



## PHARMACY COUNCIL OF INDIA

E-mail : pcipresident@gmail.com

NBCC Centre, 3rd Floor Plot No.2, Community Centre

Website : www.pci.nic.in

Maa Anandamai Marg Okhla Phase I

Contact : 011-61299900/01/02/03

NEW DELHI - 110020

### LETTER OF APPROVAL

**Institute Name / Inst ID :** Shree Rishikesh Shikshan Prasarak Mandal Navi Mumbai Shree D D Vispute College of Pharmacy and Research Centre Gut Devad Vichumbe Adjacent to Mumbai Pune express Highway New Panvel Dist Raigad/PCI-2081

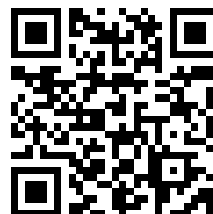
**State :** MAHARASHTRA

**District :** RAIGAD

**Sub-District :** Panvel

**Village/Town/City :** Devad

**Pin Code :** 410206



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
B.Pharm	The Registrar University of Mumbai Kalina Santacruz E Fort Mumbai	Extension of approval upto 2019-2020 for 100 intake (B.Pharm). Also to inspect
M.Pharm Pharmaceutics	The Registrar University of Mumbai Kalina Santacruz E Fort Mumbai	Earlier decision is reiterated
M.Pharm Pharmaceutical Quality Assurance	The Registrar University of Mumbai Kalina Santacruz E Fort Mumbai	Earlier decision is reiterated

Date : 10th June 2019

ANIL  
MITAL

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)