

PHARMACY COUNCIL OF INDIA

E-mail : pcipresident@gmail.com Website : www.pci.nic.in Contact : 011-61299900/01/02/03 NBCC Centre, 3rd Floor Plot No.2, Community Centre Maa Anandamai Marg Okhla Phase I NEW DELHI - 110020

LETTER OF APPROVAL

Institute Name / Inst ID :Himalayan Institute Of Pharamacy And Research/PCI-4128 State :UTTAR PRADESH

District :LUCKNOW

Sub-District :Bakshi Ka Talab

Village/Town/City :MOHAMMADPUR SARIYA

Pin Code :227005

Sir / Madam

With reference to the subject cited above i am directed to convey the approval of PCI as per Following Details

| Course | Name of Affiliation | Decision |
|---------|---|---|
| B.Pharm | The Registrar Uttar Pradesh Technical University Institute of Engineering and Technology Campus Sitapur Road Lucknow | Approval for 2019-2020 for conduct of 1st year for 60 admissions For B.Pharm course For B.Pharm Course- It was further decided that - a. above approval is subject to submission of - i.submission of consent of affiliation of Examining Authority and NOC Approval of the State Govt. for starting of the B.Pharm course before making admission. ii.appointment of the Principal and teaching staff as per the qualification and experience prescribed under Minimum Qualification for Teachers in Pharmacy Institutions Regulations 2014 failing which no admission shall be made. b. in case the above documents are not obtained and compliance is not submitted to PCI before making admissions the above approval granted by the PCI shall be deemed to be withdrawn and the consequences thereof shall rest on the institution and PCI in no way shall be responsible for it. |

| D.Pharm | The Secretary Uttar | Approval for 2019-2020 |
|---------|------------------------|---|
| | Pradesh Board of | for conduct of 1st year for 60 admissions |
| | Technical Education | For D.Pharm course |
| | Guru Govind Singh Marg | |
| | Lucknow Uttar Pradesh | |
| | | For D.Pharm Course - It was further decided that - |
| | | a. above approval is subject to submission of - |
| | | i.consent of affiliation of Examining Authority for |
| | | starting of the above pharmacy courses before making admission. |
| | | ii.appointment of the Principal and teaching staff as |
| | | per the qualification and experience prescribed under |
| | | Minimum Qualification for Teachers in Pharmacy |
| | | Institutions Regulations 2014 failing which no |
| | | admission shall be made. |
| | | b. in case the above documents are not obtained |
| | | and compliance is not submitted to PCI before |
| | | making admissions the above approval granted by |
| | | the PCI shall be deemed to be withdrawn and the |
| | | consequences thereof shall rest on the institution and |
| | | PCI in no way shall be responsible for it. |

Date :10th June 2019

For Archna Mudgal Registrar-cum-Secretary PCI

Copy to:

i) Registrar of the University

ii) Principal of the college

iii) Secretary/Chairman of the Trust/Society

iv) Guard File (PCI)