

**Name** : **Dr.C.J. Glady Gloria Grant**  
**Qualification** : Pharm.D  
**Department** : Pharmacy Practice  
**Designation** : Assistant Professor  
**Date of Joining** : 11.03.2021  
**Area of Research** : Clinical Research



**Dr.C.J. Glady Gloria Grant, Pharm.D.,**  
**Assistant Professor**

<b>Field of Specialization</b>	Pharmacy Practice
<b>Phone No.</b>	9789456750
<b>E-Mail</b>	gladygloriagrants@gmail.com
<b>Residential Address</b>	D/O Christian Johnson, Jehovah Shammah, 8/1059 D, E.B colony, Lakshmi Nagar, Vasavi college Post, Erode - 638 316
<b>Experience</b>	1 year
<b>Blood Group</b>	O positive

**Publication details :9**

International : 3

**Project details :**

UG : 1

PG : 2

**Conference/ Workshop/ Symposium/ Seminar/FDP Attended : 3**

**Conference/ Workshop/ Symposium/ Seminar/FDP Conducted : 1**