



## 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 : Paravara Rural Education Society College Of Pharmacy For Women  
Chincholi Tal Sinnar Distt Nashik/PCI-1542**

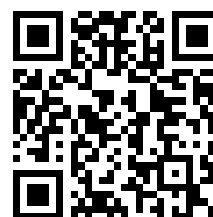
**State : MAHARASHTRA**

**District : NASHIK**

**Sub-District : Sinnar**

**Village/Town/City :**

**Pin Code : 422103**



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 Savitribai Phule Pune University Ganeshkhind Road Pune	Extension of approval upto 2019-2020 for 60 intake (B.Pharm)
M.Pharm Pharmaceutical Quality Assurance	The Registrar Savitribai Phule Pune University Ganeshkhind Road Pune	Earlier decision is reiterated

Date : 10th June 2019

ANIL  
MITTAL

For Archana Mudgal  
Registrar-cum-Secretary  
PCI

Copy to:

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