Sir / Madam

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

Institute Name / Inst ID: Instt Of Pharmacy And Technology Salipur P O Salipur Distt Cuttack/PCI-943
State: ODISHA
District: CUTTACK
Sub-District: Salepur
Village/Town/City: Balisahi
Pin Code: 754202

The details of the courses and their approval status are as follows:

<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 Registrar Biju Patnaik University of Technology Rourkela</td>
<td>B.Pharm course is already approved upto 2022-2023 academic session for 100 admissions.</td>
<td>Approved</td>
</tr>
<tr>
<td>D.Pharm</td>
<td>The Member Secretary Orissa State Board of Pharmacy Directorate of Drugs Control Building P O Mancheswar Railwa y Colony Bhubaneswar</td>
<td>D.Pharm course is already approved upto 2022-2023 academic session for 60 admissions.</td>
<td>Approved</td>
</tr>
<tr>
<td>M.Pharm</td>
<td>The Registrar Biju Patnaik University of Technology Rourkela</td>
<td>M.Pharm (Pharmaceutics)-15</td>
<td>Approved</td>
</tr>
<tr>
<td>Pharmaceutics</td>
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<tr>
<td>M.Pharm</td>
<td>The Registrar Biju Patnaik University of Technology Rourkela</td>
<td>M.Pharm (Pharmaceutical Chemistry)-15</td>
<td>Approved</td>
</tr>
<tr>
<td>Pharmaceutical Chemistry</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Date: 19th Aug 2021

For Archna Mudgal
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.

M.Pharm
Pharmaceutical Analysis

The Registrar Biju Patnaik University of Technology Rourkela

M.Pharm (Pharmaceutical Analysis & Quality Assurance) - 15

Approved