



PHARMACY COUNCIL OF INDIA

E-mail : pcipresident@gmail.com

NBCC Centre, 3rd Floor Plot No.2, Community Centre

Website : www.pci.nic.in

Maa Anandamai Marg Okhla Phase I

Contact : 011-61299900/01/02/03

NEW DELHI - 110020

LETTER OF APPROVAL

Institute Name / Inst ID : School of Pharmacy Dr APJ Abdul Kalam University Indore Dewas Bypass Road Arandia Indore/PCI-3119

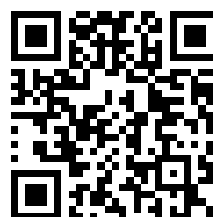
State : MADHYA PRADESH

District : INDORE

Sub-District : Indore

Village/Town/City : Arandia

Pin Code : 452016



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
B.Pharm	The Registrar Dr A P J Abdul Kalam University Indore Dewas Bypass Arandia Indore Madhya Pradesh	Extension of approval upto 2020-2021 for 60 intake (B.Pharm)
D.Pharm	The Registrar Dr A P J Abdul Kalam University Indore Dewas Bypass Arandia Indore Madhya Pradesh	Extension of approval upto 2020-2021 for 60 intake (D.Pharm)
M.Pharm Pharmaceutics	The Registrar Dr A P J Abdul Kalam University Indore Dewas Bypass Arandia Indore Madhya Pradesh	Earlier decision is reiterated
M.Pharm Pharmaceutical Quality Assurance	The Registrar Dr A P J Abdul Kalam University Indore Dewas Bypass Arandia Indore Madhya Pradesh	Earlier decision is reiterated

Date :10th June 2019

ANIL
MITTA

For Archana Mudgal
Registrar-cum-Secretary
PCI

Copy to:

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