

PHARMACY COUNCIL OF INDIA
Standard Inspection Form-E(SIF-E) for M.Pharm course
(To be submitted to PCI by an authority seeking approval)

(SIF-E)

To be filled up by inspectors

- a) **Name of the Inspectors:** 1. _____
(Block letters) 2. _____
- b) **Date of Inspection:** _____

PART – I

A - DETAILS OF APPLICATION

<p>A – 1.1 Application is for -</p> <ul style="list-style-type: none">• Permission to start M.Pharm course.• First time approval u/s 12.• Extension of approval.• Increase in intake upto 15 seats.	<div style="display: flex; flex-direction: column; align-items: flex-start;"><div style="margin-bottom: 5px;"><input style="width: 60px; height: 15px;" type="checkbox"/></div><div style="margin-bottom: 5px;"><input style="width: 60px; height: 15px;" type="checkbox"/></div><div style="margin-bottom: 5px;"><input checked="" style="width: 60px; height: 15px;" type="checkbox"/></div><div style="margin-bottom: 5px;"><input style="width: 60px; height: 15px;" type="checkbox"/></div></div> <p>Please tick (✓) the relevant box.</p>
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PART – II

B - GENERAL INFORMATION

To be filled by institution

<p>B – 1.1 Name of the Institution: Complete postal address:</p>	<p style="text-align: center;"><u>ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S</u> <u>COLLEGE OF PHARMACY, KENNEDY ROAD, NEAR</u> <u>RTO, PUNE-411001</u></p> <p>STD Code : 020 _____ T.No. : 26058204 Fax No. : 26058208 _____</p> <p>E.Mail: <u>contact@aissmscop.com</u> _____</p> <p>Website : <u>www.aissmscop.com</u> _____</p>
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<p>B – 1.2 - Course conducting body:</p> <ul style="list-style-type: none"> • Status - Central Govt. <input type="checkbox"/> - State Govt. <input type="checkbox"/> - Union Territory <input type="checkbox"/> - Autonomous body <input type="checkbox"/> - Society <input type="checkbox"/> - Trust <input checked="" type="checkbox"/> <p>Please tick (✓) the relevant box.</p>	
<p>B – 1.3 Name of the Society/Trust/ Management</p> <p>Complete postal address:</p>	<p>ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY</p> <p><u>55,56 SHIVAJINAGAR, PUNE-411005</u></p> <p>STD Code: <u>020</u> T.No. : <u>25534662</u></p> <p>Fax No. : <u>25534661</u></p> <p>E.Mail : <u>info@aissms.org</u></p> <p>Website : <u>www.aissms.org</u></p>
<p>B – 1.4 Name of the Examining Authority</p> <p>Complete postal address:</p>	<p><u>Controller of Examinations, Savitribai Phule Pune University</u></p> <p><u>Ganeshkhind Road, Pune 411007</u></p> <p>STD Code: <u>020</u> T.No. : <u>25601220</u></p> <p>E.Mail: <u>pharmacy-coord@pun.unipune.ac.in</u></p> <p>Website : <u>www.unipune.ac.in</u></p>
<p>B – 1.5 Other courses run by the institution</p> <ul style="list-style-type: none"> - D.Pharm - B.Pharm - Pharm.D. 	<p><u>Approval status</u></p> <p><u>Approved by AICTE, Government of Maharashtra, PCI (till 2016-17), Permanently affiliated to Savitribai Phule Pune University, Accredited by NBA, Recognized by UGC u/s 2f & 12B</u></p>

Signature of the Head of the Institution with date

Signature of the Inspectors with dates

B – 1.6 M.Pharm specializations run / proposed to be run by an institution -

Name of specialization	Year of start	No. of admissions 2016-17	Remarks of the Inspectors
Pharmaceutics	2005	14 (Intake: 18)	
Industrial Pharmacy	--	--	
Pharmaceutical Technology	--	--	
Pharmaceutical Chemistry	2004	02 (Intake: 10)	
Pharmaceutical Analysis	--	--	
Pharmaceutical Quality Assurance	2004	18 (Intake: 18)	
Regulatory Affairs	--	--	
Pharmaceutical Biotechnology	--	--	
Pharmacy Practice	--	--	
Pharmacology	2006	03 (Intake: 8)	
Pharmacognosy	--	--	
Phytopharmacy and Phytomedicine	--	--	
Others * if any, (please specify)			
* M.Pharm specializations started prior to commencement of the Master of Pharmacy (M.Pharm) course Regulations, 2014 can continue only till the students admitted complete the said specialization.			

Signature of the Head of the Institution with date

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PART- III
PHYSICAL INFRASTRUCTURE

1. Accommodation

- a. Availability of land for the pharmacy college : 2.5 acres
- b. Building : **Own**
(Enclose documentary evidence as Annexure-A)
- c. Built up Area of the college building : 7200 Sq.m.

2. Class rooms

Name of the course	No. Required	No. Available	Area required for each class room (Sq.m.)	Available (Sq.m.)	Remarks of the Inspectors
B.Pharm	4	4	75 (essential) 90 (desirable)	436	
M.Pharm Specialization -					
Pharmaceutics	1	2	36	100	
Industrial Pharmacy	1	Not applicable	36	Not applicable	
Pharmaceutical Technology	1	Not applicable	36	Not applicable	
Pharmaceutical Chemistry	1	1	36	50	
Pharmaceutical Analysis	1	Not applicable	36	Not applicable	
Pharmaceutical Quality Assurance	1	2	36	80	
Regulatory Affairs	1	Not applicable	36	Not applicable	
Pharmaceutical Biotechnology	1	Not applicable	36	Not applicable	
Pharmacy Practice	1	Not applicable	36	Not applicable	
Pharmacology	1	1	36	50	
Pharmacognosy	1	Not applicable	36	Not applicable	
Phytopharmacy and Phytomedicine	1	Not applicable	36	Not applicable	

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3. Laboratory

Name of the course	No. Required	No. Available	Area required for each laboratory (Sq.m.)	Available (Sq.m.)	Remarks of the Inspectors
B.Pharm -					
Pharmaceutics Lab.	2	2	75 (essential) 90 (desirable)	186	
Pharmaceutical Chemistry Lab.	2	3	75 (essential) 90 (desirable)	279	
Pharmaceutical Analysis Lab.	1	1	75 (essential) 90 (desirable)	93	
Pharmacology Lab.	2	2	75 (essential) 90 (desirable)	154	
Pharmacognosy Pharmaceutical Biotechnology (Including Aseptic Room) Lab.	1	1	75 (essential) 90 (desirable)	96	
M.Pharm Specialization -					
Pharmaceutics	1	2	75 each	175	
Industrial Pharmacy	1	Not applicable	75 each	-	
Pharmaceutical Technology	1	Not applicable	75 each	-	
Pharmaceutical Chemistry	1	1	75 each	93	
Pharmaceutical Analysis	1	Not applicable	75 each	-	
Pharmaceutical Quality Assurance	1	1	75 each	75	
Regulatory Affairs	1	Not applicable	75 each	-	
Pharmaceutical Biotechnology	1	Not applicable	75 each	-	
Pharmacy Practice	1	Not applicable	75 each	-	
Pharmacology	1	1	75 each	99	
Pharmacognosy	1	Not applicable	75 each	-	
Phytopharmacy and Phytomedicine	1	Not applicable	75 each	-	

Preparation room with minimum 10 sq.m. with each lab. is required.

Signature of the Head of the Institution with date

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4. Other Facilities

Facility for B.Pharm and M.Pharm	No. Required	No. Available	Area required (Sq.m.)	Available (Sq.m.)	Remarks of the Inspectors
Machine Room	1	1	80 - 100	93	
Central Instrumentation Room	1	1	80	80	
Store Room-I	1	1	100	70	
Store Room-II	1	1	20	40	
Animal House		1	80	90	
Library		1	150	234	
Museum		1	50	50	
Auditorium / Multi Purpose Hall (Desirable) 250-300 seating		1		233	
Seminar Hall		1	--	61	
Herbal Garden (Desirable)		1	--	90	
Computer (Latest Configuration) With Internet Browsing Facility	1 system for every 6 students (for M.Pharm course) 1 system for every 10 students (for B.Pharm course)	20 50	-- --	-- --	
Printers	1 Printer for every 6 computers (for M.Pharm course) 1 Printer for every 10 computers (for B.Pharm course)	4 6	-- --	-- --	
Multi Media Projector	3 (1 for B.Pharm course, 1 for M.Pharm course and 1 for Library)	5	--	--	
Generator (5KVA)	1	1	--	--	
Girl's Common Room (Essential)		1	20	35	
Boy's Common Room		1	10	50	
Toilet Blocks for Boys		4	--	84	

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Facility for B.Pharm and M.Pharm	No. Required	No. Available	Area required (Sq.m.)	Available (Sq.m.)	Remarks of the Inspectors
Toilet Blocks for Girls		4	--	60	
Drinking Water facility – Water Cooler		4	--	--	
Boy's Hostel (Desirable)		--	--	--	
Girl's Hostel (Desirable)		--	--	--	
Power Backup Provision		1	--	--	

5. Administrative Area for B.Pharm and M.Pharm

Facility for B.Pharm and M.Pharm	No. Required	No. Available	Area required (Sq.m.)	Available (Sq.m.)	Remarks of the Inspectors
Principal's Chamber	1	1	75 (essential) 90 (desirable)	40	
Office – I - Establishment	1	1	75	75	
Office – II - Academics	1	1	80-100	75	
Confidential Room	1	1	80	40	
Store Room – I	1	1	100	70	
Store Room – II	1	1	20	30	
H.O.D Room	1	4	20 Sq.m. Per Faculty	40	
Faculty Rooms		1	10 Sq.m. Per Faculty	100	

6. Library facilities for B.Pharm and M.Pharm

Item	Ref. Titles (No)	Available	Remarks of the Inspectors
Books (1500 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy)	150	3074	
Annual addition of Books	150	121	
Periodicals Hard copies /online	10 National 05 International periodicals	26 05	
CDs	Adequate Nos	65	
Reprographic Facilities: Photo Copier Scanner	1 each	02	

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7. Non-teaching staff

Designation	No. Required	No. Available	Qualification Required	Qualification Available	Remarks of the Inspectors
Laboratory Technician	1 for each Dept	1	D. Pharm		
Laboratory Assistants or Laboratory Attenders	1 for each Lab (minimum)	10	SSLC		
Office Superintendent	1	1	Degree		
Accountant	1	1	Degree		
Store keeper	1	1	D.Pharm or a Bachelor degree.		
Computer Data Operator	1	--	BCA or Graduate with Computer Course		
Office Staff I	1	1	Degree		
Office Staff II	2	2	Degree		
Peon	2	2	SSLC		
Cleaning personnel	Adequate	4	---		
Gardener	Adequate	1	---		

8. Teaching Staff

For institution running B.Pharm and M.Pharm

For B.Pharm

Designation	Qualification Required	Qualification Available	Experience Required	Experience Available	Remarks of the Inspectors
Director/Principal/Head of Institution	<p>First Class B.Pharm with Master's degree in Pharmacy (M.Pharm) in appropriate branch of specialization in Pharmacy or Pharm.D (Qualifications must be PCI recognized).</p> <p>With Ph.D degree in any of Pharmacy subjects.</p>	M. Pharm. (Pharmaceutics) Ph. D.	<p>Essential 15 years experience in teaching or research out of which 5 years must be as Professor/HOD in a PCI approved/recognized pharmacy college.</p> <p>Desirable Administrative experience in a responsible position</p>	<p>Teaching experience: 22 years 7 months (August 1996 till date)</p> <p>Industrial experience: 2 years</p> <p>Experience as HOD</p> <p>Pharmaceutics: Member Faculty for Board of Studies in Pharmaceutics from 2005-2010 and Chairman Board of Studies in Pharmaceutics from 2010-2015 at Savitribai Phule Pune University</p>	

Signature of the Head of the Institution with date

Signature of the Inspectors with dates

Department	Designation	No. required for 60 seats	No. available	No. required for 100 seats	No. available	Remarks of the Inspectors
Pharmaceutics	Professor/ Associate Professor	1	--	1	Not applicable	
	Asst. Professor	1	4	2	Not applicable	
	Lecturer	2	--	3	Not applicable	
Pharmaceutical Chemistry including Pharmaceutical analysis	Professor/ Associate Professor	1	1	1	Not applicable	
	Asst. Professor	1	4	2	Not applicable	
	Lecturer	3	--	3	Not applicable	
Pharmacology	Professor/ Associate Professor	1	--	1	Not applicable	
	Asst. Professor	1	2	1	Not applicable	
	Lecturer	2	--	3	Not applicable	
Pharmacognosy	Professor/ Associate Professor	1	--	1	Not applicable	
	Asst. Professor	1	2	1	Not applicable	
	Lecturer	1	--	1	Not applicable	
Pharmacy Practice & related subjects	Professor/ Associate Professor	--	--	1	Not applicable	
	Asst. Professor	1	--	1	Not applicable	
	Lecturer	1	--	1	Not applicable	

Additional staff required for M.Pharm per specialization

- i) In addition to the minimum requirement of staff for conduct of the B.Pharm and Pharm.D Courses (if the institution is also conducting Pharm.D programme) the department in which the M.Pharm Course is being introduced shall have two additional staff who shall be PG teachers per specialization and the department should have minimum of 5 faculty in the said department.
- ii) The number seats approved for admission to the M.Pharm course shall be 3 students per PG teacher (1:3)
- iii) Teaching workload for UG/PG teacher shall not be more than 16 hours per week at any given time inclusive of all the teaching assignment.

Department	Designation	No. available	Remarks of the Inspectors
Department of Pharmaceutics	Professor	2	
	Asso. Professor	1	
	Asst. Professor	1	
Department of Pharmaceutical Chemistry	Professor	1	
	Asso. Professor	1	

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Signature of the Inspectors with dates

Department	Designation	No. available	Remarks of the Inspectors
Department of Pharmacology	Asso. Prof.	--	
	Asst. Professor	2	
Department of Pharmacognosy	Asso. Prof.	Not applicable	
	Asst. Professor	Not applicable	
Department of Pharmacy Practice	Asso. Prof.	Not applicable	
	Asst. Professor/Lecturer	Not applicable	
Department of Industrial Pharmacy	Asso. Prof.	Not applicable	
	Asst. Professor/Lecturer	Not applicable	
Department of Pharmaceutical Technology	Asso. Prof.	Not applicable	
	Asst. Professor/Lecturer	Not applicable	
Department of Pharmaceutical Analysis	Asso. Prof.	Not applicable	
	Asst. Professor/Lecturer	Not applicable	
Pharmaceutical Quality Assurance	Professor	1	
	Asst. Professor	1	
Department of Regulatory Affairs	Asso. Prof.	Not applicable	
	Asst. Professor/Lecturer	Not applicable	
Department of Pharmaceutical Biotechnology	Asso. Prof.	Not applicable	
	Asst. Professor/Lecturer	Not applicable	
Department of Phytopharmacy & Phytomedicine	Asso. Prof.	Not applicable	
	Asst. Professor/Lecturer	Not applicable	

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Faculty details

Designation	Qualification Required	Experience Required	Remarks of the Inspectors
Professor	First Class B.Pharm with Master's degree in Pharmacy (M.Pharm) in appropriate branch of specialization in Pharmacy or Pharm.D (Qualifications must be PCI recognized). With Ph.D degree in any of Pharmacy subjects (Ph.D. Qualifications must be PCI recognized).	Essential 10 years experience in teaching in PCI approved/ recognized Pharmacy College or research experience out of which 5 years must be as Associate Professor in PCI approved/recognized Pharmacy College.	

S.No.	Name of Professor	Qualification Available	Experience Available	Remarks of the Inspectors
1.	Dr. Ashwini R Madgulkar	M. Pharm., Ph. D. (Pharmaceutics)	Teaching: 22 years 7 months Industrial:2	
2.	Dr. Mangesh R Bhalekar	M. Pharm., Ph. D. (Pharmaceutics)	Teaching: 20 years Industrial:2	
3.	Dr. Mrinalini C Damle	M. Pharm., Ph. D. (Pharmaceutical Chemistry)	Teaching: 16 years Industrial:8	
4.	Dr. Shashikant V Bhandari	M. Pharm., Ph. D. (Pharmaceutical Chemistry)	Teaching: 16 years 7 months	
5.	Dr. Santosh V Gandhi	M Pharm., Ph. D. (Pharmaceutical Chemistry)	Teaching: 15 years	

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Designation	Qualification Required	Experience Required	Remarks of the Inspectors
Associate Professor	<p>First Class B.Pharm with Master's degree in Pharmacy (M.Pharm) in appropriate branch of specialization in Pharmacy (Qualification must be PCI recognized).</p> <p>A PCI recognized Pharm.D degree holder shall also be eligible for the posts of Associate Professor in the subjects of pathophysiology, pharmacology and pharmacy practice.</p> <p>Associate Professor shall acquire PCI recognized Ph.D in any of Pharmacy subjects within 7 years to become eligible for the post of Professor.</p>	3 years experience in teaching or research at the level of Assistant Professor or equivalent in PCI approved/recognized Pharmacy College.	

S.No.	Name of Associate Professor	Qualification Available	Experience Available	Remarks of the Inspectors
1.	Dr. Monica RP Rao	M. Pharm., Ph. D. (Pharmaceutics)	Teaching: 18.6 years	
2.	Dr. Trupti S Chitre	M. Pharm., Ph. D. (Pharmaceutical Chemistry)	Teaching: 18 years	
3.				
4.				
5.				
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7.				
8.				

Signature of the Head of the Institution with date

Signature of the Inspectors with dates

Designation	Qualification Required	Experience Required	Remarks of the Inspectors
Lecturer/Assistant Professor	First Class B.Pharm with Master's degree in Pharmacy (M.Pharm) in appropriate branch of specialization in Pharmacy (Qualification must be PCI recognized). A PCI recognized Pharm.D degree holder shall also be eligible for the posts of Lecturer/Assistant Professor in the subjects of pathophysiology, pharmacology and pharmacy practice.	A lecturer will be re-designated as Assistant Professor after 2 years of teaching experience in PCI approved/recognized Pharmacy College.	

S.No.	Name of Lecturer/ Assistant Professor	Qualification Available	Experience Available	Remarks of the Inspectors
1.	Dr. Mithun Bandiwadkar	M. Pharm., Ph. D. (Pharmaceutics)	Teaching: 9 years	
2.	Mrs. Reshma Mirajkar	M. Pharm. (Pharmaceutics)	Teaching: 8 years Industrial:5	
3.	Mr. Rahul R Padalkar	M. Pharm. (Pharmaceutics)	Teaching: 8 years Industrial:5	
4.	Mr. Jitendra W Gajbe	M. Pharm. (Pharmaceutics)	Teaching: 4 years	
5.	Mrs. Shivani H Rao	M Sc (Microbiology)	Teaching: years Industrial:	
6.	Mr. Padmanabh Deshpande	M. Pharm. (Pharmaceutical Chemistry)	Teaching: 16 years	
7.	Mr. Kalyani Asgaonkar	M. Pharm. (Pharmaceutical Chemistry)	Teaching: 15 years	
8.	Mrs. Shital M Patil	M. Pharm. (Pharmaceutical Chemistry)	Teaching: 8 years	
9.	Mrs. Vidhya N Wabale	M. Pharm. (Pharmaceutical Chemistry)	Teaching: 7 years	
10.	Dr. Sachin V Tembhone	M. Pharm., Ph. D. (Pharmacology)	Teaching: 10 years	
11	Dr. Teena Saldhana	M. Pharm. Ph. D. (Pharmacology)	Teaching: 4 years Industrial: 3 years	

Signature of the Head of the Institution with date

Signature of the Inspectors with dates

12	Mrs. Swati U Kolhe	M. Pharm. (Pharmacology)	Teaching: 10 years	
13	Mrs. Rucha Kulkarni	M. Pharm. (Pharmacology)	Teaching: 4 years	
14	Mrs. Amruta Avalaskar	M. Pharm. (Pharmacognosy)	Teaching: 8 years	
15	Mrs. Rashmi Yadav	M. Pharm. (Pharmacognosy)	Teaching: 4 years	
16	Mr. Shrikant Morkar	M. Pharm. (Pharmaceutics)	Teaching: 2 years	

PHARMACY COUNCIL OF INDIA**STAFF DECLARATION FORM**

From

Teacher's Name
(as on University Degree certificate)Recent Passport size photo of the Employee
Signed by Dean/Principal of the College.

Photograph

Date of Birth & Age

Qualification	College & University	Year	Registration No. with State Pharmacy Council	Name of the State Pharmacy Council
B.Pharm				
M.Pharm				
(Ph.D.)/others				

Copies of Registration Certificate and University degree/PG/Ph.D. be attached.

Present Designation : _____

Department : _____

College : _____

City : _____

Nature of appointment : Permanent/Temporary/Adhoc/Honorary/Part-time

Whether belongs to : O.G./SC/ST/OBC/Ex-service/Others

Contd. on page 2.

Signature of the Head of the Institution with date

Signature of the Inspectors with dates

::2::

Permanent Residential
Address of employee : _____

Copy of Passport/Voter Card/Ration Card/PAN No./Electricity Bill/Driving License Attached as a proof of residence.

STD Code _____ Phone No. _____
Phone & Fax Number Office : _____
with Code Residence : _____

E-mail address : _____

Date of joining present institution : _____ as _____
(Designation)

Details of the previous appointments/teaching experience

Position	Name of Institution	From	To	Total Experience in years
Lecturer				
Reader/ Assistant Professor				
Professor				
Principal				

- 1) Before joining present institution I was working at _____ as _____ and relieved on _____ after resigning/retiring (**relieving order is enclosed from the previous institution**).
- 2) I, hereby undertake that I have not given my name as teaching faculty in any other Pharmacy institution for teaching any Pharmacy course and not working in any where other than this institution Pharmacy College/Medical College/Dental College/Industry/Community Pharmacy/Hospital Pharmacy/Govt. Service/any other service in the State or outside the State in any capacity full-time/part-time other than the above.

Contd. on page 3

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- 3) I have drawn total emoluments from this college as under (Please fill the data of last academic session) :-

	Amount Received	TDS
April, 20		
May, 20		
June, 20		
July, 20		
August, 20		
September, 20		
October, 20		
November, 20		
December, 20		
January, 20		
February, 20		
March, 20		

(Copy of my form 16 (TDS certificate) for the last financial year is attached)

P.A.N. : _____ Circle : _____

Declaration

- I have not worked at any other pharmacy college/institution or presented myself at any inspection during my employment in this college.
- It is declared that each statement and/or contents of this declaration made by the undersigned are absolutely true and correct. In the event of any statement made in this declaration subsequently turning out to be incorrect or false the undersigned has understood and accepted that such misdeclaration in respect to any content of this declaration shall also be treated as a gross misconduct thereby rendering the undersigned liable for necessary disciplinary action (including removal of his name from Register of Registered Pharmacists).

Signature of the Employee:

Date : _____ Place: _____

Endorsement

This endorsement is the certification that the undersigned has satisfied himself/herself about the correctness and veracity of each content of this declaration and endorses the abovementioned declaration as true and correct. In the event of this declaration turning out to be either incorrect or any part of this declaration subsequently turning out to be incorrect or false it is understood and accepted that the undersigned shall also be equally responsible besides the declarant himself/herself for any such misdeclaration or misstatement.

Countersigned by the Director/Dean/
Principal in respect of Teaching Staff

Date : _____ Place : _____