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## **DECISION LETTER**

Institute Name / Inst ID

Dr.V.K Verma Institute Of Medical Sciences / PCI-3883

State

**UTTAR PRADESH** 

**District** 

**BASTI** 

**Sub-District** 



Dr. V.K. Verma Institute of Medical Science

Besuaper Radhani-Basti (U.P.)

Sir / Madam

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

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

Date

04th May 2023

For

(I/C) Registrar-cum-Secretary

PCI

Copy to

i) Registrar of the University

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- 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 (http://www.pci.nic.in/)

Principal

Dr. V.K. Verma Institute of Medical Science Basuapar Bashani-Basti (U.P.)

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