

Application Report - Part 2

Application Status: Submitted to RO
Application Sub-Status: Payment Received

Report Generated on :-14/02/2015



All India Council for Technical Education

(A Statutory body under Ministry of HRD, Govt. of India)

7th Floor, Chandralok Building, Janpath, New Delhi- 110 001

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Permanent Institute Id	1-458944503
Current Application Number	1-2453623750
Application Number of 2014-2015	1-2014126429
AICTE File No.	F-22-2447/2006
Application Type	Extension-Expansion-Closure
Organization Registration number	MH/1205/2000/F/19662/PUNE

Principal/Director

Surname	CHINTAMANI
First name	RAVINDRA
Father's name	BHAUSAHEB
Date of birth	05/06/1981
Doctorate degree	
Master's degree	M.PHARM
Bachelor degree	B.PHARM
Other qualifications	
Field of specialization	QUALITY ASSURANCE TECHNIQUES
Date of joining the Institute as head	01/07/2011
Appointment type	Regular
Exact designation	Principal
Experience (T-R-I)	Teaching - 10 Research - 0 Industry - 0

Faculty

Date of
Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

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Sr Number	Faculty ID	Programme	Course	Faculty Type	FT/PT	First Name	Surname	Exact Designation	Date of Joining the institute	Appointment type	Doctorate (D/R)	Master's Degree (D/R)	Bachelor Degree (D/R)	Other Qualification
1	1-2313417222	PHARMACY	PHARMACY	Diploma	FT	RAMAKANT	NARKE	LECTURER	15/07/2014	Regular		M.PHARM	B. PHARM	
2	1-2313417228	PHARMACY	PHARMACY	Diploma	FT	HARSHADA	PURANIK	LECTURER	11/08/2014	Regular		M.PHARM	B.PHARM	
3	1-462206289	PHARMACY	PHARMACY	Diploma	FT	SHILPA	JAGADALE	LECTURER	01/09/2010	Regular	N	M.PHARM	B.PHARM	
4	1-462370163	PHARMACY	PHARMACY	Diploma	FT	VILAS	PATIL	LECTURER	01/09/2010	Regular	N		B.PHARM	
5	1-462488275	PHARMACY	PHARMACY	Diploma	FT	POONAM	WAGH	LECTURER	01/12/2010	Regular	N	M.PHARM	B.PHARM	
6	1-749955542	PHARMACY	PHARMACY	Diploma	FT	RAVINDR	CHINTAMANI	PRINCIPAL	01/07/2011	Regular	N	M. PHARM	B. PHARM	D.PHARM
7	1-1510886337	PHARMACY	PHARMACY	Diploma	FT	TRUPTI	RASAL	LECTURER	10/07/2012	Regular	N		B. PHARM	
8	1-2061437042	PHARMACY	PHARMACY	Diploma	FT	GAURI	KULKARNI	LECTURER	23/12/2013	Regular	N	M.PHARM	B.PHARM	

Technical Staff

Sr Number	Technical Staff Id	Program	Course	Level	First Name	Sur Name	Date of joining the institute	Doctorate Degree	Master Degree	Bachelor Degree	Diploma	Other Qualification
1	1-2316055152	PHARMACY	PHARMACY	DIPLOMA	NIVRUTI	DALVI	03/07/2014				PHARMACY	

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2	1-2328712618	PHARMACY	PHARMACY	DIPLOMA	DNYANE SHWAR	AWATE	01/08/2014				PHARMACY	
3	1-2061247522	PHARMACY	PHARMACY	DIPLOMA	SANAA	SHAIKH	10/01/2014			B.SC		
4	1-2070778406	PHARMACY	PHARMACY	DIPLOMA	PRIYANKA	PATIL	05/02/2014			B.PHARM		

Admin & Library Staff

Sr Num	Staff Id	First Name	Last Name	Date of joining the institute	Doctorate Degree	Master Degree	Bachelor Degree	Diploma	Other Qualification
1	1-462766631	PRAMOD	BOCHARA	30/09/2004			B.A		
2	1-462766635	KAVITA	LANDE	09/08/2009		M.A, M.LIB	B.A.		
3	1-462766639	ANITA	KAMTHE	01/08/2008			B.COM		
4	1-462766657	GANESH	THAKUR	17/08/2010					IX (9TH)
5	1-462766679	SANGITA	MHASKARE	07/12/2005					XI
6	1-758091620	SOMNATH	SHINDE	15/10/2010					XTH
7	1-758176558	ROHIDAS	BHOR	02/09/2011					X
8	1-769265693	SHAM	PAKHALA	05/11/2008			B.A		MSCIT, TALLY
9	1-775347292	KARIM	SAYYAD	01/09/2011			BA		
10	1-1516349787	KANTA	CHAVAN	23/11/2012					

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Sr Num	Staff Id	First Name	Last Name	Date of joining the institute	Doctorate Degree	Master Degree	Bachelor Degree	Diploma	Other Qualification
11	1-1535519334	MACHINDR A	NANEKA R	26/11/2012					X
12	1-2063772782	RUPALI	ASAWAL E	10/09/2013		M.PHARM	B.PHARM	D.PHARM	MSCIT

Date of
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DECLARATION **BY THE PRINCIPAL/DIRECTOR OF THE INSTITUTE**

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

- a) I have carefully gone through the AICTE Regulations Notified on 27th September 2012, published in the Gazette of India - Extraordinary Part 3, Section (iv) and also the various provisions mentioned in the Approval Process Hand Book 2015-16.
- b) I am fully aware of the data uploaded by us 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, Second Shift Programme, Part-time program, Change of site, Closure of course, Supernumerary Seats under PIO, NRI, Change of name, and Conversion of women institute into Co-ed institute (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2015-16 covered under respective chapter.
- e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the data uploaded by our institute on the portal.
- f) I am also aware that the institute is eligible for grant of Extension of Approval, Increase/Reduction of intake, Addition of new courses, Closure of course, supernumerary seats under PIO, NRI, Change of name, Second shift programme, Part-time program, Change of site, Conversion of women institute into Co-ed institute (as applicable) only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2015-16.

(Principal/ Director)

Date of
Signature(dd/mm/yyyy)

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