



1.Detail of Institute/College (A).Institute /College Ty	pe*
Polytechnic	~
(B).University Allotted Code*	
1321	
(C).Address*	
NOORPUR BIJNOR	
(D).Phone No with STD*	
8279756690	
(E).Email ID*	
jdpharmacynoorpur@gmail.com	
(F).Affiliation State*	
State	~
(G).Institute Affiliation*	
U.P Board Of Technical Education	~
2 Detail of Principal (A).Name*	
Dr Wajid ali	
(B).Email ID*	
jdpharmacynoorpur@gmail.com	
res Mabila No.*	
C).Mobile No.* 8279756690	

8279756690	
3.Detail of Nodal Officer (A).Name	
ALIMUDDIN	
(B).Designation*	
LECTURAR	
(C).Email ID	
dpharmacynoorpur@gmail.com	
(D).Mobile No*	
8439907864	
(E).Phone no With STD Code*	
8439907864	
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C-1321	
4.Affiliation Detail (A).Affiliation Date (dd/mm/yyyy)*	
09/08/2021	
B).Affiliation Letter No*	
3537	
C).मान्यता का प्रकार*	
अस्यायी	~
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(D).NAAC/NBA ग्रेडिंग से सम्बंधित जारी पत्र / प्रमाण पत्र की	
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