

## 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 :Deptt Of Pharmaceutical Technology Jis University 81 Nilgunj Road

Agarparakolkata 109 033/PCI-502

**State:WEST BENGAL** 

**District: KOLKATA** 

**Sub-District:** 

Village/Town/City:

Pin Code :700109

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 JIS University Kolkata	Approved for conduct of 4th year course for 2019- 2020 and raise in intake from 60 to 100 from 2019-2020 (B.Pharm) Allowed 100 admission in 2019-2020 in 1st year (B.Pharm). Also to inspect
D.Pharm	The Registrar JIS University Kolkata	Approved for conduct of 2nd year course for 2019- 2020 for 60 intake (D.Pharm) Allowed 60 admission in 2019-2020 in 1st year (D.Pharm). Also to inspect

Date :10th June 2019

ANIL

For Archna Mudgal Registrar-cum-Secretary

**PCI** 

## Copy to:

- i) Registrar of the University
- ii) Principal of the college
- iii) Secretary/Chairman of the Trust/Society

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iv) Guard File (PCI)

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