



PHARMACY COUNCIL OF INDIA

E-mail : registrar@pci.nic.in
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

DECISION LETTER

Institute Name / Inst ID : Harish Chand College Of Pharmacy/PCI-4037

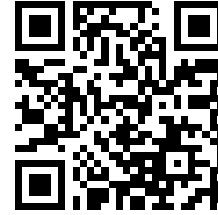
State : UTTAR PRADESH

District : GHAZIPUR

Sub-District : Jakhania

Village/Town/City : KAWALA

Pin Code : 275203



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	Approval Status
D.Pharm	The Secretary Uttar Pradesh Board of Technical Education Guru Govind Singh Marg Lucknow Uttar Pradesh	Approval for 2020-2021 for conduct of 1st year for 60 intake -Regarding D.Pharm course	Approved

Date : 10th April 2020

Archana

For Archana Mudgal
Registrar-cum-Secretary
PCI

Copy to:

- Registrar of the University
- Principal of the college
- Secretary/Chairman of the Trust/Society
- Guard File (PCI)

Note: Validity of the course details may be verified at www.pci.nic.in.