

भारतीय भेषजी परिषद्

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय के अंतर्गत सांविधिक निकाय)

भारत सरकार

आई-300, तीसरी मंजिल, टावर-1, वर्ल्ड ट्रेड सेंटर,

नौरोजी नगर, नई दिल्ली-110029

टेलीफोन नंबर 011-65218900-01

E-mail: registrar@pci.nic.in



कामये दुःखतप्तानाम् प्राणिनामार्तिनाशनम्

PHARMACY COUNCIL OF INDIA
(Statutory body under Ministry of Health & Family Welfare)

Government of India

I-300, 3rd floor, Tower-I, World Trade Centre,

Nauroji Nagar, New Delhi-110029

Telephone No. 011-65218900-01

E-mail: registrar@pci.nic.in

DECISION LETTER

Institute Name/Inst ID **Jakir Hossain Institute Of Pharmacy Vill And P O Miapur Dist Murshidabad / PCI-986**
State **WEST BENGAL**
District **-**
Village/Town/City **MIAPUR**
Pin Code **742235**

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 Up to / Academic Session | Intake |
|---------|---|--|-----------------|-----------------------------------|--------|
| D.Pharm | West Bengal state council of technical and vocational education and skill development | 428 EC (04.08.2025) under item no.10 decided as under- D.Pharm Extend approval upto 2025-2026 academic session for 60 admissions for D.Pharm course. The above approval is granted subject to inspection throughout the year. Further, the institution shall register the details of teaching faculty on AEBAS portal within a period of 3 months. | Approved | 2025-2026 | 60 |
| B.Pharm | The Controller of Examination Maulana Abul Kalam Azad University of Technology BF Salt Lake City II Kolkata | 428 EC (04.08.2025) under item no.10 decided as under- B.Pharm Extend approval upto 2025-2026 academic session for 60 admissions for B.Pharm course. The above approval is granted subject to inspection throughout the year. Further, the institution shall register the details of teaching faculty on AEBAS portal within a period of 3 months. | Approved | 2025-2026 | 60 |

Communication Date: **14 Aug 2025**

Copy to

- Registrar of the University
- Principal of the college
- Secretary/Chairman of the Trust/Society
- Guard File (PCI)

For
Registrar-cum-Secretary
PCI

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