



APPROVAL PROCESS 2019-20

Application Deficiency Report

DEFICIENCY REPORT AS PER CURRENT INTAKE (Applicable for Existing Institutes only)

Regional Office		Western	
Application Id	1-4259371073	Permanent Id	1-458944503
Name of the Institute	RAJMATA JIJAU SHIKSHAN PRASARAK MANDAL'S, INSTITUTE OF PHARMACY	Address	GAT NO.101/102, AT-DUDULGAON, POST-ALANDI, TAL-HAVELI, DIST-PUNE-412105
City/Village	DUDULGAON	District	PUNE
State	Maharashtra	Pin	412105

Overall Deficiency of Institute: No

Designation	Name	Appointment Type	Qualification	PhD	Qualified as per AICTE norms (YES/NO)
Principal/Director	RAVINDRA CHINTAMANI	Regular	B.PHARM, M.PHARM, PURSUING Ph.D	No	NO

Other Details

Sr. No.	Details of Requirement	Status provided by the Institute	Deficiency
1	List of faculty and data uploaded on the Institute web portal	Yes	No
2	Are all approved teaching faculty being paid as per VI pay commission?	Yes	No
3	Whether Institute is operating from Permanent Site/ Temporary Site?	Permanent Site	No
4	Fees to be charged, Reservation policy, Admission policy and Document retention policy are uploaded in Institute's Website?	Yes	No
5	Courses/Approved Intake displayed at the entrance of the Institute?	Yes	No

Anti-Ragging Related Deficiency Status

Sr. No.	Details of Requirement	Status provided by the Institute	Deficiency
1	Constitution of Anti-Ragging Committee	Yes	No
2	Constitution of Anti-Ragging Squad	Yes	No
3	Undertaking obtained from all Students	Yes	No
4	Appointment of Counselors	Yes	No
5	Undertaking obtained from parents of all the students	Yes	No
6	Undertaking obtained from students staying in Hostel	Yes	No
7	Undertaking obtained from parents of students staying in Hostel	Yes	No

Ombudsman Related Deficiency Status

Sr. No.	Details of Requirement	Status provided by the Institute	Deficiency
1	Grievance Committee	Yes	No

Total Number of Students in Institute

(i)	No. of Students UG	0
(ii)	No. of Students PG	0
(iii)	No. of Students DIPLOMA	120
Total Students (CI) (UG+PG+DIPLOMA)		120

Faculty

Institute Level Faculty

Type	Actual No.	Required No. as per CI	Deficiency
Total Faculty(UG+PG+Diploma)	8	6	No
TOTAL	8.00	6.00	

Administrative Area

Type	Actual Room Area (Sq.m.)	Expected Room Area (Sq.m.)	Deficiency
Principal / Director Office	32	30	No
Board Room	20	20	No
Office All Inclusive	150	150	No
Department Offices/Cabin for Head of Dept	40	20	No
Central Store	30	30	No

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Application Deficiency Report



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

Report Generated on :-20/02/2019

Maintenance	10	10	No
Security	10	10	No
Housekeeping	10	10	No
Pantry for Staff/Faculty	10	10	No
Exam Control Office	40	30	No
Training Placement Office	50	30	No
TOTAL	402.00	350.00	

Amenities Area

Type	Actual Room Area (Sq. m.)	Expected Room Area (Sq. m.)	Deficiency
Boys Common Room	75	75	No
Girls Common Room	75	75	No
Cafeteria	150	150	No
Stationery Store	10	10	No
First aid cum Sick Room	10	10	No
TOTAL	320.00	320.00	

Computational Facilities

Type	Available	Required	Deficiency
Internet Bandwidth	50	32	No
Printers	4	1	No
A1 size Color Printers	1	0	No
Number of PCs in Language lab	20	20	No
Legal Application S/W	10	10	No
Legal System S/W	5	1	No
PCs to Student ratio	20	15	No
TOTAL	110.00	79.00	

Library Facilities

Type	Available	Required	Deficiency
Volumes	3502	3500	No
Titles	438	375	No
Journals	7	3	No
Library Management Software	1	1	No
Reading Room Seating Capacity	50	18	No
MultiMediaPC	10	10	No
TOTAL	4008.00	3907.00	

Instructional Area-Common Facilities

Type	Available	Required	Deficiency
Computer Center inclusive of Language Laboratory	132	75	No
Library & Reading Room	166	150	No
TOTAL	298.00	225.00	

Land Area Details

Type	Available	Required	Deficiency
Total Area of Land	0.75	0.75	No
Maximum number of Pieces	1	3	No
Minimum per Piece of Area	0.75	0.75	No
TOTAL	2.50	4.50	

PHARMACY-Diploma / Existing Programme

Type	Level	Actual Room Area (Sq.m.)	Expected Room Area (Sq.m.)	Deficiency
Classroom	Diploma/Post Diploma	132	132	No
Tutorial Rooms	Diploma/Post Diploma	66	33	No
Laboratory	Diploma/Post Diploma	525	300	No
Machine Room	Diploma/Post Diploma	75	75	No
Instrument Room	Diploma/Post Diploma	75	75	No
Seminar Hall	Diploma/Post Diploma	147	132	No

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Application Deficiency Report



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TOTAL		1020.00	747.00
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Other Facilities

Sr. No.	Type	Availability	Deficiency
1	All Weather Approach (Motorised Road)	Yes	No
2	Barrier free Environment	Yes	No
3	Electric Supply	Yes	No
4	General Insurance	Yes	No
5	Institution Web Site	Yes	No
6	Standalone Language Laboratory	Yes	No
7	Medical & Counseling	Yes	No
8	Notice Boards	Yes	No
9	Potable Water Supply	Yes	No
10	Safety Provisions	Yes	No
11	Sewage Disposal System	Yes	No
12	Telephone & FAX	Yes	No
13	Vehicle Parking	Yes	No
14	First Aid	Yes	No
15	Appointment of Student Counsellor	Yes	No
16	Establishment of Anti Ragging committee	Yes	No
17	Establishment of committee for SC/ST	Yes	No
18	Establishment of Internal Complaint Committee(ICC) As per section 4 of SexualHarassment of Women at Workplace (Prevention, Prohibition and Redressal) Act,2013	Yes	No
19	Establishment of Grievance Redressal Committee in the Institute and Appointment of OMBUDSMAN by the University	Yes	No
20	Digital Payment for all Financial Transactions as per MHRD Directives	Yes	No
21	Compliance of the National Academic Depository(NAD) as per MHRD Directives	Yes	No
22	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	No
23	Implementing Food Safety and Standard Act,2006 in the Institution	Yes	No
24	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	No
25	Provision to watch MOOCS Courses through Swayam	Yes	No
26	Implementation ofUnnat Bharat Abhiyan	No	Yes
27	Institution-Industry Cell	Yes	No
28	Group Insurance for Employees	Yes	No
29	Insurance for Students	Yes	No
30	Applied membership-National Digital Library	Yes	No
31	Implementation of Security Measures	Yes	No
32	Online Grievance Rederssal Mechanism	Yes	No
33	Internal Quality Assurance Cell	Yes	No
34	Fire and Safety Certificate	Yes	No
35	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	No
36	Sports facilities	Yes	No
37	Group Accident Policy to be provided for the employees	Yes	No
38	Efforts to encourage Final Year students to appear GATE examination	No	Yes
39	Auditorium	Yes	No
40	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	No
41	Intellectual Property Right Cell	Yes	No

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Application Deficiency Report



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42	Implementation of mandatory Internship policy for students	Yes	No
43	Implementation of teacher training policy	Yes	No
44	Implementation of examination reforms	Yes	No
45	Implementation of Startup Policy	No	Yes
46	Innovation Cell/Club	No	Yes
47	Media Cell	No	Yes
48	Training and Placement Cell with budget allocation proof of 1% of the total Institutional budget	Yes	No
49	Participation in the National Innovation Ranking	No	Yes
50	Whether your Institution has introduced online Aadhar linked Biometric attendance for regular faculty members?	Yes	No
51	Backup Electric Supply	Yes	No

Note

XX- No Rooms Available

DNA- Data Not Available / Insufficient Data

Blank Field-Data Not Entered

* Laboratories required and Actual Number includes Total Number of Laboratories, Research Laboratories, and Additional WS/Labs for UG and PG courses, as applicable

^ Actual Number of Tutorial Rooms for Under Graduate includes the Number of Tutorial Rooms Available for PG, if applicable

** Actual Number of Guest Rooms for Under Graduate includes the Actual Number of Guest Rooms Available for PG, if applicable

*** Actual Number of Kitchen for Under Graduate includes the Actual Number of Kitchen Available for PG, if applicable

***Note :- All the Dates in the Report are in (dd/mm/yyyy) format

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Printed By : aic002287

Application Deficiency Report



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Report Generated on :-20/02/2019

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

Printed By : aic002287

All India Council for Technical Education

(An Autonomous Organization, Under Ministry of HRD, Govt. of India)

Nelson Mandela Marg, Vasant Kunj, New Delhi-110067 Website: <https://www.aicte-india.org>



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 **WRO1-1123456716.1002001** 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 **WRO1-1123456717.1002001** 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.

Application Report - Part 1



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

Report Generated on :-20/02/2019

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:

- 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."
- 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

Application Report - Part 1

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

Report Generated on :-20/02/2019



Permanent Institute Id	1-458944503	Current Application No.	1-4259371073
Application Type	Extension-Expansion-Closure	AICTE File No.	F-22-2447/2006
Institute Details			
Name of the Institute/University Department	RAJMATA JIJAU SHIKSHAN PRASARAK MANDAL'S, INSTITUTE OF PHARMACY	Address of the Institute/University Department	GAT NO.101/102, AT-DUDULGAON, POST-ALANDI, TAL-HAVELI, DIST-PUNE-412105
State/UT	Maharashtra	District	PUNE
Pin	412105	AICTE Region	Western
Town/Village	DUDULGAON	STD code	20
Land Phone No.	20280280	Email	rjspminstitute@yahoo.com
Cell No.	Data Not Provided by the Institute 8975764969	Alternate Email	ravi.chintamani@gmail.com
FAX No.	20280280	Website	www.rjspmpharmacy.com
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	AAATR9427Q	Primary Bank Account No.	006100107504
Bank Name	THE COSMOS CO-OPERATIVE BANK LTD	IFSC No.	COSB0000006
Approval Year of First Course	2006	Date of First Approval by AICTE	02/05/2006
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 10 th 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?	No	
(iv)	Whether your institution wish to apply for Merger of Courses ('ENGINEERING AND TECHNOLOGY' ONLY)?	No	
(v)	Whether your Institution is willing to add a New Program or New Level in existing Program?	No	
(vi)	Whether your institution wish to add New Course at Diploma level under existing UG Pharmacy Program or Vice-Versa?	No	
(vii)	Whether your Institute wishes to apply for conversion from PGDM to MBA ('MANAGEMENT' ONLY)?	No	
(viii)	Whether your Institute wishes to apply for Change of Shift from Second to First?	No	
(ix)	Whether your Institute wishes to apply for Course Name Change?	No	
(x)	Do you wish to apply for MBA to MCA Conversion or Vice Versa?	No	
(xi)	Whether your Institution is willing to convert existing direct 2nd Year division in Engineering & Technology and/or MCA courses into regular courses?	No	
(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/	No	

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**

Report Generated on :-20/02/2019



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?	2
(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?	No
(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 Twinning 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)	764405	709929760	Y	100000	100000	05/02/2019

Details about Parent Organization(Trust/Company)

Name of the Parent organization	RAJMATA JIJAU SHIKSHAN PRASARAK MANDAL'S	Address	INSTITUTE OF PHARMACY, GAT.NO.101/102, AT-DUDULGAON, POST-ALANDI, TAL-HAVELI, DIST-PUNE-412105
Town/Village	DUDULGAON	State/UT	Maharashtra
District	PUNE	Pin Code	412105
Website	www.rjspm.org	Type of the Organization	Trust
Registered with	SOCIETY REGISTRATON ACT.1860	Registration Date	21/10/2000

Details about Contact Person

Title	Mr.	First Name	RAVINDRA	Last Name	CHINTAMANI
Address	FLAT NO.D1-1201, KESAR TREE TOWN, MOSHI-ALADI BRT ROAD, NEAR GANESH LAWNS, MOSHI, PUNE-412105.		Town/Village	MOSHI	
State/UT	Maharashtra		District	PUNE	
Pin Code	412105		Designation	PRINCIPAL	

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**

Report Generated on :-20/02/2019

Cell No.	8975764969	Alternate Cell No.	9923316582
Email	ravi_chintamani@rediffmail.com	Alternate Email Address	rjspminstitute@yahoo.com
STD Code	20	Land Phone No.	20280280
		Fax No.	20280280
Land Details			
Location	Urban	North Eastern States/Land in Hilly Area	No
No. of pieces of Land	1	Max distance in farthest pieces	NA
Land registered with	GOV. OF MAHARASHTRA	Land Piece Area 1 in acres	.75
Land ownership details	Registered Sale Deed	Land Piece Area 2 in acres	NA
Total area in acres	.75	Land Piece Area 3 in acres	NA
Land Registration Date	13/03/2006	Land Use Certificate issued by	Town Planning PCMC Pune
Land Use Certificate date	02/05/2006	Latitude and Longitude	Latitude - 18, 40, 31 Longitude - 73, 58, 38
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.	2086/2006
Date of Registration	13/03/2006	Area of Land (acres)	.75
Khasra Number	00	Plot Number, Survey Number, etc	101/102
Land Situated At	DUDULGAON	Land Registered in the name Of	TRUST
Type of Ownership (Sale deed/ Gift deed/Govt/Private Lease)	Ownership	Land Use Certificate Issued	Yes
In case of Private Lease-Name of the Leaser		Name of the Lessee	
Owner of the land (In whose name last sale deed was made)			
Land Use Certificate Issuing Authority	TOWN PLANNING PCMC, PUNE	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)	2.5
Land available at the time of First AICTE approval(In Acres)	3.5		

Building Details

Building Status	Available	Total built up Area(Sqm) Planned	2649
Total built up Area(Sqm) ready	2649	Total Carpet Area(Sqm)-Instructional-ready	1428.46
Total Carpet Area(Sqm) Administrative-ready	403.95	Total Carpet Area (Sqm)-Amenities-ready	380.56
Access and Circulation Area (Sqm)	436	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:	0	Own Share:	0	Funds allocated:	0

Other Building Details

Sr. No.	1	Building No.	01	Building Name	RAJMATA JIJAU SHIKSHAN PRASARAK MANDAL'S
Sanctioned Built up Area(Sqm)	2648.88	Constructed Built up Area (Sqm)	2648.88	Approved Carpet Area Instructional (Sqm)	1428.46

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**

Report Generated on :-20/02/2019

Constructed Carpet Area Instructional (Sqm)	1428.46	Approved Carpet Area-Administrative (Sqm)	403.95	Constructed Carpet Area Administrative (Sqm)	403.95
Approved Carpet Area-Amenities(Sqm)	380.56	Constructed Carpet Area Amenities(Sqm)	380.56	Total Area Approved (Sqm)	2648.88
Total Area Constructed (Sqm)	2648.88	Activities Conducted in the Building	LECTURER , PRACTICAL AND TUTORIAL	Non AICTE approved courses run in the Building (If Any)	NO
Name of the Building Plan Approving Authority	PIMPRI-CHINCHWAD MUNICIPAL CORPORATION	Building Plan Approval Date	13/03/2006	Approval No.	2086/2006

Programme and Courses

Sr. No.	1	Course Unique Id	1-1507558716	Programme	PHARMACY
Level	DIPLOMA	Course	PHARMACY	Shift	1st Shift
FT/PT	FULL TIME	Started In	2006	Applying For	EoA Only
Course Duration	2	Current Intake (2018-19)	60	Applied for Intake(2019-20)	60
NRI	Not interested	University/ Board	Maharashtra State Board of Technical Education, Mumbai	PIO / FN / Gulf Quota Approval status OCI	Not interested
Twining Program Request	Not interested	NBA Accreditation status (As on 10 th April, 2018)			No

Dual Degree/Integrated Course Details

Data not entered by Institute

Vocational Course Details

Data not entered by Institute

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	DIPLOMA	1	RJSPM's, IOP	Laboratory	10	75	Ready	Ready	Ready	Ready
2	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Laboratory	11	75	Ready	Ready	Ready	Ready
3	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Laboratory	12	75	Ready	Ready	Ready	Ready
4	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Laboratory	13	75	Ready	Ready	Ready	Ready
5	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Laboratory	14	75	Ready	Ready	Ready	Ready
6	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Classroom	16	66.38	Ready	Ready	Ready	Ready
7	PHARMACY	DIPLOMA	1	RJSPM'I OP	Animal House	17	75	Ready	Ready	Ready	Ready
8	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Laboratory	3	75	Ready	Ready	Ready	Ready
9	PHARMACY	DIPLOMA	1	RJSPM's IOP	Machine Room	33	75	Ready	Ready	Ready	Ready
10	PHARMACY	DIPLOMA	1	RJSPM'S IOP	Instrument Room	35	75	Ready	Ready	Ready	Ready
11	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Other	36	34.32	Ready	Ready	Ready	Ready
12	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Classroom	4	66.38	Ready	Ready	Ready	Ready
13	PHARMACY	DIPLOMA	1	RJSPM's,	Laboratory	7	75	Ready	Ready	Ready	Ready

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**

Report Generated on :-20/02/2019

14	PHARMACY	DIPLOMA	1	IOP RJSPM's, IOP	Tutorial Room	8	66.38	Ready	Ready	Ready	Ready
15	PHARMACY	DIPLOMA	1	RJSPM's, IOP	Seminar Hall	9	147	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	RJSPM's, IOP	Computer Center	29	132	Ready	Ready	Ready	Ready
2	1	RJSPM's, IOP	Library&Reading Room	30	166.53	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	RJSPM's IOP	Principal Directors Office	1	32.99	Ready	Ready	Ready	Ready
2	1	RJSPM's, IOP	Cabin for Head of Dept	15	20.28	Ready	Ready	Ready	Ready
3	1	RJSPM's, IOP	Central Store	18	30	Ready	Ready	Ready	Ready
4	1	RJSPM's, IOP	Maintenance	19	10	Ready	Ready	Ready	Ready
5	1	RJSPM's, IOP	Office All Inclusive	2	150	Ready	Ready	Ready	Ready
6	1	RJSPM's, IOP	Housekeeping	20	10	Ready	Ready	Ready	Ready
7	1	RJSPM's, IOP	Placement Office	21	50	Ready	Ready	Ready	Ready
8	1	RJSPM's, IOP	Board Room	22	20	Ready	Ready	Ready	Ready
9	1	RJSPM's IOP	Department Office	23	20	Ready	Ready	Ready	Ready
10	1	RJSPM's, IOP	Security	28	10	Ready	Ready	Ready	Ready
11	1	RJSPM's, IOP	Exam Control Office	4	40.4	Ready	Ready	Ready	Ready
12	1	RJSPM's, IOP	Pantry for Staff	6	10.28	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	RJSPM's, IOP	Toilet	24	30.28	Ready	Ready	Ready	Ready
2	1	RJSPM's, IOP	Cafeteria	25	150	Ready	Ready	Ready	Ready
3	1	RJSPM's, IOP	Toilet	26	30.28	Ready	Ready	Ready	Ready
4	1	RJSPM's, IOP	Boys Common Room	27	75	Ready	Ready	Ready	Ready
5	1	RJSPM's, IOP	First aid cum Sick Room	31	10	Ready	Ready	Ready	Ready
6	1	RJSPM's, IOP	Stationery Store	32	10	Ready	Ready	Ready	Ready
7	1	RJSPM's, IOP	Girls Common Room	34	75	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
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Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Application Report - Part 1



Application Status: **Submitted**
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1	1	RJSPM's, IOP	Other Areas (in Sq m)	436.03	Yes	Ready	Ready	Ready	Y
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Laboratory Details

Sr. No.	Programme	Level	Course	Building No.	Building Name	Name of Lab	Yearly Budget (E) (Rs)	Yearly Budget (C)(Rs)	Investment till Date (Rs)	Research Lab?
1	PHARMACY	DIPLOMA	PHARMACY	1	RJSPM's, IOP	COMPUTER LABORATORY	100000	30000	131003	No
2	PHARMACY	DIPLOMA	PHARMACY	1	RJSPM's, IOP	MACHINE ROOM	75000	75000	283000	No
3	PHARMACY	DIPLOMA	PHARMACY	1	RJSPM's, IOP	PHARMACEUTICAL CHEMISTRY	50000	40000	214416	No
4	PHARMACY	DIPLOMA	PHARMACY	1	RJSPM's, IOP	PHARMACEUTICS	50000	40000	228225	No
5	PHARMACY	DIPLOMA	PHARMACY	1	RJSPM's, IOP	PHARMACOGNOSY	50000	25000	44225	No
6	PHARMACY	DIPLOMA	PHARMACY	1	RJSPM's, IOP	PHARMACY PRACTICE	50000	35000	66000	No
7	PHARMACY	DIPLOMA	PHARMACY	1	RJSPM's, IOP	PHYSIOLOGY & PHARMACOLOGY	50000	25000	381828	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	438	3502	1	6	0	0

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)	Multimedia PCs (No.)	Library Management Software
1	9.30am to 5pm	NIL	150000	166	Y	Yes	Y	50	10	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.

Yes

Computational Facility

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	5	10	50	1:1	20	4	5	20	2	4

Hostel Facility

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Application Report - Part 1



Application Status: **Submitted**
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Report Generated on :-20/02/2019

Sr No.	No. of rooms having Single bed/room & Area of room in sq.m.	Building No.	Name of Building	No. of rooms having Double/Two bed/room & Area of room in sq.m.	Building No.	Name of Building	No. of rooms having Triple/Three bed/room & Area of room in sq.m.	Building No.	Name of Building	No. of rooms having Four bed/room & Area	Building No.	Name of Building
1	Boys &			&			&			Boys &		
2	Boys &			&			&			Boys &		
3	Girls &			&			&			Girls &		
4	Girls &			&			&			Girls &		

Operational Funds

Bank Name	Account No.	Bank Statement Date	Cash Balance
Punjab National Bank, Bhosari	2919002100013921	09/02/2015	37519
Cosmos Co-operative Bank Ltd, Chinchwad	006100107504	07/02/2015	204789.99
BANK OF MAHARASHTRA	60066291337	08/02/2015	322536.5

Financial Details(in Rs)

Funds/ Grants from Central Government	0	Funds/ Grants from UGC	0
Funds/ Grants from Student Fees	8126001	Funds/ Grants from Donations	0
Funds/ Grants from State Government	0	Funds/ Grants from Other Bodies	0
Funds/ Grants raised from Other Sources/ Internal Revenue	148495	Salary to the Teaching Staff	4653568
Remuneration to Visiting/Guest Faculty	25000	Salary to Non-teaching Staff:	2700673
Library (Investments)	41002	Equipment (Investments)	173986
Building Maintenance Expenses	420000	Other Expenditure (if any)	2194518

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	No
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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

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**

Report Generated on :-20/02/2019



Renewable Energy Related Details/Conservation of Energy Details			
Sr. No.	Particulars		Details Provided by Institute
1	Total land available (in Sqm.)		3035
2	No. of buildings with roof tops		1
3	Annual electricity consumption (No. of units) during previous financial year		4061
4	Electricity Bill-Average rate per unit paid during previous financial year (Rs. / unit) & No. of units used		11.5
5	Renewable Energy, if any, used at present		No
6	Land available for placing solar photovoltaic panels (in Sqm.)		500
7	Total approximate roof- top area available for placing solar photovoltaic panel (in Sqm.)		200
8	Whether a policy has been adopted to use only LED lamps ?		No
9	Remarks		Data Not Provided by the Institute
Other Facilities			
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	No	Backup Electric Supply	Yes
Medical & Counseling facilities	Yes	Notice Boards	Yes
Public Announcement System	Yes	Potable Water Supply	Yes
Post & Banking/ATM	No	Projectors in Classrooms	Yes
Sewage Disposal System	Yes	Staff Quarters	No
Sports facilities	Yes	Auditorium	Yes
Intellectual Property Right Cell	Yes	Innovation Cell/Club	No
Telephone & FAX	Yes	Transport Facility	Yes
Vehicle Parking Facility	Yes	First Aid Facility	Yes
Rain Water Harvesting	Yes	Solar Power Systems	Yes
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:	No	Institution-Industry Cell:	Yes
Implementation of examination reforms	Yes	Implementation of Startup Policy	No
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			Yes
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			Yes
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

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Application Report - Part 1

Application Status: **Submitted**
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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	Yes
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?	Yes
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	No
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

Printed By : aic002287



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



APPROVAL PROCESS 2019-20

Application Report Part-2

Permanent Institute Id 1-458944503
Current Application No. 1-4259371073
Application No. of 2017-2018 1-3508473078
AICTE File No. F-22-2447/2006
Application Type Extension-Expansion-Closure
Organization Registration No. MH/1205/2000/F/19662/PUNE

Principal/Director/Registrar

Surname	CHINTAMANI	First Name	RAVINDRA
Father's Name	BHAUSAHEB	Date of Birth	05/06/1981
Doctorate Degree	No	Field of Specialization	QUALITY ASSURANCE TECHNIQUES
Master's Degree	M.PHARM	Bachelor Degree	B.PHARM
Other Qualifications	PURSUING Ph.D	Date of Joining the Institute as head	01/07/2011
Appointment Type	Regular	Exact Designation	Principal
Experience (T-R-I)	Teaching 13	Research 0	Industry 0

Faculty Counts

Total No. of Faculty	8
No. of Teaching faculty approved by University/Government?	2

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	Pav Scale
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Application Report - Part 2



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

Report Generated on :-20/02/2019

1	1-2707530969	PHARMACY	PHARMACY	Diploma	FT	SHAKILA	SHAIKH	LECTURER	06/07/2015	Regular	N	NA	B.PHARM	D.PHARM		DJPP S5977B	564698	V l t h P a y S c a l e
2	1-3370442783	PHARMACY	PHARMACY		FT	YOGITA	ADHAV	LECTURER	13/06/2016	Regular	N	M. PHARM	B.PHARMACY	NA		CIJP M4431Q	511608	V l t h P a y S c a l e
3	1-3565738611	PHARMACY	PHARMACY		FT	NILAM	SANAS	LECTURER	01/08/2017	Regular	N	NA	B.PHARMACY	NA		GDG PS2059C	338720	V l 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 : aic002287

Application Report - Part 2



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

Report Generated on :-20/02/2019

4	1-3570899383	PHARMACY	PHARMACEUTICAL SCIENCE		FT	ARCHANA	INGLE	LECTURER	16/08/2017	Regular	N	M. PHARM	B PHARM	NA		AEH PI3881A	322137	V l t h P a y S c a l e
5	1-3580461691	PHARMACY	PHARMACEUTICAL SCIENCE		FT	PRIYANKA	DEORANKAR	LECTURER	09/11/2017	Regular	N	M.PHARM	B.PHARM	NA		CBW PD9652G	192512	V l t h P a y S c a l e
6	1-4666457174	PHARMACY	PHARMACY		FT	PRIYANKA	DOK E	LECTURER	11/08/2018	Regular	N	M.PHARM	B PHARM			DDG PD5727R	0	V l 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 : aic002287

Application Report - Part 2



Application Status: **Submitted**
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Report Generated on :-20/02/2019

7	1-462206289	PHARMACY	PHARMACY	Diploma	FT	SHILPA	JAGADALE	LECTURER	01/09/2010	Regular	N	M.PHARM	B.PHARM			ALYP J4385J	614222	V l t h P a y S c a l e
8	1-749955542	PHARMACY	PHARMACY	Diploma	FT	RAVINDRA	CHINTAMANI	PRINCIPAL	01/07/2011	Regular	N	M. PHARM	B. PHARM	D.PHARM		ANE PC5625L	808709	V l t h P a y S c a l e

Adjunct Faculty/Resource Person from Industry Details

Data not entered by Institute

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	1-3703413847	PHARMACY	PHARMACY	DIPLOMA	KIRAN	VAIRAT					
2	1-3728386581	PHARMACY	PHARMACY	DIPLOMA	BHAGYA SHREE	ROKADE	01/11/2017			PHARMACY	

Date of Signature(dd/mm/yyyy)

Seal of Institute

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Application Report - Part 2



Application Status: **Submitted**
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Report Generated on :-20/02/2019

Admin & Library Staff

Sr. No.	Staff Id	First Name	Last Name	Date of joining the Institute	Master Degree	Bachelor Degree	Diploma	Other Qualification
1	1-3704205117	PRATAP	SHINDE	01/11/2017				HSC
2	1-3704430401	SANTOSH	GAWATE	01/11/2017		B.COM		B.ED
3	1-3705874253	GOVARDHAN	HARGUDE	27/05/2014				IX (9TH)
4	1-462766631	PRAMOD	BOCHARE	30/09/2004		B.A		
5	1-462766635	KAVITA	LANDE	09/08/2009	M.A, M.LIB	B.A.		
6	1-462766639	ANITA	KAMTHE	01/08/2008		B.COM		
7	1-462766657	GANESH	THAKUR	17/08/2010				IX (9TH)
8	1-758091620	SOMNATH	SHINDE	15/10/2010				XTH
9	1-758176558	ROHIDAS	BHOR	02/09/2011				X
10	1-769265693	SHAM	PAKHALE	05/11/2008		B.A		MSCIT,TALLY
11	1-1516349787	KANTA	CHAVAN	23/11/2012				
12	1-1535519334	MACHINDRA	NANEKAR	26/11/2012				X
13	1-2063772782	RUPALI	ASAWALE	10/09/2013	M.PHARM	B.PHARM	D.PHARM	MSCIT

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Printed By : aic002287

Application Report - Part 2



Application Status: **Submitted**
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DECLARATION BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTE/UNIVERSITY DEPARTMENT

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- 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.
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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

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