MEMORANDUM OF UNDERSTANDING (MOU)

BETWEEN

Dayanand Education Society's
Dayanand College of Pharmacy
Barshi Road, Latur, MS
Pin - 413 531

&

Indian Red Cross Society's Dr. Bhalchandra Blood Bank, Latur- 413512

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (here in after called as the 'MOU') is entered into on this the 1^{st} Day of January Two Thousand Sixteen (01/01/2016).

BETWEEN

Dayanand Education Society's, Dayanand College of Pharmacy, Barshi Road, Latur, MS Pin - 413531 "First Party" represented herein by Dr. Kranti Satpute, Principal, (here in after referred as 'First Party', the institution which expression, unless excluded by or repugnant to the subject or context shall include its successors – in-office, administrators and assigns).

AND

Blood Transfusion, Indian Red Cross Society's Dr. Bhalchandra Blood Bank, Latur-413512 "Second Party" and represented herein by its Blood Transfusion officer (hereinafter referred to as "Second Party", company which expression, unless excluded by or repugnant to the subject or context shall include its successors – in-office, administrators and assigns).

(First Party and Second Party are herein after jointly referred to as 'Parties' and individually as 'Party')

As per Mutual consents the MOU is for Ten years (01/01/2016 to 31/12/2025)

1. About Blood Bank:

Blood bank of **Dr. Bhalchandra Blood Bank**, **Latur** was established in 1983. It is licensed blood bank that works under the guidelines of food and drug administration, State blood Transfusion Council.

2. Objectives:

- a) To, introduce students to blood bank and work done in blood bank
- b) To provide knowledge to students regarding Blood Bank.
- c) To increase blood related practical knowledge with Blood donation camp.
- d) To promote awareness about blood donation among students teachers and community.
- e) To organize blood donation drive in the community involving students.

3. Technical areas:

- a) Donor Selection
- b) Information about blood bank
- c) Component Separation
- d) Testing for transfusion Transmitted diseases
- e) Blood Grouping
- f) Cross matching and Issues of Blood units

4. Proposed mode of collaboration:

Dayanand College of Pharmacy, Latur and Dr. Bhalchandra blood bank collaboration through the Cooperation and Promotion.

5. Terms and conditions:

Dayanand College of Pharmacy, Latur and Dr. Bhalchandra blood bank give consent for though the following points.

- a) To take blood donation camp in the college and also with the associated village or programs.
- b) To visit advice by teachers to students to the Dr. Bhalchandra blood bank.
- c) This MOU may be amended, renewed and terminated by mutual written agreement of the institute at any time.
- d) Either college or blood bank has right to terminate this MOU upto 60 days with prior written notice to the other institute.

6. Confidentiality:

Dayanand College of Pharmacy, Latur and Dr. Bhalchandra blood bank agree to hold in confidence all information data designed by the institute as being confidential which is obtained from either institute or created during the performance of the MOU and will not be disclose same to any third party without written consent of other institute.

7. Duration of MOU

This MOU unless extended by mutual written consent of the institutes shall expire in ten years 01/01/2016 to 31/12/2025.

8. Signed in Duplicate:

This MOU is executing in duplicate with each copy being an official version. The Dayanand College of Pharmacy, Latur and Dr. Bhalchandra blood bank acting by their duties. An authorized officer has caused this Memorandum of Understanding. This MOU to be executed effectively as mention in this format.

Date:

Place:

Dayanand Education Society's Dayanand College of Pharmacy,

Latur, MS Pin - 413531

Dr. Kranti Satpute, Principal

Dayanand College Of Pharmacy

LATUR

Witness 1:

Name: Dr. Chans W. N.

Designation: Associate Professor

Contact Details: 7507700786

Sign

Witness 3:

Name: GoPal V. Lohiya

Designation:
Assistant professor
Contact Details:

9850564403

For

Indian Red Cross Society's Dr. Bhalchandra Blood Bank,

Latur- 413512

Blood Transfusion Officer

Witness 2:

Name: Kishor Santram Kumble

Designation: Jechical supervisor

Contact Details: 9423454830

Sign Raw

Witness 4:

Name: Subjacionshi Romantott

Designation: Technicion

Contact Details: 3420064291