



## PHARMACY COUNCIL OF INDIA

E-mail : registrar@pci.nic.in

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

### DECISION LETTER

**Institute Name / Inst ID : University College Of Pharmacy Guru Kashi University Sardulgarh Road Talwandi Sabo Bathinda/PCI-3220**

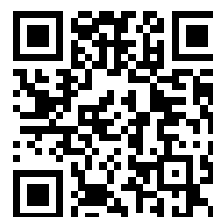
**State : PUNJAB**

**District : BATHINDA**

**Sub-District : Talwandi Sabo**

**Village/Town/City : Fatehgarh Naubadh**

**Pin Code : 151302**



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	Approval Status
B.Pharm	The Registrar Guru Kashi University Sardulgarh Road Talwandi Sabo Bathinda	Approved for conduct of 4th year course for 2020-2021 for 60 intake (B.Pharm) Allowed 60 admission in 2020-2021 in 1st year (B.Pharm)	Approved
D.Pharm	The Registrar Guru Kashi University Sardulgarh Road Talwandi Sabo Bathinda	Extension upto 2020-2021 for 60 admissions (D.Pharm)	Approved

Date : 10th April 2020

Archi  
M. T. Tal

For Archana Mudgal  
Registrar-cum-Secretary  
PCI

Copy to:

- Registrar of the University
- Principal of the college
- Secretary/Chairman of the Trust/Society

iv) Guard File (PCI)

Note: Validity of the course details may be verified at [www.pci.nic.in](http://www.pci.nic.in).