Sir / Madam

With reference to the subject cited above, I am directed to convey the approval of PCI as per the following details:

Date: 18th May 2021

Institute Name / Inst ID: School Of Pharmaceutical Sciences / PCI-3161
State: Meghalaya
District: RIBHOI

### Course

<table>
<thead>
<tr>
<th>Course</th>
<th>Name of Affiliation</th>
<th>Decision</th>
<th>Approval Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.Pharm</td>
<td>The Controller of Examination University of Science and Technology Meghalaya</td>
<td>349 EC (27.6.2021) Decision The latest information on record including appeal was placed and considered. B.Pharm Granted approval for 2021-2022 academic session for conduct of B.Pharm course for 3rd year for 100 admissions. Allowed 100 admissions in 2021-2022 in 1st year (B.Pharm). (Already approved for 100 admission in 1st year)</td>
<td>Approved</td>
</tr>
<tr>
<td>D.Pharm</td>
<td>The Controller of Examination University of Science and Technology Meghalaya</td>
<td>349 EC (27.6.2021) Decision The latest information on record including appeal was placed and considered. D.Pharm Granted approval for 2021-2022 academic session for conduct of 2nd year for 60 admissions for D.Pharm course. Allowed 60 admissions in 2021-2022 in 1st year (D.Pharm).</td>
<td>Approved</td>
</tr>
</tbody>
</table>

E-mail: registrar@pci.nic.in
Website: www.pci.nic.in
Contact: 011-61299900/01/02/03

NEW DELHI - 110020

For Archna Mudgal
Copy to:
i) Registrar of the University
ii) Principal of the college
iii) Secretary/Chairman of the Trust/Society
iv) Guard File (PCI)

Note: Validity of the course details may be verified at www.pci.nic.in.