

PHARMACY COUNCIL OF INDIA

Standard Inspection Format (S.I.F) for institutions conducting D. Pharm course

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

(SIF-A)

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: STD code Telephone No. Fax No. E-mail	Rakshpal Bahadur College of Pharmacy (A centre of Rakshpal Bahadur Management Institute, Bareilly) Near ITBP/Doordarshan/Bukhara Turn, Bareilly 8475002600 info@rbmi.in , veenamathur@rbmi.in
Year of Establishment	2004
Status of the course conducting body: Government / University / Autonomous / Aided / Private (Enclose copy of Registration documents of Society/Trust)	Private (Copy of Registration documents of Society with detailed list of Members enclosed) Please See Annexure - 01
A - I.2 Name, address of the Society/Trust/ Management (attach documentary evidence) STD Code: Telephone No: Fax No: E-mail Web Site:	Harrow Educational Society (Registered) 193/11, Civil Lines, Bareilly Please See Annexure - 01 8475002600 info@rbmi.in , veenamathur@rbmi.in www.rbmi.in
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	Mrs. Veena Mathur, Executive Chairperson, RBCP, Near ITBP/Doordarshan/Bukhara Turn, Bareilly 8475002600 9837094801 veenamathur@rbmi.in
A - I.4 Name and Address of the Head of the Institution	Mrs. Veena Mathur Rakshpal Bahadur College of Pharmacy, Bareilly

Signature of the Head of the Institution

Dr. Vikas Saxena
M.Pharm., Ph.D.

Director
Rakshpal Bahadur College of Pharmacy
Bareilly

Signature of the Inspectors

A -I. 5

FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL

a. Details of Affiliation Fee Paid

Name of the Course	Affiliation Fee paid up to	Receipt No	Dated	Remarks of the Inspectors
D. Pharm	2018-19	D.D. No.258219 Amt. 50,000/-	12-04-2018	

b. APPROVAL STATUS:

Name of the Course	Approved up to	In take Approved and Admitted	PCI	STATE GOVERNMENT	Remarks of the Inspectors
D. Pharm.	Applied for 60 intake	Approval Letter No and Date Approved Intake Actually Admitted		Approved upto 208-19	

c. STATUS OF APPLICATION

Course	Extension of Approval		Increase in Intake of Seats		Remarks	
	Yes	No	Yes	No	Current Intake	Proposed increase in Intake
D. Pharm	Yes	No	Yes	No		

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 status

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 type="checkbox"/>
Multi Institutional Campus	<input type="checkbox"/>

Examining Authority : Board of Technical Education
 With complete postal Address, Telephone No. and STD Code. 1- Guru Govind Singh Marg, Bans Mandi Chauraha, Charbagh Lucknow (U.P.) 0522 - 2630243

Signature of the Head of the Institution

Dr. Vikas Saxena

M.Pharm., Ph.D.

Director

Rakshpal Bahadur College of Pharmacy
Bareilly

Signature of the Inspectors

B - DETAILS OF THE INSTITUTION

B-I.1		Name of the Principal			Dr Vikas Saxena	
Qualification/ Experience	Qualification*		Teaching Experience Required	Actual experience	Remarks of the Inspectors	
	M. Pharm.	✓	5 Years	14 Years (
	Ph.D.	✓	2 Years			

* Documentary evidence should be provided.

B-I.2

For institution seeking continuation of approval

Course	Date of last Inspection	Remarks of the Previous Inspection Report	Complied / Not Complied	Intake reduced/Stopped in the last 03 years*
D. Pharm	6,7 March 2017	No defeciency		

* Enclose Documents

B-I.3

Pay Scales:

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

B-I.4

D. Pharm Course: Admission Statement for the Past three years

ACADEMIC YEAR	Year 2017-18	Year 2017-18	Year 2018-19
Sanctioned	50 admission 50 Admission		
No. of Admissions			
Unfilled Seats			
No. of Excess Admissions			

B-I.5

Academic information: Percentage of D.Pharm, results for the past three years

ACADEMIC YEAR	Year 200_	Year 200_	Year 200_
D.Pharm.	N/A		

Signature of the Head of the Institution

Dr. Vikas Saxena

M.Pharm., Ph.D.

Director

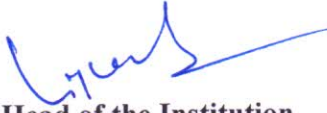
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Bareilly

Signature of the Inspectors

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

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

Signature of the Head of the Institution


Dr. Vikas Saxena
M.Pharm., Ph.D.
Director
Rakshpal Bahadur-College of Pharmacy
Bareilly

Signature of the Inspectors

