



PHARMACY COUNCIL OF INDIA

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

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NEW DELHI - 110020

DECISION LETTER

Institute Name / Inst ID **Shri Ram College Of Pharmacy / PCI-2736**
State **UTTAR PRADESH**
District **MUZAFFARNAGAR**
Sub-District **Muzaffarnagar**
Village/Town/City **Muzaffarnagar**
Pin Code **251001**



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 |
|---------|---|--|-----------------|---------------|-----------------|
| B.Pharm | The Registrar Dr APJ Abdul Kalam Technical University Institute of Engineering and Technology Campus Sitapur Road Lucknow | B.Pharm Grant approval from 2019-2020 to 2020-2021 academic session for 60 u/s 12 of the Pharmacy Act for B.Pharm Course. Grant approval from 2021-2022 to 2023-2024 academic session for 100 u/s 12 of the Pharmacy Act for B.Pharm Course. | Approved | 2023-2024 | 100 |
| 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 **04th May 2023**

For
(I/C) 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