

# All India Council for Technical Education

(An Autonomous Organization, Under Ministry of HRD, Govt. of India).

Nelson Mandela Marg, Vasant Kunj, New Delhi-110067 Website: <https://www.aicte-india.org>



## APPROVAL PROCESS 2018-19

### Application Report Part-2

**Permanent Institute Id** 1-2524947151  
**Current Application No.** 1-3508990608  
**Application No. of 2017-2018** 1-3324304626  
**AICTE File No.** NEW  
**Application Type** Extension-Expansion-Closure  
**Organization Registration No.** NA

#### Principal/Director/Registrar

<b>Surname</b>	DEBROY	<b>First Name</b>	SANIT
<b>Father's Name</b>	LATE CHITTARN DEBROY	<b>Date of Birth</b>	31/07/1959
<b>Doctorate Degree</b>	No	<b>Field of Specialization</b>	MBA
<b>Master's Degree</b>	M.A.	<b>Bachelor Degree</b>	B.A.
<b>Other Qualifications</b>	LLB	<b>Date of Joining the Institute as head</b>	09/06/2003
<b>Appointment Type</b>	Regular	<b>Exact Designation</b>	Principal
<b>Experience (T-R-I)</b>	<b>Teaching</b> 0	<b>Research</b> 0	<b>Industry</b> 0

#### Faculty Counts

Total No. of Faculty	3
No. of Teaching faculty approved by University/Government?	5

#### Faculty Details

\*Faculty Details available as on AICTE Web Portal

Sr . No.	Faculty ID	Programme	Course	Faculty Type	FT/PT	First Name	Surname	Exact Designation	Date of Joining the Institute	Appointment Type	Doctorate	Master's Degree	Bachelor 's Degree	Other Qualification	Aadhar Card	PAN Card	Total Gross Salary for the Last Financial Year	Pay Scale
1	1-2524947806	PHARMACY	PHARMACEUTICAL CHEMISTRY	PG	FT	KUNTAL	MANNA	ASST PROFESSOR	26/11/2011	Regular	Y	M.PHARM	B.PHARM	DISM	711496532874	AKRPM1383R	1200000	V1th Pay Scale

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

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## Application Report - Part 2



Application Status: **Submitted**  
Application Sub-Status: **Payment Not Applicable**

Report Generated on :-12/02/2018

2	1- 252 502 621 7	PHARMACY	PHARMACEUTICAL CHEMISTRY	PG	FT	RAJAT	GH OSH	ASST PROFE SSOR	12/11/201 1	Regular	N	M.PH ARM A	B.PH ARM		433810 629916	AVH PG49 94R	900000	Vlth Pay Scale
3	1- 340 836 582 3	PHARMACY	PHARMACEUTICAL CHEMISTRY		FT	PRATAP	ACH ARY A	ASST PROFE SSOR	02/05/201 6	Regular	Y	M.PH ARM	B.PH ARM	P.G.DI PLOM A IN SPEC TROS COPY	344201 662365	BLOP A123 5P	702420	

### **Adjunct Faculty/Resource Person from Industry Details**

Data not entered by Institute

### **Technical Staff**

Data not entered by Institute

### **Admin & Library Staff**

Data not entered by Institute

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

Printed By : aict00405

## Application Report - Part 2



Application Status: **Submitted**  
Application Sub-Status: **Payment Not Applicable**

Report Generated on :-12/02/2018

### **DECLARATION**

**BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTE/UNIVERSITY DEPARTMENT**

I, as the Head of the Institution, hereby declare that:

- a) I have carefully gone through the AICTE Regulations Notification dated on 30th November, 2016, published in the Gazette of India - Extraordinary Part III, Section- 4 and its amendment 05th December 2017 also the various provisions mentioned in the Approval Process Hand Book 2018-19.
- b) I am fully aware of the data uploaded by me in respect of my institute on the web portal.
- c) I am aware that there is no provision for correction of data, alteration of data, subsequent editing and appeal etc. for the online application once uploaded on the web portal.
- d) I am also aware that application for seeking Extension of Approval(EOA), Increase/Reduction of intake, Addition of new courses, Change of site, Closure of course, Supernumerary Seats under PIO/FN/Gulf quota Approval status/OCI, NRI, Change of name, and Conversion of women institute into Co-ed institute and vice versa (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2018-19.
- e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my institute on the portal.
- f) I am also aware that Institute is eligible for grant of Extension of Approval to the Existing Institutions, Extended EoA(if Applicable as per APH 2018-19), only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2018-19.

**Signature of Principal/Director/Registrar**

**Name :**

**Seal/Stamp of the Institute/University Department**

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

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