



## PHARMACY COUNCIL OF INDIA

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

NBCC Centre, 3rd Floor Plot No.2, Community Centre  
Maa Anandamai Marg Okhla Phase I  
NEW DELHI - 110020

### DECISION LETTER

**Institute Name / Inst ID :Anand College Of Education/PCI-3141**

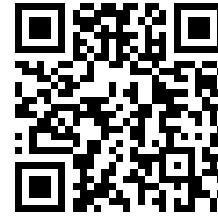
**State :WEST BENGAL**

**District :MEDINIPUR WEST**

**Sub-District :Debra**

**Village/Town/City :KABILPUR**

**Pin Code :721126**



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 Controller of Examination Maulana Abul Kalam Azad University of Technology BF Salt Lake City II Kolkata	Approval for 2020-2021 for conduct of 2nd year for 60 intake for B.Pharm Course Allowed 60 admission in 2020-2021 in 1st year	Approved
D.Pharm	The Secretary West Bengal State Council of Technical Education Kolkata Karigori Floor S N Banerjee Road Kolkata	Approval for 2020-2021 for conduct of 2nd year for 60 intake for D.Pharm Course Allowed 60 admission in 2020-2021 in 1st year	Approved

Date :10th April 2020

Archana  
Mudgal

For Archana 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](http://www.pci.nic.in).