DECISION LETTER

Institute Name/Inst ID	**Vijayrao Naik College Of Pharmacy / PCI-4036**
State	**MAHARASHTRA**
District	**-**
Village/Town/City	**Shirval**
Pin Code	**416620**

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	D Pharmacy-MSBTE Mumbai, B Pharm- DBATU, Lonere Raigad	428th EC (4.8.2025) 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 4the details of teaching faculty on AEBAS portal within a period of 3 months.	Approved	2025-2026	60
B.Pharm	B.PHARM - Dr. BABASAHEB AMBEDKAR TECHNOLOGICAL UNIVERSITY, LONERE, (DBATU)	428th EC (4.8.2025) under item no. 10 decided as under :- B.Pharm Extend approval upto 2025-2026 academic session for 100 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	100

Communication Date: 16 Aug 2025

For
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 pci.gov.in