registrar@pci.nic.in E-MAIL:

WEBSITE: www.pci.nic.in Telephone: 011-61299900

011 - 61299901, 011 - 61299902

011-61299903

NBCC Centre, 3rd Floor

Plot No.2, Community Centre

Maa Anandamai Marg

Okhla Phase I

NEW DELHI - 110020

DECISION LETTER

Institute Name / Inst ID Maa Gayatri College Of Pharmacy / PCI-3660

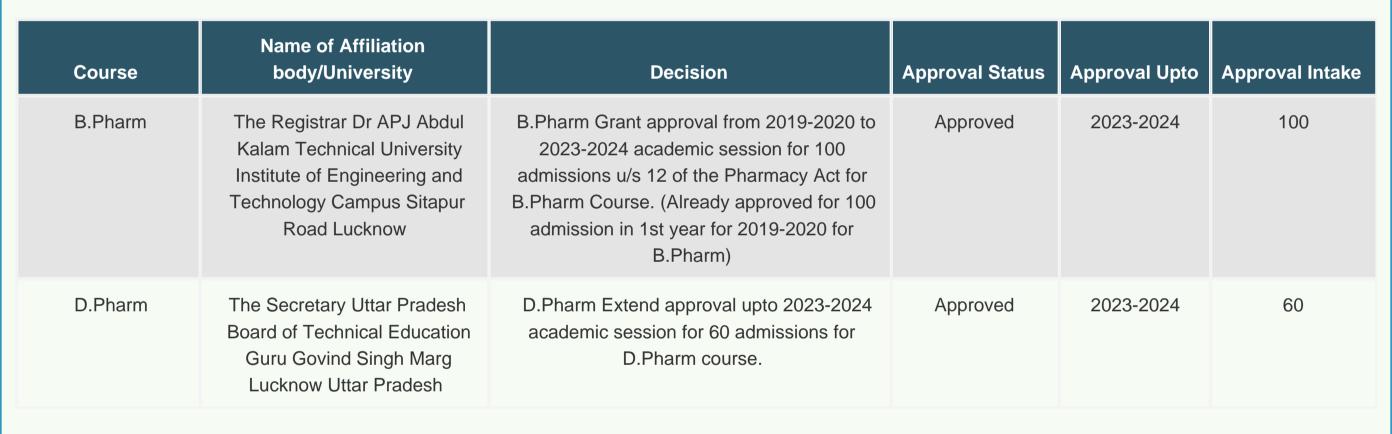
MAWAIYA

State **UTTAR PRADESH ALLAHABAD District Sub-District Allahabad**

Village/Town/City **Pin Code** 211010

Sir / Madam

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



09th May 2023 Date

Secres my

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