

PHARMACY COUNCIL OF INDIA
Standard Inspection Format (S.I.F) for institutions conducting B. Pharm for 100 adms.

(To be filled and submitted to PCI by an organization seeking approval of the course /
continuation of the approval)

(SIF-B-1)

To be filled up by P.C.I.

To be filled up by inspectors

Inspection No. :

Date of Inspection:

FILE No. :

NAME OF THE INSPECTORS: 1.
(BLOCK LETTERS) 2.

PART - I
A - GENERAL INFORMATION

A - I.1 Name of the Institution: Complete Postal address: Telephone No. Fax No. E-mail	Vivekanandha Pharmacy College for women Veerachipalayam, Sankari west, Sankari(Tk), Salem(DT). 04288 - 234890 04288234890 principalvpcw@gmail.com
Year of starting of the course	2017
Status of the course conducting body: Government / University / Autonomous / Aided / Private (Enclose copy of Registration documents of Society/Trust)	Trust
A - I.2 Name, address of the Society/Trust/ Management (attach documentary evidence STD Code: Telephone No: E-mail Web Site	Rabindharanath Tagore Educational Charitable Trust Vivekanandha Pharmacy College for women Veerachipalayam, Sankari west, Sankari(Tk), Salem(DT). 04288-234890 principalvpcw@gmail.com www.vpcw.org
A - I.3 Name, Designation and Address of person to be contacted by phone STD Code Telephone No Office Residence Mobile No. Fax No E-Mail	Dr. P. Ashokkumar, Principal Vivekanandha Pharmacy College for women Veerachipalayam, Sankari west, Sankari(Tk), Salem(DT). 04288-234890 9443734672, 9443557141 04288234890 principalvpcw@gmail.com
A - I.4 Name and Address of the Head of the Institution	Dr. P.Ashokkumar , Principal Vivekanandha Pharmacy College for women Veerachipalayam, Sankari west, Sankari(Tk), Salem(DT)

A - I.5

FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL

Signature of the Head of the Institution

Signature of the Inspectors

a. Details of Affiliation Fee Paid

Name of the Course	Affiliation Fee paid up to	Receipt No/Challan No.	Dated	Remarks of the Inspectors
B. Pharm	2017-18	769281 769283	29.08.2017 29.08.2017	

b. APPROVAL STATUS:

Name of the Course	Approved up to	In take Approved and Admitted	PCI	STATE GOVERNMENT	UNIVERSITY	Remarks of the Inspectors
B. Pharm	2018-19	Approval Letter No and Date	32-1309/2017 PCI, Dated: Nov-2017	287/29.11.2016		
		Approved Intake	60	60	60	
		Actually Admitted	60	60	60	

c. STATUS OF APPLICATION

COURSES INSPECTED FOR						
Faculty / Subject	Extension of Approval		Increase in Intake of Seats		Remarks	
	Yes	No	Yes	No	Current Intake	Proposed increase in Intake
B. Pharm	Yes	Yes	Yes	Yes	60	100

Note: Enclose relevant documents A -I.

6

Whether other Educational Institutions/Courses are also being run by the Trust / Institution in the same Building / campus? If Yes, Give Details

Yes

No

A - I. 6 a

Status of the Pharmacy Course:	
Independent Building	<input checked="" type="checkbox"/>
Wing of another college	<input type="checkbox"/>
Separate Campus	<input checked="" type="checkbox"/>
Multi Institutional Campus	<input type="checkbox"/>

Examining Authority : With : THE TAMILNADU Dr.M.G.R MEDICAL UNIVERSITY, CHENNAI

complete postal Address, : No.69, Anna Salai, Guindy, Channai 600 032.

Telephone No. and STD Code. : 044-22353574 / 22353576

Signature of the Head of the Institution

Signature of the Inspectors

B - DETAILS OF THE INSTITUTION

B -I.1		Dr. P.Ashokkumar			
Name of the Principal					
Qualification/ Experience	Qualification*		Teaching Experience Required	Actual experience	Remarks of the Inspectors
	M. Pharm	Yes	15 years, out of which 5 years as Prof. / HOD	20 Years	
	PhD	Yes	10 years, out of which at least 05 years as Asst. Prof		

* Documentary evidence should be provided

B -I.2

For institution seeking continuation of affiliation

Course	Date of last Inspection	Remarks of the Previous Inspection Report	Complied / Not Complied	Intake reduced/Stopped in the last 03 years*
B. Pharm	28.07.2017 & 29.07.2017	NIL	NA	NO

* Enclose Documents

B -I.3

Status of Governing Council:	Trust
Details of the Governing Body	Enclosed
Minutes of the last Governing council Meeting	Enclosed

B -I.4

Pay Scales:

Staff	Scale of pay	PF	Gratuity	Pension benefit	Remarks of the Inspectors
Teaching Staff	AICTE . Yes	Yes	Yes	No	
Non- Teaching Staff	State Government Yes	Yes	Yes	No	

B -I.5

B. Pharm Course: Admission Statement for the Past Three Years

ACADEMIC YEAR	Year 2017	Year 2016	Year 2015
Sanctioned	60	Not Applica able (New college)	
No. of Admissions	60		
Unfilled Seats	00		
No. of Excess Admissions	NIL		

Signature of the Head of the Institution

Signature of the Inspectors

B - I .6**Academic information: Percentage of UG results for the past three years based on University Calendar**

ACADEMIC YEAR	Year 2017	Year 2016	Year 2015
1 st year	New College Not Applicable		
2 nd year			
3 rd year			
Final year			
Pass % (Final Year)			

B - II**Co - Curricular Activities / Sports Activities**

Whether college has NSS Unit (Yes/No)? If no give reasons	NO
NSS Programme Officer's Name	-
Programme conducted (mention details)	
Whether students participating in University level cultural activities / Co- curricular/sports activities	Yes
Physical Instructor	Available
Sports Ground	Available

Signature of the Head of the Institution

Signature of the Inspectors

C - FINANCIAL STATUS OF THE INSTITUTION

Audited financial Statement of Institute should be furnished

C.1 Resources and funding agencies (give complete list)

C.2 Please provide following Information

Receipts			Expenditure			Remarks of the Inspectors
Sl. No.	Particulars	Amount	Sl. No.	Particulars	Amount	
1.	Grants a. Government b. Others	0.00 0.00	CAPITAL EXPENDITURE			
2.	Tuition Fee	0.00	1.	Building	0.00	
3.	Library Fee	0.00	2.	Equipment	0.00	
4.	Sports Fee	0.00	3.	Others	0.00	
5.	Union Fee	0.00	REVENUE EXPENDITURE			
6.	Others	0.00	1.	Salary		
			2.	MAINTENANCE EXPENDITURE		
				i College		
				ii Others		
			3.	University Fee (If any)		
			4.	Apex Bodies Fee		
			5.	Government Fee		
			6.	Deposit held by the College	30,00,000/-	
			7.	Others		
			8.	Misc .Expenditure		
			TOTAL			
	Total	0.00				

Note: Enclose relevant documents

Signature of the Head of the Institution

Signature of the Inspectors

PART- II PHYSICAL INFRASTRUCTURE

1. a. Availability of Land (B. Pharm courses) : **Available**
 a) 2.5 acres District HQ/Corporation/Municipality limit
 b) 0.5 acre for City / Metros
- b. Building : **Own**
- c. Land Details to be in name of Trust and Society
 Records to be enclosed
 Sale deed : **Enclosed**
- d. Buildingt:
 i) Approved Building plan, to be Enclosed : **Enclosed**
- e. Total Built Area of the college building in Sq.mts : Built up Area

14,767

 Amenities and Circulation Area

13,567

2. Class rooms:

Total Number of Class rooms provided at the end of 4 Year Course

Class	Required Nos	Available Nos	Required Area * for each class room	Available Area in Sq.mts	Remarks of the Inspectors
B. Pharm	02	02	90 Sq. mts each (desirable) Or 150 sq.mts each (Essential)	315.0	

(*To accommodate 100 students).

3. Laboratory requirement at the end of 4 Years

Sl. No.	Infrastructure for	Requirement as per Norms	Available No. & Area in Sq mts	Remarks/ Deficiency
1	Laboratory Area for B.Pharm Course (12 Labs)	90 Sq .mts x n (n=10) - Including Preparation room - Desirable 75 Sq. mts - Essential	684.34 456.55	
2	Pharmaceutics Pharmaceutical Chemistry y Pharmaceutical Analysis Pharmacology Pharmacognosy Computer lab Total no. Laboratories for B.Pharm course	02 Laboratories 03 Laboratories 01 Laboratory 02 Laboratories 01 Laboratories 01 Laboratory 10 Laboratories *	330.89 457.90 193.03 321.52 165.89 396.47 1865.7	
3	Preparation Room for each lab (One room can be shared by two labs, if it is in between two labs)	10 sq mts (minimum)	70	
4	Area of the Machine Room	80-100 Sq.mts	96.19	
5	Central Instrumentation Room	80 Sq.mts with A/ C	96.15	
6	Store Room - I	1 (Area 100 Sq mts)	63.43	
7	Store Room - II (For Inflammable chemicals)	1 (Area 20 Sq mts)	30.67	

*Number of laboratories required for entire course of 4 years.

Signature of the Head of the Institution

Signature of the Inspectors

† The Institutions will not be permitted to run the courses in rented building on or after 31.12.2008

1. All the Laboratories should be well lit & ventilated
2. All Laboratories should be provided with basic amenities and services like exhaust fans and fume chamber to reduce the pollution wherever necessary.
3. The work benches should be smooth and easily cleanable preferably made of non-absorbent material.
4. The water taps should be non-leaking and directly installed on sinks. Drainage should be efficient.
5. Balance room should be attached to the concerned laboratories.

4. Administration Area:

Sl.No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq .mts	
1	Principal's Chamber	01	30 Sq .mts	1	83.64	
2	Office - I - Establishment	01	60 Sq. mts	4	129.65	
3	Office - II - Academics					
4	Confidential Room					

5. Staff Facilities:

Sl. No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq mts	
1	HODs for B.Pharm Course	Minimum 4	20 Sq mts x 4	1	20	
2	Faculty Rooms for B.Pharm course		10 Sq mts x n (n=No of teachers)	2	83.64	

6. Museum, Library, Animal House and other Facilities

Sl.No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq. mts	
1	Animal House	01	80 Sq mts	1	100	
2	Library	01	150 Sq mts	1	322.72	
3	Museum	01	50 Sq mts (May be attached to the Pharmacognos y lab)	1	68.36	
4	Auditorium / Multi-Purpose Hall (Desirable)	01	250 - 300 seating capacity	1	327.60	
5	Seminar Hall	01		1	322.72	
6	Herbal Garden (Desirable)	01	Adequate Number of Medicinal Plants	1	500	

Signature of the Head of the Institution

Signature of the Inspectors

7. Student Facilities:

Sl. No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq. mts	
1	Girl's Common Room (Essential)	01	60 Sq.mts	1	204.83	
2	Boy's Common Room (Essential)	01	60 Sq.mts		--	
3	Toilet Blocks for Boys	01	24 Sq.mts	--	--	
4	Toilet Blocks for Girls	01	24 Sq.mts	2	78.06	
5	Drinking Water facility – Water Cooler (Essential).	01		2	Available	
6	Boy's Hostel (Desirable)	01	9 Sq .mts / Room Single occupancy	--	--	
7	Girl's Hostel (Desirable)	01	9 Sq .mts / Room (single occupancy) 20 Sq mts / Room (triple occupancy)	1	1500	
8	Power Backup Provision (Desirable)	01		1	96.19	

8. Computer and other Facilities:

Name	Required	Available		Remarks of the Inspectors
		No.	Area in Sq. mts	
Computer Room for B.Pharm Course	01 (Area 75 Sq mts)	1	196.47	
Computer (Latest Configuration)	1 system for every 10 students	60	60	
Printers	1 printer for every 10 computers	06	--	
Multi Media Projector	01	04	--	
Generator (5KVA)	01	01	--	

Signature of the Head of the Institution

Signature of the Inspectors

9. Amenities (Desirable)

Name	Requirement as per Norms in area	Available		Available	Remarks/ Deficiency
		No.	Area in Sq. mts		
Principal quarters	80 Sq. mts	--	--	--	
Staff quarters	16 x 80 Sq. mts	--	--	--	
Canteen	100 Sq. mts	1	153.34	Available	
Parking Area for staff and students		1	200	Available	
Bank Extension Counter		--	--	--	
Co operative Stores		--	--	--	
Guest House	80 Sq. mts	--	--	--	
Transport Facilities for students		1	--	Available	
Medical Facility (First Aid)		2	--	Available	

10. A. Library books and periodicals

The minimum norms for the initial stock of books, yearly addition of the books and the number of journals to be subscribed are as given below:

Sl. No.	Item	Titles (No)	Minimum Volumes (No)	Available		Remarks of the Inspectors
				Title	Numbers	
1	Number of books	150	2000 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	276	2239	
2	Annual addition of books		150 to 200 books per year	72	500	
3	Periodicals Hard copies / online		10 National 05 International periodicals	22/165	22	
4	CDS		Adequate Nos	yes	yes	
5	Internet Browsing Facility		Yes/No (Minimum ten computers)	Available	yes	
6	Reprographic Facilities: Photo Copier Fax Scanner		01 01 01	01 01 01	01 01 01	
7	Library Automation and Computerized System YES					
8	Library Timings 8.00 AM 6.00 PM					

10.B. Library Staff:

	Staff	Qualification	Required	Available	Remarks of the Inspectors
1	Librarian	M. Lib	01	Available	
2	Assistant Librarian	D. Lib	01	Available	
3	Library Attenders	10 +2 / PUC	02	Available	

Signature of the Head of the Institution

Signature of the Inspectors

PART III ACADEMIC REQUIREMENTS

Course Curriculum:

1. Student Staff Ratio:

(Required ratio --- Theory → 50:1 and Practicals → 20:1) If more than 20 students in a batch 2 staff members to be present provided the lab is spacious.

Theory
50:1

Practicals
20:1

Remarks of the Inspectors

2. Scheme of B. Pharm Course:

Annual

Semester

3. Date of Commencement of session / sessions:

Commencement	Completion
Sep	Feb

4. Vacation:

Summer:

Winter:

5. Total No. of working days:

6. Time Table:

Time Table for B. Pharm course Enclosed

Yes

No

7. Whether the prescribed numbers of classes are being conducted as per university norms

I B. Pharm:

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs	No of Hours Conducted	Prescribed No of Hours	No of Hours Conducted	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
1	2	3	4	5		
Human Anatomy & Physiology	75	In Progress	75	In Progress	In Progress	
Pharmaceutics	50		75			
Pharmacognosy	50		75			
Ph.Organic Chemistry	75		75			
Ph.Inorganic Chemistry	75		75			
Human Anatomy & Physiology	75		75			
Pharmaceutics	50		75			
Pharmacognosy	50		75			
Ph.Organic Chemistry	75		75			
Ph.Inorganic Chemistry	75		75			

Signature of the Head of the Institution

II B. Pharm:

Subject	No of Theory Classes		Practical			In Progress	Remarks of the Inspectors
	Prescribed No of Hrs	No of Hours Conducted	Prescribed No of Hours	No of Hours Conducted	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class		
1	2	3	4	5			
Physical Pharmaceutics	75	Not Applicable	75	Not Applicable	Not Applicable		
Ph. Microbiology	75		75				
Pathophysiology	75		0				
Applied Biochemistry	75		75				
Ph. Organic Chemistry - II	75		75				
Physical Pharmaceutics	75		75				
Ph. Microbiology	75		75				
Pathophysiology	75		0				
Applied Biochemistry	75		75				
Ph. Organic Chemistry - II	75		75				

Signature of the Head of the Institution

Signature of the Inspectors

III B. Pharm:

Subject 1	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
Medicinal Chemistry - I	75	Not Applicable	75	Not Applicable	Not Applicable	
Pharmacology	75		0			
Pharmaceutical Engineering	75		100			
Ph. Jurisprudence	50		0			
Pharmacognosy and Phytochemistry	75		100			
Medicinal Chemistry - I	75		75			
Pharmacology	75		0			
Pharmaceutical Engineering	75		100			
Ph. Jurisprudence	50		0			
Pharmacognosy and Phytochemistry	75		100			

IV B. Pharm:

Subject 1	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
Medicinal Chemistry - II	75	Not Applicable	75	Not Applicable	Not Applicable	
Pharmacology	50		100			
Instrumental Bio Medical Analysis	75		75			
Pharmaceutical technology and bio Pharmaceutics	75		75			
Industrial Pharmacognosy	50		75			
Advanced Industrial Pharmacy	50		0			
Ph. Kinetic and TDM	50		0			
Hospital and Clinical Pharmacy	50		0			
Pharmaceutical Marketing Management	50		0			

Signature of the Head of the Institution
Signature of the Inspectors

8. Whether Tutorials are being conducted (if any, as per university norms)

9. Number of Guest Lectures / Seminars / Workshops / Symposia / Presentations conducted during last Three years.

A.

Name of the Event	Year 2017	Year 2016	Year 2015
Guest Lectures	Not Applicable		
Seminars			
Workshops			
Symposia			

B. Papers Presented / Published during last three years

	Year 2017		Year 2016		Year 2015	
	National	International	National	International	National	International
Published	NIL					
Presented						

10. Whether Internal Assessments are conducted periodically as per university norms

Yes

No

Class	I Sessional Dates		II Sessional Dates		III Sessional Dates		Remarks of the Inspectors
	DD/MM/YY		DD/MM/YY		DD/MM/YY		
	Theory	Practicals	Theory	Practicals	Theory	Practicals	
I.B.PHARM	08.01.2018	22.01.2018	12.02.2018	19.02.2018	-	-	

11. Whether Evaluation of the internal assessments is Fair Yes

No

Class	No. of Candidates scored more than 80%		No. of Candidates scored between 60 - 80%		No. of Candidates scored between 50 - 60%		No. of Candidates Less than 50%		Remarks of the Inspectors
	Th	Pr	Th	Pr	Th	Pr	Th	Pr	
I B.Pharm	25	26	30	30	4	3	0	0	
II B.Pharm	In progress								
III B.Pharm									
IV B.Pharm									

Signature of the Head of the Institution

12. Work load of Faculty members for B. Pharm

Sl. No	Name of the Faculty	Subjects taught	B. Pharm		Total work load	Specific Remarks of the Inspector
			Th	Pr		
1	Dr.P.Ashokkumar	Biochem	3	9	12	
2	Mr.R.Thirumurthy	Phar. Inorganic chemistry	3	9	12	
3	Mrs.S.Thenmozhi	Remidial Biology & Environmental science	3	9	12	
4	Mr.P.Sudhakar	Pharmacology II/pathophysiology	6	9	15	
5	Ms.K.Kokila	Human anatomy & Phys-I	3	9	12	
6	Mrs. C.Kalaiselvi	Pharmaceutics - II	3	9	12	
7	Mr.K.V.Parthasarathy	Phar.Analysis - I	3	9	12	
8	Ms.S.Priyadharsini	Anatomy Physiology	3	9	12	
9	Mrs.Dhanalakshmi	Microbiology	3	9	12	
10	Ms.J.Roshini	Remedial Maths	3		3	
11	Ms.S.Saranya	Computer Application	3	9	12	
12	Ms.P.Tamilarasi	Communication Skill	3		3	
13	Mr.M.K.M.Abdul Lathiff	Poc I & II	3	9	12	
14	Ms.Kavitha	Phar.Chem II	3	9	12	
15	Mr.B.Arulkumar	Pharmaceutics I	3	9	12	
ENCLOSED [ANNEXURE - I]						

13. Percentage of students qualified in GATE in the last Three Years

Details	Year 2017	Year 2016	Year 2015
No. of Students Appeared	Not Applicable		
No. of Students Qualified			
Percentage			

14. Whether the Institution has an Industry - Institution Interaction cell Yes

No

If applicable please give the details for the previous Year

Events	Details for the Previous Year
No. of Industrial visits	Nil
Industrial Tour	Nil
Industrial Training	Nil
No. of Resource Persons from the Industry for Guest Lectures	Nil
No. of Collaboration projects with Industry	Nil

15. Percentage of students Placed through the College Placement Cell in the Last Three Years

Year	Year 2017	Year 2016	Year 2015
No. of students appeared for campus interview	Not Applicable		
% Placed			

16. Whether Professional Society Activities are Conducted (Enclose Details) (ISTE, IPA, APTI, ICTA and Related Societies)

 No

PART IV - PERSONNEL

TEACHING STAFF:

1. Details of Teaching Faculty for B.Pharm Course to be enclosed in the format mentioned below:

Sl No	Name	Designation	Qualification	Date of Joining	Teaching Experience	State Pharmacy Council Reg No.	Signature of the faculty	Remarks of the Inspectors
					After PG			
1	Dr.P.Ashokkumar	Principal	M.Pharm., Ph.D.,	27.01.2017	20 yrs	1941A1		
2	Mrs.S.Thenmozhi	Asst.Proff	M.Pharm., Ph.D.,	09.11.2016	9 yrs	4174A1		
3	Mr.R.Thirumurthy	Asst.Proff	M.pharm	06.07.2017	7 yrs	7638A1		
4	Mr.P.Sudhakar	Asst.Prof	M.Pharm.,	09.11.2016	5 Yrs	15095 A1		
5	Mr.M.K.M.Abdul Lathiff	Asst.Prof	M.Pharm	27.07.2017	8 Yrs	11478 A1		
6	Ms.K.Kokila	Asst.Prof	M.Pharm.,	26.07.2017	1 Yr	20549 A1		
7	Mrs. C.Kalaiselvi	Asst.Prof	M.Pharm.,	26.07.2017	6 Yrs	14318 A1		
8	Mr.K.V.Parthasarathy	Asst.Prof	M.Pharm.,	26.07.2017	7 Yrs	13512 A1		
9	Ms.S.Priyadharsini	Asst.Prof	M.Pharm.,	27.07.2017	1 yr	11833A1		
10	Mrs.Dhanalakshmi	Asst.Prof	M.Pharm.,	26.07.2017	6 Yrs	11833 A1		
11	Mr.N.Rajeshkumar	Asst.Prof	M.Pharm.,	13.10.2016	2 Yrs	13929 A1		
12	Mr.B.Arulkumar	Asst.Prof	M. Pharm	30.05.17	3 Yrs	13831 A1		
13	Ms.I.Rohini	Lecturer	M.Phil, Maths	30.05.2017	0.10 Yrs	--		
14	Ms.S.Saranya	Asst.Prof	M.Phil CS	13.10.2016	Fresh	--		
15	Ms.P.Tamilarasi	Asst.Prof	M.A Eng.	27.07.2017	Fresh	--		
ENCLOSED [ANNEXURE - II]								

2. Qualification and number of Staff Members

Qualification		
M. Pharm	PhD	Others - Full Time / Part Time
12	2	3

3. Teaching Staff required year wise exclusively for B.Pharm for intake of 100 Students.

	No. of staff required
1. Pharmaceutical Chemistry	02
2. Pharmaceutical Analysis	02
3. Pharmacology	03
4. Pharmacognosy	01
5. Pharmaceutics	02
6. Pharmacy Practice	01
7. Principal	01
Total	12
*Part time teaching Staff	03
Remarks of the Inspection Team	

***Part time teaching staff for Mathematics, Biology and Computer Science can be appointed.**

Signature of the Head of the Institution

Signature of the Inspectors

4. **Staff Pattern for B. Pharm courses Department wise / Division wise:**

Professor: Asst. Professor: Lecturer

Department / Division	Name of the post	For strength of 100 students	Provided by the institution	Remarks of inspection team
Department of Pharmaceutics	Professor	1	0	
	Asst. Professor	2	2	
	Lecturer	3	0	
Department of Pharmaceutical Chemistry	Professor	1	1	
	Asst. Professor	3	2	
	Lecturer	3	0	
Department of Pharmacology	Professor	1	0	
	Asst. Professor	2	3	
	Lecturer	1	0	
Department of Pharmacognosy	Professor	1	0	
	Asst. Professor	1	1	
	Lecturer	2	0	
Department of Pharmacy Practice	Asst. Professor	1	1	
	Lecturer	1	0	
Department of Pharmaceutical Analysis	Asst. Professor	1	2	
	Lecturer	1	0	

5. **Selection criteria and Recruitment Procedure for Faculty:**

a.	Whether Recruitment Committee has been formed	Yes
b.	Whether Advertisement for vacancy is notified in the Newspapers	Yes
c.	Whether Demonstration Lecture has been conducted	Yes
d.	Whether opinion of Recruitment Committee Recorded	Yes

6. **Details of Faculty Retention for:**

Name of Faculty Member	Period	%
ENCLOSED [ANNEXURE - III]	Duration of 15 yrs. and above	New College
	Duration of 10 yrs. and above	
	Duration of 5 yrs. and above	
	Less than 5 yrs.	

Signature of the Head of the Institution

Signature of the Inspectors

7. Details of Faculty Turnover:

Name of Faculty Member	Period	More than 50%	50%	25%	Less than 25%
ENCLOSED [ANNEXURE - IV]	% of faculty retained in last 3 yrs	Nil	No	No	YES

8. Number of Non-teaching staff available for B. Pharm course for intake of 100 Students:

Sl. No.	Designation	Required (Minimum)	Required Qualification	Available		Remarks of the Inspection team
				Number	Qualification	
1	Laboratory Technician	1 for each Dept	D. Pharm	4	D.Pharmacy	
2	Laboratory Assistants / Attenders	1 for each Lab (minimum)	SSLC	9	B.Sc & HSC	
3	Office Superintendent	1	Degree	1	M.Sc	
4	Accountant	1	Degree	1	M.C.A	
5	Store keeper	1	D. Pharm/ Degree		-	
6	Computer Data Operator	1	BCA / Graduate with Computer Course	2	MCA	
7	Office Staff I	1	Degree	0	-	
8	Office Staff II	2	Degree	0	-	
9	Peon	2	SSLC	1	B.sc	
10	Cleaning personnel	Adequate	---	Adequate	-	
11	Gardener	Adequate	---	Adequate	7 th	

Signature of the Head of the Institution

Signature of the Inspectors

9. Scale of pay for Teaching faculty (to be enclosed):

Sl. No	Name	Qualification	Designation	Basic pay Rs.	DA Rs.	HRA Rs.	CCA Rs.	Other allowance Rs.	Deductions			Bank A/C No	PAN No	EPF A/c no.	Total	Signature
									P T	TDS	EPF					
ENCLOSED [ANNEXURE - V]																

10. Whether facilities for Research / Higher studies are provided to the faculty?

(Inspectors to verify documents pertaining to the above)

YES

11. Whether faculty members are allowed to attend workshops and seminars?

(Inspectors to verify documents pertaining to the above)

YES

12. Scope for the promotion for faculty: Promotions

Yes

No

13. Gratuity Provided

Yes

No

14. Details of Non-teaching staff members (list to be enclosed):

Sl No	Name	Designation	Qualification	Date of Joining	Experience	Signature	Remarks of the Inspectors
ENCLOSED [ANNEXURE - VI]							

15. Whether Supporting Staff (Technical and Administrative) are encouraged for skill up gradation programs.

Yes

Signature of the Head of the Institution

Signature of the Inspectors

PART V - DOCUMENTATION

Records Maintained: Essential

Sl. No	Records	Yes	No	Remarks of the Inspectors
1	Admissions Registers	YES		
2.	Individual Service Register	YES		
3.	Staff Attendance Registers	YES		
4.	Sessional Marks Register	YES		
5.	Final Marks Register	YES		
6.	Student Attendance Registers	YES		
7.	Minutes of meetings- Teaching Staff	YES		
8.	Fee paid Registers	YES		
9.	Acquittance Registers	YES		
10.	Accession Register for books and Journals in Library	YES		
11.	Log book for chemicals and Equipment costing more than Rupees one lakh	YES YES		
12.	Job Cards for laboratories	YES		
13.	Standard Operating Procedures (SOP's) for Equipment	YES		
14.	Laboratory Manuals	YES		
15.	Stock Register for Equipment	YES		
16.	Animal House Records as per CPCSEA	YES		

Signature of the Head of the Institution

Signature of the Inspectors

PART - VI

1. Financial Resource allocation and utilization for the past three years: (Audited Accounts for previous year to be enclosed)

Sl	Expenditure in Rs.			Expenditure in Rs.			Expenditure in Rs			Remarks of the Inspectors*
	2015			2016			2017			
No.	Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Returning	Total budget sanctioned	Recurring	Non Returning	
1										

2. Total amount spent on chemicals and glassware for the past three years:

Sl	Expenditure in Rs.			Expenditure in Rs.			Expenditure in Rs			Remarks of the Inspectors*
	2015			2016			2017			
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
1	Chemicals			Chemicals			Chemicals			
2	Glassware			Glassware			Glassware			

**3. Total amount spent on equipments for the past three years:
(Enclose purchase invoice)**

Sl	Expenditure in Rs.			Expenditure in Rs.			Expenditure in Rs			Remarks of the Inspectors*
	2015			2016			2017			
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Equipment			Equipment			Equipment			

Signature of the Head of the Institution

Signature of the Inspectors

4. Total amount spent on Books and Journals for the past three years:

Sl No.	Expenditure in Rs. 2015			Expenditure in Rs. 2016			Expenditure in Rs. 2017			Remarks of the Inspectors*
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
1	Books			Books			Books			
2	Journals			Journals			Journals			

*Last three years including this academic year till the date of inspection

Signature of the Head of the Institution

Signature of the Inspectors

PART VII - EQUIPMENT AND APPARATUS

Department wise list of minimum equipments required for B. Pharm (for a batch of 20 students)

DEPARTMENT OF PHARMACOLOGY

Equipment:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Microscopes	20	20	Yes	
2	Haemocytometer with Micropipettes	20	20	Yes	
3	Sahli's haemocytometer	20	22	Yes	
4	Hutchinson's spirometer	01	01	Yes	
5	Spygmomanometer	10	20	Yes	
6	Stethoscope	10	20	Yes	
7	Permanent Slides for various tissues	One pair of each tissue Organs and endocrine glands One slide of each organ system	Available	Yes	
8	Models for various organs	One model of each organ system	Available	Yes	
9	Specimen for various organs and systems	One model for each organ system	Available	Yes	
10	Skeleton and bones	One set of skeleton and one spare bone	Available	Yes	
11	Different Contraceptive Devices and Models	One set of each device	Available	Yes	
12	Muscle electrodes	01	-	-	
13	Lucas moist chamber	01	-	-	
14	Myographic lever	01	-	-	
15	Stimulator	01	-	-	
16	Centrifuge	01	02	Yes	
17	Digital Balance	01	03	Yes	
18	Physical /Chemical Balance	01	02	Yes	
19	Sherrington's Kymograph Machine / Polyrite	10	-	-	

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Signature Inspector:

20	Sherrington Drum	10	-	-	
21	Perspex bath assembly (single unit)	10	-	-	
22	Aerators	10	-	-	
23	Computer with LCD	01	-	-	
24	Software packages for experiment	01	-	-	
25	Standard graphs of various drugs	Adequate number	-	-	
26	Actophotometer	01	-	-	
27	Rotarod	01	-	-	
28	Pole climbing apparatus	01	-	-	
29	Analgesiometer (Eddy's hot plate and radiant heat methods)	01	-	-	
30	Convulsiometer	01	-	-	
31	Plethysmograph	01	-	-	
32	Digital pH meter	01	01	Yes	

Apparatus:

Sl. No.	Name	Minimum required No.s	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Folin-Wu tubes	60	60	Yes	
2	Dissection Tray and Boards	10	-	-	
3	Haemostatic artery forceps	10	10	Yes	
4	Hypodermic syringes and needles of size 15,24,26G	10	10	Yes	
5	Levers, cannulae	20	-	-	

NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.

DEPARTMENT OF PHARMACOGNOSY

Equipment:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Microscope with stage micrometer	20	20	Yes	
2	Digital Balance	02	02	Yes	
3	Autoclave	02	02	Yes	
4	Hot air oven	02	02	Yes	

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Signature of the Inspectors

5	B.O.D.incubator	01	01	Yes	
6	Refrigerator	01	01	Yes	
7	Laminar air flow	01	01	Yes	
8	Colony counter	02	01	Yes	
9	Zone reader	01	-	-	
10	Digital pH meter	01	01	Yes	
11	Sterility testing unit	01	-	-	
12	Camera Lucida	20	10	-	
13	Eye piece micrometer	20	20	Yes	
14	Incinerator	01	-	-	
15	Moisture balance	01	-	-	
16	Heating mantle	20	20	Yes	
17	Flourimeter	01	01	Yes	
18	Vacuum pump	02	01	Yes	
19	Micropipettes (Single and multi-channeled)	05	03	yes	
20	Micro Centrifuge	01	01	Yes	
21	Projection Microscope	01	-	-	

Apparatus:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Reflux flask with condenser	20	-	-	
2	Water bath	20	25	Yes	
3	Clavengers apparatus	10	-	-	
4	Soxhlet apparatus	10	10	Yes	
6	TLC chamber and sprayer	10	-	-	
7	Distillation unit	01	--	-	

NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.

DEPARTMENT OF PHARMACEUTICAL CHEMISTRY Equipment:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Hot plates	05	05	Yes	
2	Oven	03	03	Yes	
3	Refrigerator	01	01	Yes	

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4	Analytical Balances for demonstration	05	05	YES	
5	Digital balance 10mg sensitivity	10	10	YES	
6	Digital Balance (1mg sensitivity)	01	01	YES	
7	Suction pumps	06	06	YES	
8	Muffle Furnace	01	01	YES	
9	Mechanical Stirrers	10	10	YES	
10	Magnetic Stirrers with Thermostat	10	10	YES	
11	Vacuum Pump	01	01	YES	
12	Digital pH meter	01	01	YES	
13	Microwave Oven	02	02	YES	

Apparatus:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Distillation Unit	02	02	YES	
2	Reflux flask and condenser single necked	20	10	YES	
3	Reflux flask and condenser double / triple necked	20	20	YES	
4	Burettes	100	120	YES	
5	Arsenic Limit Test Apparatus	25	25	YES	
6	Nessler's Cylinders	50	70	yes	

NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.

DEPARTMENT OF PHARMACEUTICS

Equipment:

Sl. No.	Name	Minimum Required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Mechanical stirrers	20	-	-	
2	Homogenizer	10	-	-	
3	Digital balance	05	02	YES	
4	Microscopes	10	10	YES	
5	Stage and eye piece micrometers	15	20	YES	
6	Brookfield's viscometer	01	-	-	
7	Tray dryer	01	01	YES	
8	Ball mill	01	01	YES	

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9	Sieve shaker with sieve set	01	01	YES	
10	Double cone blender	01	-	-	
11	Propeller type mechanical agitator	05	01	YES	
12	Autoclave	01	01	YES	
13	Steam distillation still	01	01	YES	
14	Vacuum Pump	01	01	YES	
15	Standard sieves, sieve no. 8, 10, 12,22,24, 44, 66, 80	10 sets	10 sets	YES	
16	Tablet punching machine	01	01	YES	
17	Capsule filling machine	01	01	YES	
18	Ampoule washing machine	01	-	-	
19	Ampoule filling and sealing machine	01	01	YES	
20	Tablet disintegration test apparatus IP	02	01	YES	
21	Tablet dissolution test apparatus IP	01	01	YES	
22	Monsanto's hardness tester	02	02	YES	
23	Pfizer type hardness tester	01	02	YES	
24	Friability test apparatus	01	01	YES	
25	Clarity test apparatus	01	01	YES	
26	Ointment filling machine	01	01	YES	
27	Collapsible tube crimping machine	01	01	YES	
28	Tablet coating pan	01	01	YES	
29	Magnetic stirrer, 500ml and 1 liter capacity with speed control	05 EACH	02	YES	
30	Digital pH meter	01	01	YES	
31	All purpose equipment with all accessories	01	01	YES	
32	Aseptic Cabinet	01	01	YES	
33	BOD Incubator	02	02	YES	
34	Bottle washing Machine	01	01	YES	
35	Bottle Sealing Machine	01	01	YES	
36	Bulk Density Apparatus	02	02	YES	
37	Conical Percolator (glass/ copper/ stainless steel)	10	-	-	
38	Capsule Counter	02	02	YES	
39	Energy meter	02	02	YES	
40	Hot Plate	02	02	YES	

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Signature of the Inspectors

41	Humidity Control Oven	01	-	-	
42	Liquid Filling Machine	01	01	yes	
43	Mechanical stirrer with speed regulator	02	-		
44	Precision Melting point Apparatus	01	01	YES	
45	Distillation Unit	01	01	YES	

Apparatus:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Ostwald's viscometer	20	-	-	
2	Stalagmometer	20	-	-	
3	Desiccator*	10	-	-	
4	Suppository moulds	20	20	YES	
5	Buchner Funnels (Small, medium, large)	05 each	-	-	
6	Filtration assembly	01	01	YES	
7	Permeability Cups	05	-	-	
8	Andreason's Pipette	05	05	YES	
9	Lipstick moulds	10	20	YES	

NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.

PHARMACEUTICAL BIOTECHNOLOGY

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Orbital shaker incubator	01	-	-	
2	Lyophilizer (Desirable)	01	-	-	
3	Gel Electrophoresis (Vertical and Horizontal)	01	--	-	
4	Phase contrast/Trinocular Microscope	01	-	-	
5	Refrigerated Centrifuge	01	1	-	
6	Fermenters of different capacity (Desirable)	01	-	-	
7	Tissue culture station	01	-	-	
8	Laminar airflow unit	01	01	YES	

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Signature of the Inspectors

9	Diagnostic kits to identify infectious agents	01	-	-	
10	Rheometer	01	-	-	
11	Viscometer	01	-	-	
12	Micropipettes (single and multi-channeled)	01 each	-	-	
13	Sonicator	01	-	-	
14	Respinometer	01	-	-	
15	BOD Incubator	01	-	-	
16	Paper Electrophoresis Unit	01	-	-	
17	Micro Centrifuge	01	-	-	
18	Incubator water bath	01	01	YES	
19	Autoclave	01	01	YES	
20	Refrigerator	01	01	YES	
21	Filtration Assembly	01	-	-	
22	Digital pH meter	01	01	YES	

NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.

CENTRAL INSTRUMENTATION ROOM:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Colorimeter	01	01	YES	
2	Digital pH meter	01	01	YES	
3	UV- Visible Spectrophotometer	01	01	YES	
4	Flourimeter	01	01	YES	
5	Digital Balance (1mg sensitivity)	01	01	YES	
6	Nephelo Turbidity meter	01	01	YES	
7	Flame Photometer	01	-	-	
8	Potentiometer	01	01	YES	
9	Conductivity meter	01	01	YES	
10	Fourier Transform Infra Red Spectrometer (Desirable)	01	-	-	
11	HPLC	01	-	-	
12	HPTLC (Desirable)	01	-	-	

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Signature of the Inspectors

13	Atomic Absorption and Emission spectrophotometer (Desirable)	01	-	-	
14	Biochemistry Analyzer (Desirable)	01	-	-	
15	Carbon, Hydrogen, Nitrogen Analyzer (Desirable)	01	-	-	
16	Deep Freezer (Desirable)	01	-	-	
17	Ion- Exchanger	01	-	-	
18	Lyophilizer (Desirable)	01	-	-	

Signature of the Head of the Institution

Signature of the Inspectors

<p>Observation of the Inspectors:</p> <p>Compliance of the last recommendations by Inspectors</p>
<p>Specific observations if not complied</p>

<p>2. Signature of Inspectors:</p>	

Note:

1. The Inspection Team is instructed to physically verify the details and records filled up by the college in the application form submitted by the college, which is with you now and record the observations, opinions and recommendations in clear and explicit terms.
2. The team is requested to record their comments only after physical verification of records and details.

Signature of the Head of the Institution

Signature of the Inspectors

PHARMACY COUNCIL OF INDIA

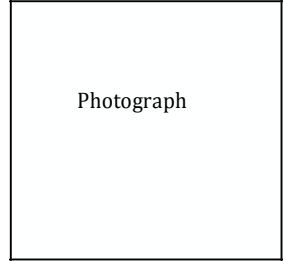
STAFF DECLARATION FORM

From

Teacher's Name

(as on University Degree certificate)

Recent Passport size photo of the Employee
Signed by Dean/Principal of the College.



Date of Birth & Age

Qualification	College & University	Year	Registration No. with State Pharmacy Council	Name of the State Pharmacy Council
B.Pharm				
M.Pharm				
(Ph.D.)/others				

Copies of Registration Certificate and University degree/PG/Ph.D. be attached.

Present Designation : _____

Department : _____

College : _____

City : _____

Nature of appointment : Permanent/Temporary/Adhoc/Honorary/Part-time

Whether belongs to : O.G./SC/ST/OBC/Ex-service/Others

Contd. on page 2

Permanent Residential
Address of employee : _

Copy of Passport/Voter Card/Ration Card/PAN No./Electricity Bill/Driving License Attached as a proof of residence.

STD Code

Phone No.

Phone & Fax Number
with Code

Office : _____

Residence : _____

E-mail address : _____

Date of joining present institution : _____ as _____
(Designation)

Details of the previous appointments/teaching experience

Position	Name of Institution	From	To	Total Experience in years
Lecturer				
Reader/ Assistant Professor				
Professor				
Principal				

1) Before joining present institution I was working at _____ as _____ and relieved on _____ after resigning/retiring (**relieving order is enclosed from the previous institution**).

2) I, hereby undertake that I have not given my name as teaching faculty in any other Pharmacy institution for teaching any Pharmacy course and not working in any where other than this institution Pharmacy College/Medical College/Dental College/Industry/Community Pharmacy/Hospital Pharmacy/Govt. Service/any other service in the State or outside the State in any capacity full-time/part-time other than the above.

Contd. on page 3

3) I have drawn total emoluments from this college as under (Please fill the data of last academic session) :-

	Amount Received	TDS
April, 20__		
May, 20__		
June, 20__		
July, 20__		
August, 20__		
September, 20__		
October, 20__		
November, 20__		
December, 20__		
January, 20__		
February, 20__		
March, 20__		

(Copy of my form 16 (TDS certificate) for the last financial year is attached)

P.A.N. : _____ Circle : _____

Declaration

1. I have not worked at any other pharmacy college/institution or presented myself at any inspection during my employment in this college.
2. It is declared that each statement and/or contents of this declaration made by the undersigned are absolutely true and correct. In the event of any statement made in this declaration subsequently turning out to be incorrect or false the undersigned has understood and accepted that such misdeclaration in respect to any content of this declaration shall also be treated as a gross misconduct thereby rendering the undersigned liable for necessary disciplinary action (including removal of his name from Register of Registered Pharmacists).

Signature of the Employee:

Date : _____ Place: _____

Endorsement

This endorsement is the certification that the undersigned has satisfied himself/herself about the correctness and veracity of each content of this declaration and endorses the abovementioned declaration as true and correct. In the event of this declaration turning out to be either incorrect or any part of this declaration subsequently turning out to be incorrect or false it is understood and accepted that the undersigned shall also be equally responsible besides the declarant himself/herself for any such misdeclaration or misstatement

Countersigned by the Director/Dean/
Principal in respect of Teaching Staff

Date : _____ Place : _____

