PHARMACY COUNCIL OF INDIA

Standard Inspection Format (S.I.F) for institutions conducting B. Pharm for 100 admns.

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

To be filled up by P.C.I.

Inspection No. :

FILE No. :

To be filled up by inspectors

Date of Inspection:

NAME OF THE INSPECTORS: 1. (BLOCK LETTERS)

2.

(SIF-B-1)

PART – I A - GENERAL INFORMATION

A – I .1	
Name of the Institution:	Charak Institute of Pharmacy
Complete Postal address:	Choli road Mandleshwar, the- Maheshwar Distt
	Khargone (M.P.) 451221
STD code	07283
Telephone No.	234034, 234035
Fax No.	234036
E-mail	cipmdl@gmail.com
Year of Establishment	2006
Status of the course conducting body:	
Government / University / Autonomous /	Private
Aided /	
Private (Enclose copy of Registration	
documents of Society/Trust)	
A – I .2	Draun Shiksha Samiti, Choli Road Mandleshwar,
Name, address of the Society/Trust/	Khargone.(mp)451221
Management (attach documentary evidence)	
STD Code:	07283
Telephone No:	234034, 234035
Fax No:	234036
E-mail	cipmdl@gmail.com
Web Site:	www.charakmdl.com
A – I .3	
Name, Designation and Address of person to	Dr. Dheeraj S. Bele
be contacted by phone	Principal, Charak Institute of Pharmacy
STD Code	Mandleshwar
Telephone No	
Office	07283
Residence	234034, 234035
Mobile No.	
Fax No	07415779657 234036
E-Mail	dbele@rediffmail.com
$\mathbf{A} - \mathbf{I} \cdot 4$	
Name and Address of the Head of the	Dr. Dheeraj S. Bele
Institution	Charak institute of pharmacy Mandleshwar

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/ DD NO.	Dated	Remarks of the
				Inspectors
B. Pharm	2018-19	328484	15/06/2017	

b. APPROVAL STATUS- Enclosed (Enclosure No.03)

Name of the Course	Appro ved up to	In take Approved and Admitted	PCI	STATE GOVERNMENT/ AICTE	UNIVERSITY	Remarks of the Inspectors
B. Pharm	2016- 17	Approval Letter No and Date	32- 976/20 14- PCI/ 263 EC minute	Central/1-2812507718/2016/EOA	f- 5/Acad/Affilation/R GPV/2016/7706	
		Approved Intake	100	120	120	
		Actually Admitted	100	100	100	

c. STATUS OF APPLICATION

	COURSES INSPECTED FOR							
					Rema	rks		
Faculty / Subject	Extension of	f Approval	Increase in Intake of Seats		Current Intake	Proposed increase in Intake		
B. Pharm	√Yes	√Yes No Yes √No		√No	100	NA		

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 Pha	maay Caursa.	
			Status of the I had	macy Course.	
	Independent Building		\checkmark		
	Wing of another college		X		
	Separate Campus		\checkmark		
	Multi Institutional Camj	pus	X		

Examining Authority:RGPV, BhopalWith complete postal:Air Port By pass road Gandhi nagar Bhopal 462036Address, Telephone No. :0755-2678899and STD Code.

B –I .1 Name of the Principal		Dr. D.S. Bele			
	Qualifica	ation*	Teaching Experience Required	Actual experience	Remarks of the Inspectors
Qualification/ Experience	M. Pharm		15 years, out of which 5 years as Prof. / HOD	17	
	PhD		10 years, out of which at least 05 years as Asst. Prof	17 years	

* Documentary evidence should be provided

В-I.2

For institution seeking continuation of affiliation *Enclosed* (Enclosure No.05)

Course	Date of last Inspection	Remarks of the Previous Inspection Report	Complied / Not Complied	Intake reduced/Stopped in the last 03 years*
B. Pharm	15&16 March'2017	Most of the deficiencies pointed out have been rectified	Complied	

* Enclose Documents

B–**I**.3 *Enclosed* (*Enclosure No.06*)

Status of Governing Council:	√Society
Details of the Governing Body	√Enclosed / Not Enclosed
Minutes of the last Governing council Meeting	√Enclosed / Not Enclosed

B –I .4

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	

В — I.5

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

ACADEMIC YEAR	Year 2015-16	Year 2016-17	Year 2017-18
Sanctioned	100	100	100
No. of Admissions	99	100	100
Unfilled Seats	01	00	NIL
No. of Excess Admissions	NIL	NIL	NIL

B –I .6

Academic information: Percentage of UG results for the past three years based on University Calendar

ACADEMIC YEAR	Year 2013-14	Year 2014-15	Year 2015-16
1 st year	60	18	79.28
2 nd year	68	50	82.69
3 rd year	72	76	63.15
Final year	90	75	96
Pass % (Final Year)	90	75	96

$\mathbf{B} - \mathbf{I}\mathbf{I}$

Co - Curricular Activities / Sports Activities

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

C - FINANCIAL STATUS OF THE INSTITUTION

Audited financial Statement of Institute should be furnished

C .1 Resources and funding agencies (give complete list) *Enclosed* (*Enclosure No.07*)

Receipts	5			Expenditur	e	Remarks
Particulars	Amount	Sl. No.]	•	Amount	of the Inspectors
Grants a. Government b. Others	-		CAF	PITAL EXPEN	DITURE	
Tuition Fee	11881033	1.	Buil	ding	9070088	
Library Fee	-	2.	Equ	ipment	1592519	
Sports Fee	-	3.	3. Others		4202724	
Union Fee	-					
Others	138470	1	1 Salary		5821362	
		2.	· · /			
Bus Fee	943300		Ι	College	40600	
			Ii	Others	16047	
		3.			443551	
		4.	•		-	
		5.				
		6.			-	
		7.			6864462	
Total	101(0=00	8.	Mise	e.Expenditure	-	
13169520			J	Total	13186022	
	ReceiptsParticularsGrantsa. Governmentb. OthersTuition FeeLibrary FeeSports FeeUnion FeeOthers	ReceiptsParticularsAmountGrants a. Government b. Others-Tuition Fee11881033Library Fee-Sports Fee-Union Fee-Others138470Bus Fee943300Image: Second Secon	Receipts Amount Sl. No. Grants a. Government b. Others - - - Tuition Fee 11881033 1. Library Fee - 2. Sports Fee - 3. Union Fee - 1 Others 138470 1 Bus Fee 943300 2. Source 4. 5. Image: Fee - 3. Total - 7.	ReceiptsParticularsAmountSl. No.IGrants a. Government b. Others- \sim \sim Tuition Fee118810331.BuilLibrary Fee118810331.BuilSports Fee.2.EquSports Fee.3.OtherUnion Fee.1.Dthers1384701.Bus Fee9433001.IGuil Albert ContersTotalTotal13169520	TermExpenditurParticularsAmountSl. No.ParticularsGrants a. Government b. Others- $Sl.$ No. $CAPTIAL EXPENDINGTuition FeeLibrary Fee118810331.BuildingLibrary FeeSports Fee2.EquipmentSports FeeOthers3.OthersUnion Fee.3.OthersUnion Fee.2.EVENUE EOthers1384701SalaryBus Fee9433001CollegeBus Fee943300IiOthersOthers1OthersIiOthers0IiOthersBus Fee943300IiOthersBus Fee943300IiOthersBus Fee943300IiOthersDeposit held by(If any)IiOthersDeposit held bythe CollegeIiOthersTotalIiIiOthers$	Image: I

C .2 Please provide following Information

Note: Enclose relevant documents

PART- II PHYSICAL INFRASTRUCTURE

1 . a. Availability of Land (B. Pharm courses)	: $\sqrt{\text{Available (4.0 acres)}}$
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 (E	nclosed (Enclosure No.08)
Records to be enclosed	
Sale deed :	$\sqrt{ m Enclosed/Not}$ available
d. Building [†] : (<i>Enclosure No.09</i>)	
i) Approved Building plan, to be Enclosed :	$\sqrt{ m Enclosed/Not}$ available
e. Total Built Area of the college building in Sq.mts	: Built up Area 3500
Amenities and C	Circulation Area 98

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	06	06	6 of 90 Sq. mts or 4 of 150 sq.mts. with Public address System.	540 Sq. mts	

(*To accommodate 100 students).

3. Laboratory requirement at the end of 4 Years

S. 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	Available	
2	Pharmaceutics Pharmaceutical Chemistry Pharmaceutical Analysis Pharmacology Pharmacognosy Pharmaceutical Biotechnology (Including Aseptic Room) Total no. Laboratories for B.Pharm course	03 Laboratories 02 Laboratories 01 Laboratory 02 Laboratories 01 Laboratories 01 Laboratory 10 Laboratories *	03 02 01 02 01 01 01 10	
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)	Available	
4	Area of the Machine Room	80-100 Sq.mts	80 Sqm.	
5	Central Instrumentation Room	80 Sq.mts with A/ C	80 Sqm.	
6	Store Room – I	1 (Area 100 Sq mts)	100 Sqm.	
7	Store Room – II (For Inflammable chemicals)	1 (Area 20 Sq mts)	20 Sqm.	

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

[†]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	Requirement as per	Ava	ilable	Remarks/	
51. INU.	Name of infrastructure	in number	Norms, in area	No.	Area in Sq .mts	Deficiency	
1	Principal's Chamber	01	30 Sq .mts	01	30		
2	Office – I - Establishment						
3	Office – II - Academics	01	60 Sa mta	01	60		
4	Confidential Room		60 Sq. mts	01	00		

5. Staff Facilities:

SL No	Nome of infunction	Requirement	Requirement as per	Ava	ilable	Remarks/
Sl. No.	Name of infrastructure	as per Norms in number	Norms, in area	No.	Area in Sq mts	Deficiency
1	HODs for B.Pharm Course	Minimum 4	20 Sq mts x 4	04	20	
2	Faculty Rooms for B.Pharm course		10 Sq mts x n (n=No of teachers)	01	10* n	

6. Museum, Library, Animal House and other Facilities

Sl.No.	Name of Require		Requirement as per	Available		Remarks/
51.110.	infrastructure	Norms in number	Norms, in area	No.	Area in Sq. mts	Deficiency
1	Animal House	01	80 Sq mts	01	80 Sq mts	
2	Library	01	150 Sq mts	01	198 Sq mts	
3	Museum	01	50 Sq mts (May be attached to the Pharmacognosy lab)	01	50 Sq mts	
4	Auditorium / Multi Purpose Hall (Desirable)	01	250 – 300 seating capacity	00	NA	
5	Seminar Hall	01		01	150 Sqm	
6	Herbal Garden (Desirable)	01	Adequate Number of Medicinal Plants	01	200 Sqm	

7. Student Facilities:

S.		Requirement	Requirement	Available		Remarks/
S. No.	Name of infrastructure	as per Norms in number	as per Norms, in area	No.	Area in Sq .mts	Deficiency
1	Girl's Common Room (Essential)	01	60 Sq.mts	01	60 Sq.mts	
2	Boy's Common Room (Essential)	01	60 Sq.mts	01	60 Sq.mts	
3	Toilet Blocks for Boys	01	24 Sq.mts	01	24 Sq.mts	
4	Toilet Blocks for Girls	01	24 Sq.mts	01	24 Sq.mts	
5	Drinking Water facility – Water Cooler (Essential).	01		02		
6	Boy's Hostel (Desirable)	01	9 Sq .mts / Room Single occupancy	Nil	NA	
7	Girl's Hostel (Desirable)	01	9 Sq .mts / Room (single occupancy) 20 Sq mts / Room (triple occupancy)	01	400 Sq.mts	
8	Power Backup Provision (Desirable)	01		01		

8. Computer and other Facilities:

		Av	Remarks of	
Name	Required	No.	Area in Sq. mts	the Inspectors
Computer Room for B.Pharm Course	01 (Area 75 Sq mts)	01	75	
Computer (Latest Configuration)	1 system for every 10 students	38	NA	
Printers	1 printer for every 10 computers	04	04	
Multi Media Projector	01	01	01	
Generator (5KVA)	01	01	01	

9. Amenities (Desirable)

Name	Requirement as	A	Available		Remarks/
	per Norms in	No.	Area in Sq.	Available	Deficiency
	area		mts		
Principal quarters	80 Sq. mts	NIL	NIL	$ $ \checkmark	
Staff quarters	16 x 80 Sq. mts	NIL	NIL	\checkmark	
Canteen	100 Sq. mts	01	100		
Parking Area for staff and students		Yes	300		
Bank Extension Counter		NIL	NIL	$ $ \checkmark	
Co operative Stores		NIL	NIL	\checkmark	
Guest House	80 Sq. mts	NIL	NIL	\checkmark	
Transport Facilities for students		Yes			
Medical Facility (First Aid)		Yes	20		

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:

				Available		Remarks
S. No.	Item	Titles (No)	Minimum Volumes (No)	Title	Numb ers	of the Inspecto rs
1	Number of books	150	1500 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	1101	4001	
2	Annual addition of books		100 to 150 books Per year	36	435	
3	Periodicals Hard copies / online		10 National 05 International periodicals	09 National 19 International 58 Online	86	
4	CDS		Adequate Nos	Available	Adequ ate	
5	Internet Browsing Facility		Yes/No (Minimum ten computers)	Yes	48	
6	Reprographic Facilities: Photo Copier Fax Scanner		01 01 01	01 01 01	01 01 01	
7	Library Automation and	<u> </u>		- Available		
	Library Timings	08:00 - 17	:00 hrs	- 09 Hrs		
l						

10.B. Library Staff:

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

PART III ACADEMIC REQUIREMENTS

Course Curriculum:

1. Student Staff Ratio: Theory Practicals Remarks of the Inspectors

(Required ratio --- Theory \rightarrow 60:1 and Practicals \rightarrow 20:1) If more than 20 students in a batch 2 staff member to be present provided the lab is spacious.

2. Scheme of B. Pharm Course:	Annual	S	em. √
3. Date of Commencement of se	ession / sessions:	Commencement	Completion
		Odd semJuly 2016 Even sem January 2017	As Per University Calendar
	Ν	o of Days	No of Days
4. Vacation:	Summer:	07 Win	ter: 07
5. Total No. of working days:	260 aprx./ year		
6. Time Table: (Enclosure No.10))		
Time Table for B. Pharm course E	Enclosed	Yes 🗸	No

7. Whether the prescribed numbers of classes are being conducted as per university norms I B. Pharm: *Enclosed (Enclosure No.11)*

Subject	No of The	ory Classes		Practicals				
	Prescribed	No of	Prescribed	Prescribed No of No of Classes Conducted to				
	No of Hrs	Hours	No of	Hours	fulfill Prescribed Number			
		Conducted	Hours	Conducted	of Hours as in Column 5			
					No. of classes x hours per			
1	2	3	4	5	class			
				Enclosed				

II B. Pharm: Enclosed

Subject	No of The	ory Classes		Remarks of the Inspectors		
	Prescribed	No of	Prescribed	No of	No of Classes Conducted to	
1	No of Hrs	Hours	No of	Hours	fulfill Prescribed Number of	
		Conducted	Hours	Conducted	Hours as in Column 5	
	2	3	4	5	No. of classes x hours per	
					class	
				Enclosed		

III B. Pharm: Enclosed

Subject	No of The	ory Classes		Practicals				
1	Prescribed	No of	Prescribed	No of	No of Classes Conducted to			
	No of Hrs	Hours Conducted	No of Hours	Hours Conducted	fulfill Prescribed Number of Hours as in Column 5			
	2	3	4					
					class			
				Enclosed				

IV B. Pharm: Enclosed

Subject	No of The	ory Classes		Practicals					
Ŭ									
	Prescribed	No of	Prescribed	No of	No of Classes Conducted to				
1	No of Hrs	Hours	No of	No of Hours fulfill Prescribed Number of					
		Conducted	Hours	Conducted	Hours as in Column 5				
	2	3	4	5	No. of classes x hours per class				
				Enclosed					

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

Yes



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

А.			
Name of the Event	Year 2013-14	Year 2014-15	Year 2015-16
Guest Lectures	08	11	04
Seminars	03	02	01
Workshops	00	00	00
Symposia	00	00	00

B. Papers Presented / Published during last three years

	Year	2013-14	Year	2014-15	Year 2015-16		
	National International		National International		National Internationa		
Published	05	03	03	06	02	02	
Presented	00	00	01	00	07	00	

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

Ves		
res	v	

No

Class	I Sessional Dates		II Sessio	nal Date	III Sessio	Remarks of the inspector	
	Th	Pr	Th	Pr	Th	Pr	
B. Pharm I	24/04/16 To 29/04/16	24/04/16 To 29/04/16	06/06/16 To 10/06/16	06/06/16 To 10/06/16			
B. Pharm II	31//03/16 To 02/04/16	31//03/16 To 02/04/16	16/05/16 To 20/05/16	16/05/16 To 20/05/16			
B. Pharm III	31//03/16 To 04/04/16	31//03/16 To 04/04/16	16/05/16 To 20/05/16	16/05/16 To 20/05/16			
B. Pharm IV	31//03/16 To 04/04/16	31//03/16 To 04/04/16	16/05/16 To 20/05/16	16/05/16 To 20/05/16			

11. Whether Evaluation of the internal assessments is Fair Yes $\sqrt{10}$

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	02	12	48	57	29	16	06	00	
II B.Pharm	03	07	25	39	14	07	11	00	
III B.Pharm	11	17	57	54	03	02	02	00	
IV B.Pharm	07	11	35	35	04	01	01	00	

Signature of the Head of the Institution

No

12. Work load of Faculty members for B. Pharm(*Enclosure No.12*)

S. No	Name of the	Subjects	B. F	harm	Total work	Specific Remarks of the
	Faculty	taught	Th	Pr	load	Inspector

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

Details	Year 2013-14	Year 2014-15	Year 2015-16
No. of Students Appeared	29	18	02
No. of Students Qualified	00	00	01
Percentage	00	00	50

14. Whether the Institution has an Industry – Institution Interaction cell

No √

Yes

If applicable please give the details for the previous Year

Events	Details for the Previous Year
No. of Industrial visits	01
Industrial Tour	Yes
Industrial Training	Yes
No. of Resource Persons from the Industry for Guest Lectures	02
No. of Collaboration projects with Industry	Nil

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

Year	Year 2013-14	Year 2014-15	Year 2015-16
No. of students appeared for campus interview	36	28	Nil
% Placed	50	68	Nil

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

√Yes No

PART IV - PERSONNEL

TEACHING STAFF:

1. Details of Teaching Faculty for B.Pharm Course to be enclosed in the format mentioned below: List Enclosed (*Enclosure No.13*)

S. No	Name	Designation	Qualification	Date of Joining	Teaching Experience After PG	State Pharmacy Council Reg No.	Signature of the faculty	Remarks of the Inspectors
				List	Enclosed			

2. Qualification and number of Staff Members

Qualification						
M. Pharm	PhD	Others - Full Time				
22	03	01				

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

	No. of staff required
1. Pharmaceutical Chemistry	7
2. Pharmaceutical Analysis	2
3. Pharmacology	4
4. Pharmacognosy	4
5. Pharmaceutics	6
6. Pharmacy Practice	1
7. Principal	1
Total	25
*Part time teaching Staff	3
Remarks of the Inspection Team	

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

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
	Professor	1	01	
Department of Pharmaceutics	Asst. Professor	2	02	
	Lecturer	3	03	
	Professor	1	01	
Department of Pharmaceutical	Asst. Professor	3	03	
Chemistry	Lecturer	3	03	
	Professor	1	00	
Department of Pharmacology	Asst. Professor	2	03	
	Lecturer	1	03	
	Professor	1	01	
Department of Pharmacognosy	Asst. Professor	1	01	
	Lecturer	2	02	
Department of Pharmacy	Asst. Professor	1	01	
Practice	Lecturer	1	01	
Department of Pharmaceutical Analysis	Asst. Professor	1	01	

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

7. Details of Faculty Retention for:

Name of Faculty Member	Period	%
	Duration of 15 yrs. and above	
Mr. S. L. Singune,	Duration of 10 yrs. and above	4
Dr. D. S. Bele, Mr. B. N. Birla, Mr. Vivek Gupta, Dr.		
Dharmendra Solanki, Mr. Rajesh Patel, Mr. Sunil Mishra,	Duration of 5 yrs. and above	32
Mrs. Seema Tiwari, Mr. Ankit Sharma,		
Mr. Ashish Patidar, Mr. Sukhdev Patel,		
Mr. R. Upadhyay, Mr. Ravindra Patidar, Miss. Pooja Shivane,		
Miss Sneha Sharma, Mr. Manoj Jaiswal, Mr. Shivpal rewapati,	Less than 5 yrs.	64
Mrs. Mohini Patidar, Mr. Bhupendra Patidar, Mrs. Deepti		
Sharma, Dr. Preeti V Bankar,		

7. Details of Faculty Turnover:

Name of Faculty Member	Period	More than 50%	50%	25%	Less than 25%
Dr. D. S. Bele, Mr. B. N. Birla,	% of faculty retained	Yes	No	No	No
Mr. Vivek Gupta, Dr.	in last 3 yrs				
Dharmendra Solanki, Mr.					
Rajesh Patel, Mr. Sunil Mishra,					
Mrs. Seema Tiwari, Mr. Ankit					
Sharma, Mr. S. L. Singune, Mr.					
Ashish Patidar, Mr. Sukhdev					
Patel,					
Mr. R. Upadhyay, Mr. Ravindra					
Patidar, Miss. Pooja Shivane,					
Miss Sneha Sharma, Mr. Manoj					
Jaiswal, Mr. Shivpal rewapati,					
Mrs. Mohini Patidar, Mr.					
Bhupendra Patidar, Mrs. Deepti					
Sharma, Dr. Preeti V Bankar					

8. Number of Non-teaching staff available for B. Pharm course for intake of 60 Students:

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

Sl.	Name	Qualificat	Designati	Basic	DA	HRA	CCA	Other				Bank	PAN	EPF	Total	Signature
No		ion	on	pay	Rs.	Rs.	Rs.	allowance	D	eductio	ons	A/C	No	A/c		
				Rs.				Rs.				No		no.		
									РT	TDS	EPF					
	List															
	Enclosed															

- 10. Whether facilities for Research / Higher studies are provided to the faculty? Yes $\sqrt{}$ (Inspectors to verify documents pertaining to the above)
- **11. Whether faculty members are allowed to attend workshops and seminars?** (Inspectors to verify documents pertaining to the above)
- **12.** Scope for the promotion for faculty: Promotions
- **13. Gratuity Provided**
- 14. Details of Non-teaching staff members (list to be enclosed): (Enclosure No.15)

S. No	Name	Designation	Qualifi cation	Date of Joining	Experience	Signature	Remarks of the Inspectors
	List Enclosed						

Yes

Yes

15. Whether Supporting Staff (Technical and Administrative) are encouraged for skill up gradation programs. $\sqrt{Yes/No}$

\checkmark	No	
	No	

Yes √

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		
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		

PART - VI

1. Financial Resource allocation and utilization for the past three years:

(Audited Accounts for previous year to be enclosed) Audited Report Enclosed (Enclosure No.07)

	Evnonditure in De							/		
Sl	Ex	xpenditure in	Rs.	Expenditure in Rs			Ex	penditure in H	Rs	Remarks
	2013-14			2014-15			2	of the		
								Inspectors*		
No.	Total	Recurring	Non	Total	Recurring	Non	Total	Recurring	Non	
	budget		Returning	budget		Returning	budget		Returning	
	sanctioned			sanctioned			sanctioned			
1	7500000	7492325	7675	6250000	6240130	9870	11000000	10500000	1071749	

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

Sl		xpenditure in 2013-14	Rs.	Expenditure in Rs 2014-15			Exj 2	Remarks of the Inspectors*		
No.	Total	Sanctioned	Incurred	Total	Sanctioned	Incurred	Total	Sanctioned	Incurred	
	budget			budget			budget			
	allocated			allocated			allocated			
	Chemicals	303047/-	303047/-	Chemicals	150000	150000	Chemicals			
	Glassware	127700/-	127700/-	Glassware	100000	100000	Glassware			

3. Total amount spent on equipments for the past three years:

(Enclose purchase invoice) (Enclosure No.07)

SI	Expenditure in Rs. 2013-14			Expenditure in Rs 2014-15			Expenditure in Rs 2015-16			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred				
	Equipment	2583100/-	2583100/-	Equipment	250000	250000				

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Sl No.]	Expenditure in 2013-14	n Rs.	E	xpenditure in 1 2014-15	Rs	Ex	penditure in F 2015-16	Rs	Remarks of the Inspectors*
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred				
1	Books	136682/-	136682/-	Books	78672	78672				
2	Journals	36000/-	36000/-	Journals	38000	38000				

•

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

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

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	20	Yes	
4	Hutchinson's spirometer	01	01	Yes	
5	Spygmomanometer	10	10	Yes	
6	Stethoscope	10	10	Yes	
7	Permanent Slides for various tissues	One pair of each tissue Organs and endocrine glands One slide of each organ System	One pair of each tissue Organs and endocrine glands One slide of each organ system	Yes	
8	Models for various organs	One model of each organ system	One model of each organ system	Yes	
9	Specimen for various organs and systems	One model for each organ system	One model for each organ system	Yes	
10	Skeleton and bones	One set of skeleton and one spare bone	One set of skeleton and one spare bone	Yes	
11	Different Contraceptive Devices and Models	One set of each device	One set of each device	Yes	
12	Muscle electrodes	01	01	Yes	
13	Lucas moist chamber	01	01	Yes	
14	Myographic lever	01	01	Yes	
15	Stimulator	01	01	Yes	
16	Centrifuge	01	01	Yes	
17	Digital Balance	01	01	Yes	

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18	Physical /Chemical Balance	01	01	Yes	
19	Sherrington's Kymograph Machine	10	10	Yes	
	/ Polyrite				
20	Sherrington Drum	10	10	Yes	
21	Perspex bath assembly (single unit)	10	10	Yes	
22	Aerators	10	10	Yes	
23	Computer with LCD	01	01	Yes	
24	Software packages for experiment	01	01	Yes	
25	Standard graphs of various drugs	Adequate number	Adequate number	Yes	
26	Actophotometer	01	01	Yes	
27	Rotarod	01	01	Yes	
28	Pole climbing apparatus	01	01	Yes	
29	Analgesiometer (Eddy's hot plate	01	01	Yes	
	and radiant heat methods)				
30	Convulsiometer	01	01	Yes	
31	Plethysmograph	01	01	Yes	
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		<i>c</i> 0	ł		Inspectors
1	Folin-Wu tubes	60	60	Yes	
2	Dissection Tray and Boards	10	10	Yes	
3	Haemostatic artery forceps	10	10	Yes	
4	Hypodermic syringes and needles of size 15,24,26G	10	10	Yes	
5	Levers, cannulae	20	20	Yes	

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

Apparatus:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Reflux flask with condenser	20	20	Yes	
2	Water bath	20	20	Yes	
3	Clavengers apparatus	10	10	Yes	

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4	Soxhlet apparatus	10	10	Yes	
6	TLC chamber and sprayer	10	10	Yes	
7	Distillation unit	01	01	Yes	

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	
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	20	Yes	
3	Reflux flask and condenser double / triple necked	20	20	Yes	
4	Burettes	100	100	Yes	
5	Arsenic Limit Test Apparatus	25	25	Yes	
6	Nesslers Cylinders	50	50	Yes	

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

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DEPARTMENT OF PHARMACEUTICS

Equipment:

Sl. No.	Name	Minimum Required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Mechanical stirrers	20	20	Yes	
2	Homogenizer	10	10	Yes	
3	Digital balance	05	05	Yes	
4	Microscopes	10	10	Yes	
5	Stage and eye piece micrometers	15	15	Yes	
6	Brookfield's viscometer	01	01	Yes	
7	Tray dryer	01	01	Yes	
8	Ball mill	01	01	Yes	
9	Sieve shaker with sieve set	01	01	Yes	
10	Double cone blender	01	01	Yes	
11	Propeller type mechanical agitator	05	05	Yes	
12	Autoclave	01	01	Yes	
13	Steam distillation still	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	01	Yes	
19	Ampoule filling and sealing machine	01	01	Yes	
20	Tablet disintegration testapparatus IP	02	02	Yes	
21	Tablet dissolution testapparatus IP	01	01	Yes	
22	Monsanto's hardness tester	02	02	Yes	
23	Pfizer type hardness tester	01	01	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 10	05 EACH 10	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	10	Yes	
38	Capsule Counter	02	02	Yes	
39	Energy meter	02	02	Yes	
40	Hot Plate	02	02	Yes	
41	Humidity Control Oven	01	01	Yes	
42	Liquid Filling Machine	01	01	Yes	
43	Mechanical stirrer with speed regulator	02	02	Yes	
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	20	Yes	

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2	Stalagmometer	20	20	Yes	
3	Desiccator*	10	10	Yes	
4	Suppository moulds	20	20	Yes	
5	Buchner Funnels (Small, medium, large)	05 each	05 each	Yes	
6	Filtration assembly	01	01	Yes	
7	Permeability Cups	05	05	Yes	
8	Andreason's Pipette	05	03	Yes	
9	Lipstick moulds	10	10	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	01	Yes	
2	Lyophilizer (Desirable)	01	Nil		
3	Gel Electrophoresis	01	01	Yes	
	(Vertical and Horizontal)				
4	Phase contrast/Trinocular Microscope	01	01	Yes	
5	Refrigerated Centrifuge	01	01	Yes	
6	Fermenters of different capacity	01	Nil	-	
	(Desirable)				
7	Tissue culture station	01	01	Yes	
8	Laminar airflow unit	01	01	Yes	
9	Diagnostic kits to identify infectious	01	01	Yes	
	agents				
10	Rheometer	01	01	Yes	
11	Viscometer	01	01	Yes	
12	Micropipettes (single and multi channeled)	01 each	01 each	Yes	
13	Sonicator	01	01	Yes	
14	Respinometer	01	01	Yes	
15	BOD Incubator	01	01	Yes	
16	Paper Electrophoresis Unit	01	01	Yes	
17	Micro Centrifuge	01	01	Yes	

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18	Incubator water bath	01	01	Yes	
19	Autoclave	01	01	Yes	
20	Refrigerator	01	01	Yes	
21	Filtration Assembly	01	01	Yes	
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:

S. No.	Name	Minimum required	Available	Working	Remarks of the
		Nos.	Nos.	Yes / No	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	01	Yes	
8	Potentiometer	01	01	Yes	
9	Conductivity meter	01	01	Yes	
10	Fourier Transform Infra Red Spectrometer	01	Nil	-	
	(Desirable)				
11	HPLC	01	01	Yes	
12	HPTLC (Desirable)	01	Nil	-	
13	Atomic Absorption and Emission spectrophotometer	01	Nil	-	
	(Desirable)				
14	Biochemistry Analyzer (Desirable)	01	Nil	-	
15	Carbon, Hydrogen, Nitrogen Analyzer (Desirable)	01	Nil	-	
16	Deep Freezer (Desirable)	01	Nil	-	
17	Ion- Exchanger	01	01	Yes	
18	Lyophilizer (Desirable)	01	Nil	-	

Compliance of the last recommendations by Inspectors

Specific observations if not complied

Signature of Inspectors:	1.
	2.

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.