## Sun Pharmaceutical Industries Ltd.

A-7/A-8, M.I.D.C Industrial Area,

Ahmednagar - 414 111, Maharashtra, India. Tel.: (91-241) 2777329, 2777330, 2777359

Fax.: (91-241) 2777231 Website: www.sunpharma.com CIN: L24230GJ1993PLC019050



September 8, 2023

To, Ms. Ritika Sunit Singh <u>Dist. Bhandara</u>

Dear Ritika Singh,

We have pleasure to inform you that you are being engaged as an 'Apprentice' under Board of Apprenticeship Training (Government Apprentice Act, 1961) with effect from September 05, 2023 on the following terms and conditions:

- 1. During the period of training you will receive a stipend of Rs. 14000/- (Rupees Fourteen Thousand only) per month, pro-rata to attendance.
- 2. It is clearly understood that you have been taken as a 'Apprentice' and your training after the expiry of one year from 05-09-2023 to 04-09-2024 will automatically discontinue without notice and the management is not bound to accommodate you in our services after completion of training period.
- 3. It may be clearly noted by you, that the company reserves an absolute right to discontinue your training at any time during the stipulated period, without assigning any reason thereof and without notice.
- 4. You shall have to carry out such duties as are assigned to you, diligently and during such hours as may be stipulated by the management from time to time. You will be governed by the provisions of the Board of Apprenticeship Training (Government Apprentice Act, 1961). You will also be required to abide by the Company's rules and regulations as applicable to you, which are in force from time to time.
- 5. You are liable to be transferred from one department to another, from one shift to another, and you are expected to do such other work, which will be assigned to you from time to time.

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- Your training is subject to your being declared medically fit in the medical check-6. ups conducted by the company at the time of your joining and also periodically. On being found that you are unfit, your training will be terminated.
- 7. You shall communicate to the company any change in your address as well as personal status. All communications sent to you in the normal course on the address given by you shall be deemed to have been received by you.

You are requested to sign in the space provided below and return one copy as a token of your acceptance of the terms and conditions embodied herein.

Yours sincerely,

For SUN PHARMACEUTICAL INDUSTRIES LTD.,

AUTHORISED SIGNATORY

I have read the above terms and conditions. I have understood them and I hereby agree to the said terms and conditions.

(Ritika Singh)