E - MAIL : registrar@pci.nic.in

WEBSITE: www.pci.nic.in

Telephone: 011-61299900

011 - 61299901, 011 - 61299902

011-61299903

**DECISION LETTER** 

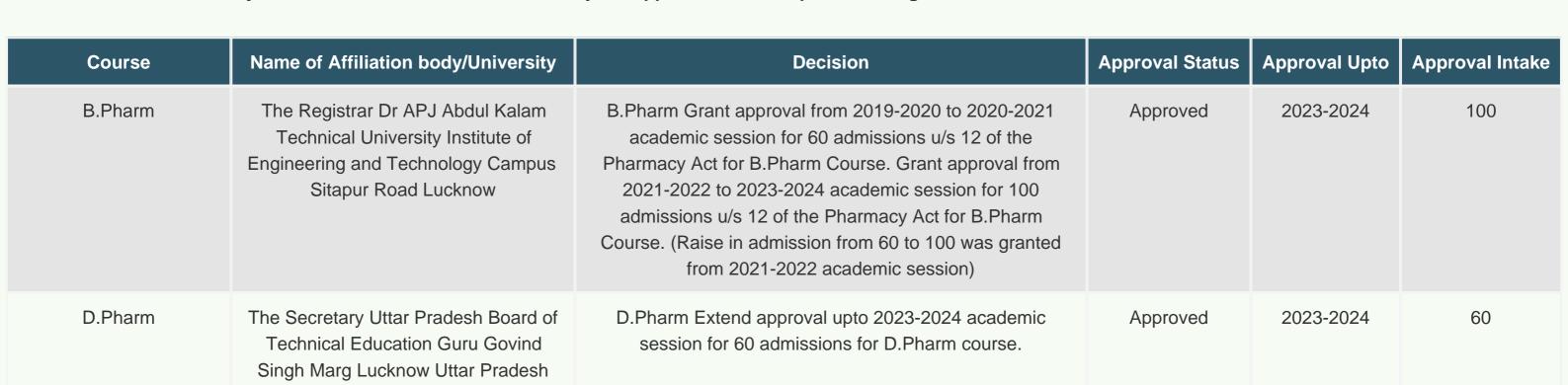
Institute Name / Inst ID S. N. College Of Pharmacy / PCI-2889

State UTTAR PRADESH

District JAUNPUR
Sub-District Jaunpur
Village/Town/City BABUPUR
Pin Code 222132

Sir / Madam

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



**Date** 17th Apr 2023

STEED STEED

**NBCC Centre, 3rd Floor** 

**Maa Anandamai Marg** 

Okhla Phase I

**NEW DELHI-**

**Plot No.2, Community Centre** 

For

(I/C) 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)

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