



Institute/College Profile Entry (2022-23)

1. Detail of Institute/College (A) Institute /College Type*

Technical College

(B) University Allotted Code*

4832

(C) Address*

VILL GANAM POST AYAR VARANASI 221202

(D) Phone No with STD*

9216420161

(E) Email ID*

shwetaep@gmail.com

(F) Affiliation State*

State

(G) Institute Affiliation*

U.P. Board Of Technical Education

2. Detail of Principal (A) Name*

PROF RAJEEV SHUKLA

(B) Email ID*

shwetaep@gmail.com

(C) Mobile No.*

013824039

(D) Phone no With STD Code*

Director
 Government Higher Education &
 Technical College of Prayagraj
 Varanasi

823420767

3.Detail of Nodal Officer (A) Name

PROF RAJEEV SHUKLA

(B) Designation*

PROFESSOR

(C) Email ID

shukla_rj@gmail.com

(D) Mobile No*

8336924995

(E) Phone no With STD Code*

823420767

4.Disc / Alupa CODE:-

C-4731

4.Affiliation Detail (A).Affiliation Date (dd/mm/yyyy)*

30/06/2022

(B).Affiliation Letter No*

BTEAffiliation20227817

(C).RT/QT/RI/WT*


33000

(D).Date of Affiliation valid upto (dd/mm/yyyy)*

30/06/2022

(D).Upload Affiliation Letter(In pdf)

(PDF File Size should be less than 500kb)

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Director
Uttarakhand Higher Education &
Technical College of Pharmacy
Varanasi

(A) क्या आपका विश्वविद्यालय/विद्यालय अथवा NAAC/NBA से संबंधित है :-*

Select



(B) NAAC / NBA

है :-*

NAAC



(C) संबंधित जिला

का :-*

(D) NAAC/NBA संबंधित से सम्बंधित जमी या / समतल पर की छवियां :-*

(E) NAAC/NBA संबंधित से सम्बंधित जमी या / समतल पर स्थिति (admin/yyyy) :-*

(F) संबंधित विश्वविद्यालय / विद्यालय अथवा से NAAC / NBA से संबंधित से सम्बंधित जमी या / समतल पर के स्थिति की छवियां (प्रमाणित छवियां) (admin/yyyy) :-*

(G) NAAC/NBA संबंधित से सम्बंधित जमी या / समतल पर (in pdf)
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Record Updated Successfully.


Director
Uttarakhand Higher Education &
Technical College of Pharmacy
Varanasi

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