APPROVAL PROCESS 2019-20

Application Report Part-2

Permanent Institute Id	1-2855645161
Current Application No.	1-4260820089
Application No. of 2018-2019	1-3512636208
AICTE File No.	1-3512636208
Application Type	Extension-Expansion-Closure
Organization Registration No.	13

Principal/Director/Registrar

Surname	ARORA	**First Name**	VIMAL
Father's Name	MANOHAR LAL	**Date of Birth**	25/01/1980
Doctorate Degree	Yes	**Field of Specialization**	QUALITY ASSURANCE
Master's Degree	M PHARMACY	**Bachelor Degree**	B PHARMACY
Other Qualifications		**Date of Joining the Institute as head**	30/01/2018
Appointment Type	Regular	**Exact Designation**	Principal

Experience (T-R-I)	**Teaching**	**Research**	**Industry**
	14	10	0

Faculty Counts

Total No. of Faculty	13

No. of Teaching faculty approved by University/Government?	0

Faculty Details

*Faculty Details available as on AICTE Web Portal

Sr . No.	Faculty ID	Programme	Course	Faculty Type	FT/PT	First Name	Surname	Exact Designation	Date of Joining the Institute	Appointment Type	Doctorate	Master's Degree	Bachelor 's Degree	Other Qualification	Aadhar Card	PAN Card	Total Gross Salary for the Last Financial Year	Pay Scale

Application Report - Part 2

1	1-359 516 288 2	PHARMACY	PHARMACOL OGY		FT	AARTI	MAN CHA NDA	ASST PROFE SSOR	09/08/2017	Regular	N	M PHA RMA	B. PHAR MACY	NA		CZJP M793 7C	15600	V It h P a y S c a l e
2	1-376 355 288 2	PHARMACY	QUALITY ASSURANCE		FT	VIMAL	ARO RA	PRINCI PAL	30/01/2018	Regular	Y	M-PHA RMA CY	B-PHAR MACY	NIL		AJBP A306 7B	138000	V It h P a y S c a l e
3	1-377 963 008 0	PHARMACY	FIRST YEAR/OTHER		FT	HONEY	ATT RI	ASST PROFE SSOR	14/08/2017	Regular	N	MA (ENG LISH)	BA	NIL		APBP A041 7M	0	V t h P a y s c a l e

Application Status: **Submitted**
Application Sub-Status: Payment Received

4	1-452 982 721 5	PHARMACY	PHARMACY		FT	SWEETY	BIRL A	ASST PROFE SSOR	13/08/201 8	Regular	N	M.PH ARM	B.PH ARMA CY	NIL		CEU PB40 60D	21600	VIth Pay Scale
5	1-452 994 940 3	PHARMACY	PHARMACEUT ICS		FT	SARIKA	PUN DIR	ASST PROFE SSOR	03/01/201 9	Regular	N	M.PH ARM	B.PH ARMA CY	NIL		BRG PP53 22Q	0	VIth Pay Scale
6	1-456 392 838 9	PHARMACY	PHARMACY		FT	KANCHAN	DEV I	ASST PROFE SSOR	03/01/201 9	Regular	N	M.PH ARM ACY	B.PH ARMA CY	NIL		EKC PK12 07D	0	VIth Pay Scale

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

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7	1-456741 9757	PHARMACY	PHARMACEUT ICAL TECHNOLOGY		FT	MUKUL	KAU SHI K	ASST PROFE SSOR	03/01/201 9	Regular	N	M.PH ARM ACY	B.PH ARMA CY			AOS PK66 80C	0	V I t h P a y S c a l e
8	1-467243 6768	PHARMACY	PHARMACEUT ICAL CHEMISTRY		FT	PRIYA	CHA NDE L	ASST PROFE SSOR	03/01/201 9	Regular	N	M. PHA RMA CY	B. PHAR MACY	NA		APH PC14 28A	0	V I t h P a y S c a l e
9	1-470910 2749	PHARMACY	PHARMACOL OGY AND TOXICOLOGY		FT	KASHISH	SHA RMA	ASST PROFE SSOR	16/07/201 8	Regular	N	M.PH ARM ACY	B.PH ARMA CY	NIL		HDB PK85 99H	0	V I t h P a y S c a l e

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Printed By : aict00731

Application Report - Part 2

Application Status: **Submitted**
Application Sub-Status: **Payment Received**

10	1-471 247 615 4	PHARMACY	FIRST YEAR/OTHER		FT	BHUPINDER	KAUR	LECTURER	03/01/2019	Regular	N	NIL	B.TECH	NIL		BPS MK4544G	0	Consolidated
11	1-472 068 972 4	PHARMACY	FIRST YEAR/OTHER		FT	POOJA	DHIMAN	LECTURER	03/01/2019	Regular	N	M.SC. MATHS	B.SC. MATHS			CDR PP8014M	0	Consolidated
12	1-473 181 890 4	PHARMACY	PHARMACY (HERBAL DRUG TECHNOLOGY)		FT	RAM	KUMAR	LECTURER	01/09/2017	Regular	N	NA	B.PHARMACY			FPIP K4544D	149750	Consolidated

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

Application Status: **Submitted**
Application Sub-Status: Payment Received

| 13 | 1-503 382 100 7 | PHARMACY | PHARMACOG NOSY AND PHYTOCHEMI STRY | | FT | ANKIT | KUM AR | ASST PROFE SSOR | 30/01/201 9 | Regular | N | M. PHA RM. | B. PHAR M. | NIL | | CHC PK29 61H | 0 | VI th P a y S c a l e |

Adjunct Faculty/Resource Person from Industry Details

Sr. No.	Faculty ID	Type	First Name	Surname	Programme	Course
1	1-3779111959	Resource Person From Industry	ANAND	SACHDEVA	PHARMACY	PHARMACEUTICAL TECHNOLOGY

Technical Staff

Sr. No.	Technical Staff Id	Program	Course	Level	First Name	Surname	Date of joining the Institute	Master Degree	Bachelor Degree	Diploma	Other Qualification
1	1-3747371313	PHARMACY	PHARMACY	UNDER GRADUATE	RAM	KUMAR	12/09/2017		B-PHARMA CY		
2	1-3763622558	PHARMACY	PHARMACY	DIPLOMA	SANDEE P	KUMAR	09/11/2017				10TH
3	1-3763653232	PHARMACY	PHARMACY	UNDER GRADUATE	RANI	DEVI	05/07/2017				10TH
4	1-3763653238	PHARMACY	PHARMACY	UNDER GRADUATE	LAKHWI NDER	SINGH	09/09/2017				10TH

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Printed By : aict00731

Application Report - Part 2

Application Status: **Submitted**
Application Sub-Status: Payment Received

5	1-3763714092	PHARMACY	PHARMACY	UNDER GRADUATE	GULSHAN	KUMAR	10/05/2017				10TH

Admin & Library Staff

Sr. No.	Staff Id	First Name	Last Name	Date of joining the Institute	Master Degree	Bachelor Degree	Diploma	Other Qualification
1	1-3763714097	JYOTI	RANI	12/05/2017		BACHELOR OF ARTS		
2	1-3763772721	NEETU	RANI	24/07/2017	M. LIB.	LIBRARY SCIENCE	LIBRARY SCIENCE	

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

Printed By : aict00731

DECLARATION
BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTE/UNIVERSITY DEPARTMENT

I, as the Head of the Institution, hereby declare that:

a) I have carefully gone through the AICTE Regulations Notification dated on 30th November, 2016, published in the Gazette of India - Extraordinary Part III, Section- 4 and its amendment 05th December 2017 also the various provisions mentioned in the Approval Process Hand Book 2019-20.

b) I am fully aware of the data uploaded by me in respect of my institute on the web portal.

c) I am aware that there is no provision for correction of data, alteration of data, subsequent editing and appeal etc. for the online application once uploaded on the web portal.

d) I am also aware that application for seeking Extension of Approval(EOA), Increase/Reduction of intake, Addition of new courses, Change of site, Closure of course, Supernumerary Seats under PIO/FN/Gulf quota Approval status/OCI, NRI, Change of name, and Conversion of women institute into Co-ed institute and vice versa (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2019-20.

e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my institute on the portal.

f) I am also aware that Institute is eligible for grant of
Extension of Approval to the Existing Institutions,
Extended EoA(if Applicable as per APH 2019-20),
only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2019-20.

Signature of Principal/Director/Registrar

Name :

Seal/Stamp of the Institute/University Department

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

APPROVAL PROCESS 2019-20

Application Report Part-1

1. **Guidelines on submission of documents along with print copy of application/s for New Institute/University Department (Refer annexure 16)**

Ensure that all copies are in A4 size only (Land documents/building drawing may be up to A0 sizes). Also, ensure that all copies are attested.

Refer **Documents for Approval Process 2019-20 (Annexure 16 & 17)** uploaded on AICTE Website.

Please number all copies of documents as given below:

Your Regional office code	Your Application Id	Annexure Number	Sr. No. as in Annexure 16	Page Number (3 digits)

E.g. consider numbering an affidavit (comprising of 2 pages), which is sr. no. 2 in annexure 16,

WRO	1-11234567	16.1	02	001
WRO	1-11234567	16.1	02	002

The number so generated WRO**1-11234567**16.1**00**2**001** should be written on top of each page with bold pen as shown below

W	R	O	1	-	1	1	2	3	4	5	6	7	1	6	.	1	0	0	2	0	0	1

Note: Please do not bind or staple, as all pages are going to be scanned. All pages should be knotted on the left hand top corner. This set of knotted documents should be submitted.

Provide index page on top of set of documents as follows,

Region - WRO		Application ID : 1-11234567		
Annexure No.	**Sr No.as in Annexure 17 (2 digits)of documents which are being submitted now**	**Page No. (3 digits)**		
		From	**To**	
16.10	02	001	002	
16.10	03	001	005	

2. **Guidelines on submission of documents along with print copy of application/s for Approvals of Existing Institutes (Refer annexure 17)**

- Extension of Approval to the existing Institutions/ Continuation of approval after a break in the preceding Academic Year/ Restoration.
- Extended EoA
- Increase in Intake/ Additional Course(s)
- Addition of Integrated/ Dual Degree Course
- To Start Diploma in Degree Pharmacy Institutions and vice-versa
- Conversion of Management Institutions running PGDM Course into MBA Course
- Conversion of Second Shift Course(s) into First Shift Course(s)
- Introduction of Fellowship Programme in Management
- Introduction of Supernumerary Seats for Foreign Nationals/ Overseas Citizen of India (OCI)/ Persons of Indian Origin (PIO)/ Children of Indian Workers in Gulf Countries
- Introduction of seats for Non Resident Indian(s)
- Change in name of the Course(s)/ Reduction in Intake/ Closure of Programme(s) and/ or Course(s)
- Change in name of the Institution or Affiliating University/Board

Please number all copies of documents as given below:

Your Regional office code	Your Application Id	Annexure No.	Sr No. as in Annexure 17	Page No. (3 digits)

E.g. consider numbering an affidavit (comprising of 2 pages), which is sr. no. 2 in annexure 16,

WRO	1-11234567	17.10	02	001
WRO	1-11234567	17.10	02	002

The number so generated WRO**1-11234567**17.1**00**2**001** should be written on top of each page with bold pen as shown below

W	R	O	1	-	1	1	2	3	4	5	6	7	1	7	.	1	0	0	2	0	0	1

Please do not bind or staple, as all pages are going to be scanned. All pages should be knotted on the left hand top corner. This set of knotted documents should be submitted.

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

Application Report - Part 1

Application Status: **Submitted**
Application Sub-Status: Payment Received

Provide index page on top of set of documents as follows,

Region – WRO		Application ID : 1-11234567	
Annexure No.	Sr. No. as in annexure 18 (2 digits)of documents which are being submitted now	Page No. (3 digits)	
		From	To
17.10	02	001	002
17.10	03	001	005

Regional Office codes

Eastern	ERO		North-West	NWR		South Central	SCR		South- West	SWR
Northern	NRO		Central	CRO		Guwahati Camp Office	ERO		Southern	SRO
Western	WRO		Central Camp office Vadodra	CRO		South West Camp office	SWR			

Important Note for Payments:

   a)   Institutions which do not follow the AICTE guidelines shall be responsible for rejection/ delay in updation of their application and neither AICTE nor the Collecting Bank shall be responsible for any such consequence."

   b)   No DD / Cheque / PO to be sent to either Head Office / Regional Office of AICTE. Such payments shall not be processed and the applications are liable to be rejected.

Note: Please submit the hard copy of this Report to Regional Officer only if Application status is "Submitted" and Application Substatus is "Payment Received" / "Payment Not Applicable" – **IN CASE OF GOVT/GOVT. AIDED/ CENTRAL/STATE UNIVERSITY DEPT**

**All the Dates in the Report are in dd/mm/yyyy format.

**NA refers to Not Applicable

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

Application Status: Submitted
Application Sub-Status: Payment Received

Report Generated on :-25/02/2019

Permanent Institute Id	1-2855645161	Current Application No.	1-4260820089
Application Type	Extension-Expansion-Closure	AICTE File No.	1-3512636208
Institute Details			
Name of the Institute/University Department	UNIVERSAL INSTITUTE OF PHARMACY	Address of the Institute/University Department	LALRU HANDESSRA ROAD,VILLAGE BALLOPUR,TEHSIL DERABASSI, DISTRICT MOHALI
State/UT	Punjab	District	MOHALI
Pin	140501	AICTE Region	North-West
Town/Village	LALRU	STD code	1762
Land Phone No.	1762249700	Email	chairman.ugi@gmail.com
Cell No.	Data Not Provided by the Institute 9417777000	Alternate Email	pachairman.ugi@gmail.com
FAX No.	1762249001	Website	www.ugi.ac.in
Institute Type	Unaided - Private	Women Only Institute	No
Type Of Minority	Data Not Provided by the Institute	Name of the Minority	NA
Minority Institute	No	Minority Name, if Linguistic	NA
PAN	AAADUO118M	Primary Bank Account No.	912020062529266
Bank Name	AXIS	IFSC No.	UTIB0001638
Approval Year of First Course	2016	Date of First Approval by AICTE	30/04/2016
Questionnaire for Existing Institutes			

Sr. No.	Particulars	Details Provided by Institute
Question 1		
(i)	Do you wish to apply for "Only Extension of Approval (EOA) for 2019-20"?	Yes
Question 2		
(i)	Do you have Autonomous Status (Academic Autonomy) as conferred by the Affiliating University?	No
(ii)	Autonomy Issued Date	NA
(iii)	Autonomy Expiry Date	NA
(iv)	Autonomy Conferred by	NA
(v)	Order of Conferment	NA
Question 3		
(i)	Do you have a valid NBA Accreditation? (Course should be accredited by NBA and Validity of Accredited Courses should be on or after 10th Apr,2018)	No
(ii)	No of courses against which valid NBA Accreditation is present	0
(iii)	Do you wish to apply for University Name Change?	No
(iv)	Whether your Institute is Under Submission Scheme?	Data Not Provided by the Institute
(v)	At the time of 1st Approval where your Institute was located?	Data Not Provided by the Institute
Question 4		
(i)	Do you wish to apply for Restoration? (Applicable ONLY to the Institutes where EoA for 2017-18/2018-19 granted with Punitive Action. No Admission issued Institutes need not have to answer this question.)	No
(ii)	Do you wish to apply for Closure of Institute?	No
(iii)	Do you wish to apply for Conversion from Diploma to Degree or Vice-Versa?	Data Not Provided by the Institute
(iv)	Whether your institution wish to apply for Merger of Courses ('ENGINEERING AND TECHNOLOGY' ONLY)?	Data Not Provided by the Institute
(v)	Whether your Institution is willing to add a New Program or New Level in existing Program?	Data Not Provided by the Institute
(vi)	Whether your institution wish to add New Course at Diploma level under existing UG Pharmacy Program or Vice-Versa?	Data Not Provided by the Institute
(vii)	Whether your Institute wishes to apply for conversion from PGDM to MBA ('MANAGEMENT' ONLY)?	Data Not Provided by the Institute
(viii)	Whether your Institute wishes to apply for Change of Shift from Second to First?	Data Not Provided by the Institute
(ix)	Whether your Institute wishes to apply for Course Name Change?	Data Not Provided by the Institute
(x)	Do you wish to apply for MBA to MCA Conversion or Vice Versa?	Data Not Provided by the Institute
(xi)	Whether your Institution is willing to convert existing direct 2nd Year division in Engineering & Technology and/or MCA courses into regular courses?	Data Not Provided by the Institute
(xii)	Whether your institution is selected for Study in India Program by Govt. by India?	No
(xiii)	Whether your Institution has got affiliation from university or DTE or Board? (Applicable for Only 2018-2019 Approved New Institutes(Excluding Deemed to be (Universities))	Data Not Provided by the Institute
(xiv)	Whether your Institution is going for Merger with other Institution(s) under the same Trust/ Society/	Data Not Provided by the Institute

Date of Signature(dd/mm/yyyy) Seal of Institute Name & Signature of Director/Principal

Application Status: Submitted
Application Sub-Status: Payment Received

Report Generated on :-25/02/2019

	Company operating in the same Campus?	

Questionnaire

Sr. No.	Particulars	Details Provided by Institute
(i)	Any Unaided Course(In case of Government Aided Institute)?	Yes
(ii)	Number of teaching faculty approved by University/Government?	0
(iii)	Are all approved teaching faculty being paid as per VI pay commission?	Yes
(iv)	Are all the teaching faculty, as per AICTE qualification?	Yes
(v)	Do you wish to apply closure of Institute?	No
(vi)	Type of Institute Closure Requested?	NA
(vii)	Percentage Grant/Funds Received from Government?	0
(viii)	Whether Institute is operating from Permanent Site/Temporary Site?	Permanent Site
(ix)	Whether mandatory disclosure is uploaded in Institute's website?	Yes
(x)	Whether the Institute following ICAI(Institute of Chartered Accountants of India) Accounting Formats?	Yes
(xi)	Fees to be charged, Reservation policy, Admission policy and Document retention policy are duly approved by State Govt?	Yes
(xii)	Fees to be charged, Reservation policy, Admission policy and Document retention policy are duly approved by Affiliating Board/University?:	Yes
(xiii)	Fees to be charged, Reservation policy, Admission policy and Document retention policy are uploaded in Institute's Website?	Yes
(xiv)	Whether List of faculty along with details and other data uploaded/updated on the institute web Portal?	Yes
(xv)	Courses/Approved Intake displayed at the entrance of the Institute?	Yes
(xvi)	Is the Cafeteria shared among other Institutes?	Yes
(xvii)	Is Library and Reading Room shared among other Institutes?	No
(xviii)	Is the Computer Centre shared among other Institutes?	No

Application Details

Sr. No.	Particulars	Details Provided by Institute
(i)	Change of Institute Site	No
(ii)	Increase in Intake / Application for New Course	No
(iii)	Closure of Course / Reduction in Intake	No
(iv)	PIO/FN/Gulf quota Approval status/OCI	No
(v)	NRI	No
(vi)	Change of Name of the Institute	No
(vii)	Old Name of the Institute	NA
(viii)	New Institute Name	NA
(ix)	Conversion of Women's Institution into Co-Ed Institution	No
(x)	Conversion of Co-ed Institution into Women Institution	No
(xi)	Introducing a Twining Program with an AICTE approved Indian Institution	No
(xii)	Introduction of New/Integrated Course	No

Payment Details

Sr.No.	Payment Id	Mode of Payment	Bank Transaction Id	Transaction Id	Receipt Flag	Part Payment Amount	Total Amount	Transaction Date
1		CIB/Retail Banking(Other Bank)	393494	714968919	Y	100000	100000	11/02/2019

Details about Parent Organization(Trust/Company)

Name of the Parent organization	UNIVERSAL EDUCATIONAL SOCIETY	**Address**	#221, SEC-51 A CHANDIGARH
Town/Village	CHANDIGARH	**State/UT**	Chandigarh
District	CHANDIGARH	**Pin Code**	160047
Website	www.ugi.ac.in	**Type of the Organization**	Society
Registered with	REGISTRAR OF SOCIETY	**Registration Date**	17/04/2008

Details about Contact Person

Title	Miss	**First Name**	PRABHJOT	**Last Name**	KAUR
Address	VILL-LALRU, TEHSIL-DERABSSI, DISTRICT-MOHALI	**Town/Village**	MOHALI
State/UT	Punjab	**District**	MOHALI
Pin Code	140501	**Designation**	DIRECTOR ACADEMICS
Cell No.	9216277021	**Alternate Cell No.**	9216077008
Email	affiliations.ugi@gmail.com	**Alternate Email Address**	directoracdm@ugichd.edu.in
STD Code	1762	**Land Phone No.**	249700	**Fax No.**	1762249001

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Application Status: **Submitted**
Application Sub-Status: **Payment Received**

Report Generated on :-25/02/2019

Land Details

Location	Rural	North Eastern States/Land in Hilly Area	No
No. of pieces of Land	1	Max distance in farthest pieces	NA
Land registered with	SUB REGISTRAR DERABASSI	Land Piece Area 1 in acres	2
Land ownership details	Government Lease	Land Piece Area 2 in acres	NA
Total area in acres	2	Land Piece Area 3 in acres	NA
Land Registration Date	02/05/2009	Land Use Certificate issued by	Govt. of Punjab
Land Use Certificate date	02/05/2009	Latitude and Longitude	Latitude - 30, 28, 59 Longitude - 76, 47, 59
Mortgage Details(if any)	No	Purpose of Mortgage	No
FSI	Data Not Provided by the Institute	Build Up Area(Sqm)	Data Not Provided by the Institute
Additional land for Merger or New Program		Data Not Provided by the Institute	

Other Land Details

Sr. No.	1	Land Registration No.	4816
Date of Registration	19/06/2009	Area of Land (acres)	2
Khasra Number	686,687,688	Plot Number, Survey Number, etc	686,687,688
Land Situated At	Ballopur	Land Registered in the name Of	Universal Educational Society
Type of Ownership (Sale deed/ Gift deed/Govt/Private Lease)	Government Lease	Land Use Certificate Issued	Yes
In case of Private Lease- Name of the Leaser		Name of the Leasee	
Owner of the land (In whose name last sale deed was made)			
Land Use Certificate Issuing Authority	Govt. of Punjab	Is the Land Mortgaged	No
Details of Land If the Land is Mortgaged	Data Not Provided by the Institute	Land required at the time of First AICTE approval(In Acres)	2
Land available at the time of First AICTE approval(In Acres)		2	

Building Details

Building Status	Available	Total built up Area(Sqm) Planned	2520
Total built up Area(Sqm) ready	2520	Total Carpet Area(Sqm)-Instructional-ready	1121
Total Carpet Area(Sqm) Administrative-ready	425	Total Carpet Area (Sqm)-Amenities-ready	470
Access and Circulation Area (Sqm)	504	Activities in the building other than courses approved by AICTE	NA
Whether Toilet Area is maintained as per National Building Code (NBC) Norms?	Yes	Whether Access and Circulation Area is maintained as per National Building Code (NBC) Norms?	Yes

Funds Position for Building Construction(Rs in Lakhs)

Loans:	Data Not Provided by the Institute	Own Share:	Data Not Provided by the Institute	Funds allocated:	Data Not Provided by the Institute

Other Building Details

Sr. No.		Building No.	1	Building Name	UIP
Sanctioned Built up Area(Sqm)	2520	Constructed Built up Area (Sqm)	2520	Approved Carpet Area Instructional (Sqm)	1121
Constructed Carpet Area Instructional (Sqm)	1121	Approved Carpet Area-Administrative (Sqm)	425	Constructed Carpet Area Administrative (Sqm)	425
Approved Carpet Area-	470	Constructed Carpet Area	470	Total Area Approved	2520

Amenities(Sqm)		Amenities(Sqm)		(Sqm)	
Total Area Constructed (Sqm)	2520	**Activities Conducted in the Building**	Teaching	**Non AICTE approved courses run in the Building (If Any)**	Data Not Provided by the Institute
Name of the Building Plan Approving Authority	New India Planner	**Building Plan Approval Date**	23/11/2015	**Approval No.**	432

Programme and Courses

Sr. No.	1	Course Unique Id	**1-2855788675**	Programme	PHARMACY
Level	UNDER GRADUATE	**Course**	PHARMACY	**Shift**	1st Shift
FT/PT	FULL TIME	**Started In**	2016	**Applying For**	EoA Only
Course Duration	4	**Current Intake (2018-19)**	45	**Applied for Intake(2019-20)**	45
NRI	Not interested	**University/ Board**	Punjab Technical University, Jalandhar	**PIO / FN / Gulf Quota Approval status OCI**	Not interested
Twining Program Request		Not interested	**NBA Accreditation status (As on 10th April, 2018)**		No

Dual Degree/Integrated Course Details

Data not entered by Institute

Vocational Course Details

Sr. No.	Course Unique Id	Level	Program	Course	Approved Intake for 2018-19	Intake Applied for 2019-20	Applied for
1	1-3816581792	SKILL DIPLOMA	PHARMACY	MEDICAL IMAGING TECHNOLOGY	25		
2	1-3817024405	DIPLOMA IN VOCATION (D. VOC)	PHARMACY	MEDICAL IMAGING TECHNOLOGY	25		

Instructional Area

Sr. No.	Programme	Level	Building No.	Building Name	Room Type	Room No.	Average Carpet Area (Sqm)	Flooring	Wall & Painting	Elec & lighting	Furniture & Fixtures
1	PHARMACY	UNDER GRADUATE	1	UIP	Instrument Room	CIR	75	Ready	Ready	Ready	Ready
2	PHARMACY	UNDER GRADUATE	1	UIP	Laboratory	COMP L	100	Ready	Ready	Ready	Ready
3	PHARMACY	UNDER GRADUATE	1	UIP	Laboratory	LAB 01	80	Ready	Ready	Ready	Ready
4	PHARMACY	UNDER GRADUATE	1	UIP	Laboratory	LAB 02	85	Ready	Ready	Ready	Ready
5	PHARMACY	UNDER GRADUATE	1	UIP	Laboratory	LAB 03	80	Ready	Ready	Ready	Ready
6	PHARMACY	UNDER GRADUATE	1	UIP	Laboratory	LAB 04	80	Ready	Ready	Ready	Ready
7	PHARMACY	UNDER GRADUATE	1	UIP	Laboratory	LAB 05	85	Ready	Ready	Ready	Ready
8	PHARMACY	UNDER GRADUATE	1	UIP	Laboratory	LAB 06	80	Ready	Ready	Ready	Ready
9	PHARMACY	UNDER GRADUATE	1	UIP	Classroom	LH 01	68	Ready	Ready	Ready	Ready
10	PHARMACY	UNDER GRADUATE	1	UIP	Classroom	LH 02	68	Ready	Ready	Ready	Ready
11	PHARMACY	UNDER	1	UIP	Classroom	LH	68	Ready	Ready	Ready	Ready

12	PHARMACY	UNDER GRADUATE	1	UIP	Machine Room	MAC HINE ROO M	75	Ready	Ready	Ready	Ready
		GRADUATE				03					
13	PHARMACY	UNDER GRADUATE	1	UIP	Seminar Hall	SH 01	135	Ready	Ready	Ready	Ready
14	PHARMACY	UNDER GRADUATE	1	UIP	Tutorial Room	TR 01	35	Ready	Ready	Ready	Ready

Instructional Area Common Facilities

Sr. No.	Building No.	Building Name	Room Type	Room Id	Area (Sqm)	Flooring	Wall & Painting	Elec & lighting	Furniture & Fixtures
1	1	UIP	Computer Center	COMP	132	Ready	Ready	Ready	Ready
2	1	UIP	Library&Reading Room	LIB	150	Ready	Ready	Ready	Ready

Administrative Area

Sr. No.	Building No.	Building Name	Room Type	Room Id	Area (Sqm)	Flooring	Wall & Painting	Elec & lighting	Furniture & Fixtures
1	1	UIP	Board Room	BOARD	20	Ready	Ready	Ready	Ready
2	1	UIP	Department Office	DEPTT	20	Ready	Ready	Ready	Ready
3	1	UIP	Exam Control Office	EXAM	30	Ready	Ready	Ready	Ready
4	1	UIP	Faculty Room	FCULTY	35	Ready	Ready	Ready	Ready
5	1	UIP	Housekeeping	HKPNG	10	Ready	Ready	Ready	Ready
6	1	UIP	Cabin for Head of Dept	HOD	10	Ready	Ready	Ready	Ready
7	1	UIP	Maintenance	MAINT	10	Ready	Ready	Ready	Ready
8	1	UIP	Office All Inclusive	OFC	150	Ready	Ready	Ready	Ready
9	1	UIP	Pantry for Staff	PANTRY	10	Ready	Ready	Ready	Ready
10	1	UIP	Placement Office	PLCMT	50	Ready	Ready	Ready	Ready
11	1	UIP	Principal Directors Office	PR OFC	30	Ready	Ready	Ready	Ready
12	1	UIP	Reception Area	RCPTN	10	Ready	Ready	Ready	Ready
13	1	UIP	Security	SCURTY	10	Ready	Ready	Ready	Ready
14	1	UIP	Central Store	STORE	30	Ready	Ready	Ready	Ready

Amenities Area

Sr. No.	Building No.	Building Name	Room Type	Room Id	Area (Sqm)	Flooring	Wall & Painting	Elec & lighting	Furniture & Fixtures
1	1	UIP	Boys Common Room	B_CR	100	Ready	Ready	Ready	Ready
2	Cafe	Cafe	Cafeteria	CAFE	150	Ready	Ready	Ready	Ready
3	1	UIP	Girls Common Room	G_CR	100	Ready	Ready	Ready	Ready
4	1	UIP	First aid cum Sick Room	SICK_R	10	Ready	Ready	Ready	Ready
5	1	UIP	Stationery Store	STNRY	10	Ready	Ready	Ready	Ready

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

| 6 | 1 | UIP | Toilet | TOILET | 150 | Ready | Ready | Ready | Ready |

Circulation Area

Sr. No.	Building No.	Building Name	Room Type	Room Id	Area (Sqm)	Flooring	Wall & Painting	Elec & lighting	Furniture & Fixtures
1	Data Not Provided by the Institute	UIP	Corridors	425	Yes	Ready	Ready	Ready	Y

Laboratory Details

Sr. No.	Programme	Level	Course	Building No.	Building Name	Name of Lab	Yearly Budget (E) (Rs)	Yearly Budget (C)(Rs)	Invest ment till Date (Rs)	Rese arch Lab?
1	PHARMACY	UNDER GRADUATE	PHARMACY	1	UIP	ANATOMY,P HYSIOLOGY & HEALTH EDUCATION	200000	100000	30000 0	No
2	PHARMACY	UNDER GRADUATE	PHARMACY	1	UIP	COMPUTER LAB	10000	5000	16500 0	No
3	PHARMACY	UNDER GRADUATE	PHARMACY	1	UIP	PHARMACEU TICAL ANALYSIS	15000	10000	27500 0	No
4	PHARMACY	UNDER GRADUATE	PHARMACY	1	UIP	PHARMACEU TICAL CHEMISTRY	30000	10000	44000 0	No
5	PHARMACY	UNDER GRADUATE	PHARMACY	1	UIP	PHARMACEU TICAL CHEMISTRY-II	150000	20000	17000 0	No
6	PHARMACY	UNDER GRADUATE	PHARMACY	1	UIP	PHARMACEU TICS LAB	20000	10000	33000 0	No
7	PHARMACY	UNDER GRADUATE	PHARMACY	1	UIP	PHARMACO GNOSY	25000	10000	33500 0	No

Library Books

Sr. No.	Programme	Titles	Volumes	No. of Journals Published Abroad	No. of Journals Published in India	No. of e-Book Titles	No. of e-Book Volumes
1	PHARMACY	205	1752	0	9	50	500

Library Facilities

Sr. No	Working Hrs.	E journal Subscription	Annual Budget (Rs)	Area in Sqm	Library Networking	Bar Code or RF Tab book handling	Reprographic Facility	Reading Room Capacity (No. of Students)	Multime dia PCs (No.)	Library Management Software
1	8-8	YES	200000	150	Y	No	Y	32	12	Yes

e-Journal Declaration

	Status of declaration check box
BY CLICKING THIS CHECK BOX THE INSTITUTE HEREBY DECLARES THAT IT HAS SUBSCRIBED FOR ALL THE REQUIRED E-JOURNALS AS MENTIONED IN APPROVAL PROCESS HANDBOOK 2019-2020.	No

Computational Facility

Application Status: **Submitted**
Application Sub-Status: **Payment Received**

Report Generated on :-25/02/2019

Sr. No	Legal System Software	Legal Application Software	Internet Bandwidth in Mbps	Internet Contention Ratio	PCs/Laptop exclusively available to students	PCs/Laptop available in Administrative Office	No. of PCs/Laptop available in Library	No. of PCs/Laptop in language lab	PCs/Laptop available to Faculty Members	Printers available to student
1	1	10	32	1:1	30	5	1	20	2	4

Hostel Facility

Data not entered by Institute

Operational Funds

Data not entered by Institute

Financial Details(in Rs)

Funds/ Grants from Central Government	0	Funds/ Grants from UGC	0
Funds/ Grants from Student Fees	4691110	Funds/ Grants from Donations	0
Funds/ Grants from State Government	0	Funds/ Grants from Other Bodies	510815
Funds/ Grants raised from Other Sources/ Internal Revenue	0	Salary to the Teaching Staff	3288000
Remuneration to Visiting/Guest Faculty	15000	Salary to Non-teaching Staff:	1533600
Library (Investments)	92000	Equipment (Investments)	268750
Building Maintenance Expenses	458120	Other Expenditure (if any)	678260

Company/Industry Details

Are you a Company/Industry wishing to set up a new Institute?:		No	
Type of Company/Industry:	NA	Is the company having Minimum 100 Cr Turnover for the last 3 years? (Attach supporting documents):	NA
Company/Industry PAN No.:	NA	Company/Industry TAN No.:	NA
Company/Industry Registered Address:	NA	Company/Industry Year of Registration:	NA

Ombudsman/Grievance Details

Grievance Committee Appointment	Yes	OMBUDSMAN Appointment	Yes

Ombudsman Appointment/Grievance Committee Details

Data not entered by Institute

Anti-Ragging Related Details Provided by the Institute

1	Constitution of Anti-Ragging Committee	Yes
2	Constitution of Anti-Ragging Squad	Yes
3	Undertaking obtained from all Students	Yes
4	Appointment of Counselors	Yes
5	Undertaking obtained from parents of all the students	Yes
6	Undertaking obtained from students staying in Hostel	Yes
7	Undertaking obtained from parents of students staying in Hostel	Yes

Anti-Ragging Committee/Squad Details

Data not entered by Institute

Renewable Energy Related Details/Conservation of Energy Details

Sr. No.	Particulars	Details Provided by Institute
1	Total land available (in Sqm.)	Data Not Provided by the Institute
2	No. of buildings with roof tops	Data Not Provided by the Institute
3	Annual electricity consumption (No. of units) during previous financial year	Data Not Provided by the Institute
4	Electricity Bill-Average rate per unit paid during previous financial year (Rs. / unit) & No. of units used	Data Not Provided by the Institute
5	Renewable Energy, if any, used at present	No
6	Land available for placing solar photovoltaic panels (in Sqm.)	Data Not Provided by the Institute
7	Total approximate roof- top area available for placing solar photovoltaic panel (in Sqm.)	Data Not Provided by the Institute
8	Whether a policy has been adopted to use only LED lamps ?	No
9	Remarks	Data Not Provided by the Institute

Other Facilities

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

All Weather Approach (Motorized Road)	Yes	**Backup Electric Supply**	Yes
Barrier free Environment	Yes	**CCTV Security**	Yes
ERP Software	Yes	**Electric Supply**	Yes
General Insurance	Yes	**Group Insurance**	Yes
Institution Web Site	Yes	**Insurance for Students**	Yes
Internal Quality Assurance Cell	Yes	**Fire and Safety Certificate**	Yes
Media Cell	Yes	**Backup Electric Supply**	Yes
Medical & Counseling facilities	Yes	**Notice Boards**	Yes
Public Announcement System	Yes	**Potable Water Supply**	Yes
Post & Banking/ATM	Yes	**Projectors in Classrooms**	Yes
Sewage Disposal System	Yes	**Staff Quarters**	No
Sports facilities	Yes	**Auditorium**	Yes
Intellectual Property Right Cell	Yes	**Innovation Cell/Club**	Yes
Telephone & FAX	Yes	**Transport Facility**	Yes
Vehicle Parking Facility	Yes	**First Aid Facility**	Yes
Rain Water Harvesting	Yes	**Solar Power Systems**	No
Appointment Of Student Counselor	Yes	**Establishment Of Anti Ragging Committee**	Yes
Establishment Of Committee For SC/ST	Yes	**Provision to watch MOOCS Courses through Swayam**	Yes
Implementation of Unnat Bharath Abhiyan:	Yes	**Institution-Industry Cell:**	Yes
Implementation of examination reforms	Yes	**Implementation of Startup Policy**	Yes
Implementation of mandatory Internship policy for students	Yes	**Implementation of teacher training policy**	Yes
Participation in the National Innovation Ranking	No	**Group Accident Policy to be provided for the employees**	Yes

Stand Alone Language Laboratory (Minimum 25 PCs/Laptop up to total intake of 1000.Further additional 25 PCs/Laptop per intake of 1000):	Yes
Safety Provisions including fire and other calamities	Yes
Establishment of Internal Complaint Committee (ICC) Committee As per section 4 of Sexual Harassment of Women at Workplace(Prevention, Prohibition and Redressal) Act, 2013	Yes
Establishment of Grievance Redressal Committee in the Institute and Appointment of OMBUDSMAN by the University	Yes
Digital Payment for all Financial Transactions as per MHRD Directives	Yes
Compliance of the National Academic Depository(NAD) as per MHRD Directives	No
Display Board within the premises as well as in the Website of the Institution Indicating the Feedback Facility of Students and Faculty Available in the AICTE Web Portal	Yes
Implementing Food Safety and Standard Act,2006 in the Institution	Yes
Implementation of Schemes Announced by MHRD	Yes
Offering of Skill Development Courses Approved by the Council	No
Participation in the National Institutional Ranking Framework(NIRF)	No
Fabrication Facility Laboratory(FABLAB) Tinkering Laboratory/Innovation Laboratory	No
Waste Management and Environment Improvement Measures to Ensure a Sustainable Green Campus	Yes
Copies of AICTE Approvals (LOA and EOA of subsequent years)obtained since Inception of Institution till date shall be placed in the Website of the Institution	Yes
Applied for Membership of National Digital Library	Yes
Establishment of Online Grievance Rederssal Mechanism	Yes
Whether the institution has implemented Safety and Security measures in the Campus?	Yes
Availability of quality sanitary napkins through sanitary napkin vending machines and ensuring safe and environment friendly disposal of used sanitary napkin through sanitary napkin incinerator	No
In the Class Rooms available, at least ONE shall be a Smart Class Room per Department	Yes
Training and Placement Cell with budget allocation proof of 1% of the total Institutional budget	Yes
Whether your Institution has introduced online Aadhar linked Biometric attendance for regular faculty members?	No
Display of Course(s) and "Approved Intake" in the Institution at the entrance of the Institution. Course(s) taken through duly recognized MOOCs shall be used as Supplementary Course(s)	Yes
Efforts to encourage Final Year students to appear GATE examination	Yes

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

Display of information submitted to AICTE (including the accreditation status and Board of Governors) along with mandatory disclosures in the Web site of the Institution	Yes

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal

DECLARATION
BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTE/UNIVERSITY DEPARTMENT

I, as the Head of the Institution, hereby declare that:

a) I have carefully gone through the AICTE Regulations Notification dated on 30th November, 2016, published in the Gazette of India - Extraordinary Part III, Section- 4 and its amendment 05th December 2017 also the various provisions mentioned in the Approval Process Hand Book 2019-20.

b) I am fully aware of the data uploaded by me in respect of my institute on the web portal.

c) I am aware that there is no provision for correction of data, alteration of data, subsequent editing and appeal etc. for the online application once uploaded on the web portal.

d) I am also aware that application for seeking Extension of Approval(EOA), Increase/Reduction of intake, Addition of new courses, Change of site, Closure of course, Supernumerary Seats under PIO/FN/Gulf quota Approval status/OCI, NRI, Change of name, and Conversion of women institute into Co-ed institute and vice versa (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2019-20.

e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my institute on the portal.

f) I am also aware that Institute is eligible for grant of
E**xtension of Approval to the Existing Institutions,**
Extended EoA(if Applicable as per APH 2019-20),
only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2019-20.

Signature of Principal/Director/Registrar

Name :

Seal/Stamp of the Institute/University Department

Date of Signature(dd/mm/yyyy)   Seal of Institute   Name & Signature of Director/Principal