



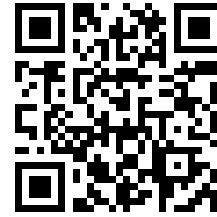
## PHARMACY COUNCIL OF INDIA

E-mail : registrar@pci.nic.in  
Website : www.pci.nic.in  
Contact : 011-61299900/01/02/03

NBCC Centre, 3rd Floor Plot No.2, Community Centre  
Maa Anandamai Marg Okhla Phase I  
NEW DELHI - 110020

### DECISION LETTER

**Institute Name / Inst ID :** Arni University Vpo Kathgarh Tehsil Indora Distt Kangra 176 401/PCI-130  
**State :** HIMACHAL PRADESH  
**District :** KANGRA  
**Sub-District :** Indora  
**Village/Town/City :** kathgarh  
**Pin Code :** 176401



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	Approval Status
D.Pharm	The Vice Chancellor Arni University VPO Kathgarh Tehsil Indora District Kangra	From 2018-2019 to 2020-2021 u s 12 for 60 intake	Approved

Date :10th April 2020

ANIL  
Mittal

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)

Note: Validity of the course details may be verified at [www.pci.nic.in](http://www.pci.nic.in).