



PHARMACY COUNCIL OF INDIA

A Statutory body under Ministry of Health and Family Welfare
Government of India

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DECISION LETTER

Institute Name / Inst ID **Deptt Of Pharmaceutical Sciences Mohanlal Sukhadia University Udaipur / PCI-481**
State **RAJASTHAN**
District **UDAIPUR**
Sub-District **Girwa**
Village/Town/City
Pin Code **313001**



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 body/University	Decision	Approval Status	Approval Upto	Approval Intake
B.Pharm	The Registrar Mohanlal Sukhadia University UDAIPUR	Ref: Item No.4 of 391 EC (5.3.2023) Item No.7 of 392 EC (21.3.2023) B.Pharm Extend approval upto 2025-2026 academic session for B.Pharm course for 40 admissions	Approved	2025-2026	40
M.Pharm Pharmaceutics	The Registrar Mohanlal Sukhadia University UDAIPUR	Ref: Item No.4 of 391 EC (5.3.2023) Item No.7 of 392 EC (21.3.2023) M.Pharm M.Pharm (Pharmaceutics) 12	Approved	2025-2026	12

Date **17th Apr 2023**

For
(I/C) Registrar-cum-Secretary
PCI

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