

# PHARMACY COUNCIL OF INDIA

E-mail : pcipresident@gmail.com Website : www.pci.nic.in Contact : 011-61299900/01/02/03 NBCC Centre, 3rd Floor Plot No.2, Community Centre Maa Anandamai Marg Okhla Phase I NEW DELHI - 110020

## **LETTER OF APPROVAL**

# Institute Name / Inst ID :APS COLLEGE OF PHARMACY/PCI-3522

State :UTTAR PRADESH

**District :MEERUT** 

Sub-District :Sardhana

Village/Town/City :JULEDHA

Pin Code :250342



### 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	Decision
Course D.Pharm	Name of Affiliation The Secretary Uttar Pradesh Board of Technical Education Guru Govind Singh Marg Lucknow Uttar Pradesh	Approval for 2019-2020 for conduct of 1st year for 60 admissions For D.Pharm subject to availability of labs. For D.Pharm Course - It was further decided that - a. above approval is subject to submission of - i.consent of affiliation of Examining Authority for starting of the above pharmacy courses before making admission. ii.appointment of the Principal and teaching staff as per the qualification and experience prescribed under Minimum Qualification for Teachers in Pharmacy
		<ul> <li>Institutions Regulations 2014 failing which no admission shall be made.</li> <li>b. in case the above documents are not obtained and compliance is not submitted to PCI before making admissions the above approval granted by the PCI shall be deemed to be withdrawn and the consequences thereof shall rest on the institution and PCI in no way shall be responsible for it.</li> </ul>

Date :10th June 2019

For Archna Mudgal Registrar-cum-Secretary

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PCI

Copy to:

- i) Registrar of the University
- ii) Principal of the college
- iii) Secretary/Chairman of the Trust/Society
- iv) Guard File (PCI)



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## **DECISION LETTER**

### Institute Name / Inst ID :Aps College Of Pharmacy/PCI-3522 State :UTTAR PRADESH

**District :MEERUT** 

Sub-District :Sardhana

Village/Town/City :JULEDHA

Pin Code :250342

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	Decision	Approval Status
D.Pharm	The Secretary Uttar Pradesh Board of Technical Education Guru Govind Singh Marg Lucknow Uttar Pradesh	Approved for conduct of 2nd year course for 2020-2021 for 60 intake (D.Pharm) Allowed 60 admission in 2020-2021 in 1st year (D.Pharm)	Approved

Date :10th April 2020



For Archna Mudgal Registrar-cum-Secretary PCI

Copy to:

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







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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	Decision	Approval Status
D.Pharm	The Secretary Uttar Pradesh Board of Technical Education Guru Govind Singh Marg Lucknow Uttar Pradesh	Granted approval from 2019-2020 to 2021-2022 academic session for 60 admissions u/s 12 for D.Pharm course.	Approved

Date : 17th Jul 2021

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For Archna Mudgal Registrar-cum-Secretary PCI

Copy to:

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