	<u>[Signature]</u>
02	<u>Shesherao Bhalake</u>	<u>799067</u>	<u>[Signature]</u>
03	<u>Satish Bambaade</u>	<u>799066</u>	<u>[Signature]</u>
<u>NA</u>			
			<u>[Signature]</u> 07/07/24

Remarks: Satisfactory

Trainer (Sign & Date) [Signature] 07/07/24

 Mylan	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		


- Reference of the governing procedure: SOP-000486495 Training of Pooled Staff
- Content:

Date of Training : 05/09/2024		Time : From 13:45 to 14:00	
Venue : ETP Job		Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment	
Method of Training : <input type="checkbox"/> Classroom <input type="checkbox"/> On the Job <input checked="" type="checkbox"/> Other <u>verbal</u> (Specify)			
Course / Document Title : <u>Handling of biomedical waste</u>			
Course / Document No. : NA		Version : NA	
Name of trainer : Santosh Mangale		Name of agency : S.D. Engineering	
S. No.	Name	Code	Signature
1)	Balasaheb Khoje	799074	
NA			
 05/09/2024			
Remarks: <u>Satisfactory</u>			
Trainer (Sign & Date)  05/09/2024			

SOP-000486495 FORM-000490864 Version-8.0

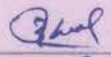

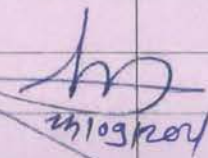
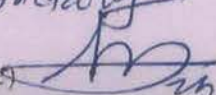
The User is responsible to ensure the appropriate version of this document

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	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		

1. Reference of the governing procedure: SOP-000486495 Training of Pooled Staff

2. Content:

Date of Training : 24/09/2024	Time : From 20.00 To 20.30		
Venue : ETP Lab	Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment		
Method of Training : <input type="checkbox"/> Classroom <input type="checkbox"/> On the Job <input checked="" type="checkbox"/> Other <u>verbal</u> (Specify)			
Course / Document Title : <u>Handling of biomedical waste</u>			
Course / Document No. : <u>NA</u>	Version : <u>-</u>		
Name of trainer : <u>Santosh Mangale</u>	Name of agency : <u>S.D Engineering</u>		
S. No.	Name	Code	Signature
01	Balasaheb Khole	799074	
02	Sangheratna Pethase	47994	
<div style="display: flex; align-items: center; justify-content: center;"> / <div style="text-align: center;"> <p>NA</p>  <p>24/09/2024</p> </div> </div>			
Remarks: <u>Satisfactory</u>			
Trainer (Sign & Date)  24/09/2024			

SOP-000486495 FORM-000490864 Version-8.0

<input type="checkbox"/> Mylan	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		

1. Reference of the governing procedure: SOP-000486495 Training of Pooled Staff

2. Content:

Date of Training : 10/10/21	Time : From 15:36 To 15:50		
Venue : ETP Job	Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment		
Method of Training : <input type="checkbox"/> Classroom <input type="checkbox"/> On the Job <input checked="" type="checkbox"/> Other <u>Verbal</u> (Specify)			
Course / Document Title : <u>Handling of Biomedical waste</u>			
Course / Document No. : -	Version : -		
Name of trainer : <u>Santosh Mangale</u>	Name of agency : <u>Kamal</u>		
S. No.	Name	Code	Signature
1)	<u>Santosh Mangale</u>	47966	<u>[Signature]</u>
2)	<u>Majumdar</u>	47961	<u>[Signature]</u>
<u>NA</u> <u>[Signature]</u> <u>10/10/21</u>			
Remarks: <u>Satisfactory</u>			
Trainer (Sign & Date) <u>[Signature]</u> <u>10/10/21</u>			

SOP-000486495_FORM-000490864_Version-8.0

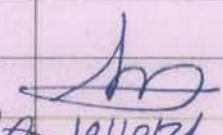
<input type="checkbox"/> Mylan	Aurangabad, IN - FDF 2	FORM-000490864
	Effective	8.0, CURRENT
Attendance Record Pooled Staff		

1. Reference of the governing procedure: SOP-000486495 Training of Pooled Staff

2. Content:

Date of Training : 10/10/24	Time : From 15.36 To 15.50
Venue : ETP Lab	Evaluation by : <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment
Method of Training : <input type="checkbox"/> Classroom <input type="checkbox"/> On the Job <input checked="" type="checkbox"/> Other <u>verbal</u> (Specify)	
Course / Document Title : <u>Handling of biomedical waste</u>	

Course / Document No. : —	Version : —
Name of trainer : <u>Santosh Mangale</u>	Name of agency : <u>S.D. Engineering</u>

S. No.	Name	Code	Signature
01	Janardhan G. Gacche	799075	<u>Gacche</u>
02	Laxman shinde	99073	<u>shinde</u>
03	Pankaj Lohar	99072	<u>Lohar</u>
 NA 10/10/24			

Remarks: Satisfactory

Trainer (Sign & Date) Santosh Mangale 10/10/24

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Printed in CARA by Santosh Mangale on 10 Oct 2024 11:43:29 PM IST

	Aurangabad, IN - FDF 2
	Form
TRAINING ATTENDANCE RECORD	
FORM-000492186	
Effective	7.0, CURRENT

1.0 Reference of the governing procedure : SOP-000485301-Training

2.0 Content : Training Attendance Record

Date : 18/12/2021	Time : From 10:30 To 10:45 hrs	Page	: 01 of 01			
Method of Training		Venue	: QC microlab			
<input type="checkbox"/> Classroom <input type="checkbox"/> Computer Based <input type="checkbox"/> On-The-Job <input checked="" type="checkbox"/> Others:(specify): Verbal		Evaluation by	: <input type="checkbox"/> Questionnaire <input checked="" type="checkbox"/> Verbal Assessment			
Course / Document Title : Management of Biomedical Waste						
Course / Document No : NA		Version : NA				
Name of Trainer(s) : Pravin Salunke						
S. No.	Name of the Employee	Emp. Code	MID	Department	Designation	Signature
01	Sujit S. Kulkarni	16343	MS11035	QC	Officer	
02	Manojkumari Buldak	18175	MS17578	QC	Officer	
03	Rohini H. Bidare	20381	MS2396	QC. Micro	Officer	
04	Neha H. Sharma	20012	M523702	QC	Officer	
05	E. Deshmukh	17844	MS16288	QA	AM	
NA 18/12/21						

Remarks: Training Completed Satisfactory.

Sign. & Date
 Trainer 18/12/2021

Only for Training Department	Received on	18/12/21	Received by	
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Note: Submit the Training Record to Training Department within a week.

This information is confidential to Mylan.

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