



## PHARMACY COUNCIL OF INDIA

E-mail : pcipresident@gmail.com

NBCC Centre, 3rd Floor Plot No.2, Community Centre

Website : www.pci.nic.in

Maa Anandamai Marg Okhla Phase I

Contact : 011-61299900/01/02/03

NEW DELHI - 110020

### LETTER OF APPROVAL

**Institute Name / Inst ID : Mookambika College of Pharmaceutical Sciences and Research Ettappilly Mannathoor P O Muvattupuzha Ernakulam/PCI-1385**

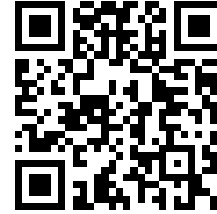
**State : KERALA**

**District : ERNAKULAM**

**Sub-District : Muvattupuzha**

**Village/Town/City : Thirumarady**

**Pin Code : 686667**



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	Decision
B.Pharm	The Registrar Kerala University of Health Sciences Medical College P O Thrissur	Approved for conduct of 4th year course for 2019-2020 for 60 intake (B.Pharm) Allowed 60 admission in 2019-2020 in 1st year (B.Pharm). Also to inspect

Date : 10th June 2019

Archana  
Mudgal

For Archana Mudgal  
Registrar-cum-Secretary  
PCI

Copy to:

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