

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

I DEPOSIT OF A DDD ON A I

LETTER OF APPROVAL

Institute Name / Inst ID :Chilkur Balaji College of Pharmacy R V S Nagar Aziz Nagar Post

Moinabad Road Near AP Police Academy Hyderabad Andhra Pradesh/PCI-335

State: TELANGANA

District: RANGA REDDY

Sub-District: Moinabad

Village/Town/City: AZIZ NAGAR

Pin Code :500075

Sir / Madam

With reference to the subject cited above i am directed to convey the approval of PCI as per Following Details

Details		
Course	Name of Affiliation	Decision
M.Pharm Pharmaceutical Analysis	The RegistrarJawaharlal Nehru Technological University Kukatpally Hyderabad	M.Pharm Pharmaceutical Analysis -12 seats
M.Pharm Pharmaceutics	The RegistrarJawaharlal Nehru Technological University Kukatpally Hyderabad	M.Pharm Pharmaceutics -15 seats
Pharm.D	The RegistrarJawaharlal Nehru Technological University Kukatpally Hyderabad	Approved for conduct of 6th year course for 2019-2020 for 30 intake (Pharm.D) Allowed 30 admission in 2019-2020 in 1st year (Pharm.D).
B.Pharm	The RegistrarJawaharlal Nehru Technological University Kukatpally Hyderabad	Extension of approval upto 2020-2021 for 60 intake (B.Pharm

Date :10th June 2019



For Archna Mudgal Registrar-cum-Secretary

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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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