

भारतीय भेषजी परिषद्

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय के अंतर्गत सांविधिक निकाय)
भारत सरकार

आई-300, तीसरी मंजिल, टावर-1, वर्ल्ड ट्रेड सेंटर,
नौरोजी नगर, नई दिल्ली-110029
टेलीफोन नंबर 011-65218900-01
E-mail: registrar@pci.nic.in



कामये दुःखतप्तानाम् प्राणिनामार्तिनाशनम्

PHARMACY COUNCIL OF INDIA
(Statutory body under Ministry of Health & Family Welfare)
Government of India
I-300, 3rd floor, Tower-I, World Trade Centre,
Nauroji Nagar, New Delhi-110029
Telephone No. 011-65218900-01
E-mail: registrar@pci.nic.in

DECISION LETTER

Institute Name/Inst ID **HRISHIKESH INSTITUTE OF PHARMACY RAIPUR C.G. / PCI-8611**
State **CHHATTISGARH**
District **-**
Village/Town/City **Raipur**
Pin Code **492001**
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	chhattisgarh swami vivekanand technical univercity durg c.g	428th EC(4.8.2025) under item No.10 decided as under: D.Pharm Grant approval from 2023-2024 to 2025-2026 academic session for 60 admissions u/s 12 of the Pharmacy Act for D.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 month	Approved	2025-2026	60

Communication Date: **13 Aug 2025**

Copy to

- Registrar of the University
- Principal of the college
- Secretary/Chairman of the Trust/Society
- Guard File (PCI)

Note: Validity of the course details may be verified at pci.gov.in

For
Registrar-cum-Secretary
PCI