



PHARMACY COUNCIL OF INDIA

A Statutory body under Ministry of Health and Family Welfare
Government of India

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Maa Anandamai Marg
Okhla Phase I
NEW DELHI - 110020

DECISION LETTER

Institute Name / Inst ID **B. K. Institute Of Pharmacy / PCI-3265**
State **UTTAR PRADESH**
District **MATHURA**
Sub-District **Mat**
Village/Town/City **MAUJA BINDU BULAKI**
Pin Code **281204**



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 body/University	Decision	Approval Status	Approval Upto	Approval Intake
D.Pharm	The Secretary Uttar Pradesh Board of Technical Education Guru Govind Singh Marg Lucknow Uttar Pradesh	D.Pharm Extend approval upto 2023-2024 academic session for 60 admissions for D.Pharm course	Approved	2023-2024	60

Date **17th Apr 2023**

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