



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 : Devsthal Vidyapeeth Institute of Pharmacy Kachhi Khamaria Lalpur US Nagar/PCI-510

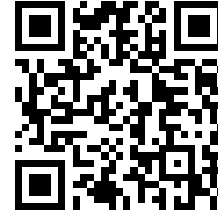
State : UTTARAKHAND

District : UDAM SINGH NAGAR

Sub-District : Rudrapur

Village/Town/City : LALPUR

Pin Code : 263148



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
D.Pharm	The Secretary Uttarnchal Board of Technical Education Civil Lines Opp Shiv Mandir Roorkee Haridwar U K	Extension of approval from 2016-2017 to 2019-2020 for 60 intake (D.Pharm)

Date : 10th June 2019

Archana

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)