

PHARMACY COUNCIL OF INDIA

(Constituted under the Pharmacy Act, 1948)

TELEGRAM : `FARMCOUNCIL`
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Post Box No.7020
NEW DELHI – 110 002

Ref.No.14-3/2012-PCI/52485-579

Dated:06-01-2015

To

**All Govt. Colleges and University Departments (Central/State Universities,
Private Universities, Deemed Universities) running pharmacy courses
(As per list attached)**

Sub: Details regarding Teaching Faculty in Pharmacy.

Sir

With reference to the subject cited above, please intimate the teaching staff position in the following format in your pharmacy college / department so as to reach the Council within 7 days of receipt of this communication. In order to expedite the reply, please forward the information on the Council's E.Mail ID -

- "pci@ndb.vsnl.net.in"

Format

1. Name of the College/Department : _____

2. Correspondence address : _____

3. Faculty details -
 - a) Principal/Director/HOD -

Name of Principal/Director/HOD	Present designation	Qualification at			Teaching experience after	
		Graduate level	PG level (Pl. indicate specialization)	Doctorate level	PG level	Doctorate level

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b) Teaching Faculty -

Name of Faculty	Present designation	Qualification at			Teaching experience after	
		Graduate level	PG level (Pl. indicate specialization)	Doctorate level	PG level	Doctorate level

Yours faithfully

(ARCHNA MUDGAL)
Registrar-cum-Secretary