



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH



Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,
2F,12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade

2021-22

3.1.1- Total Grants from Government and non-governmental agencies for research projects / endowments in the institution during the year (INR in Lakhs) **1.10**

3.1.1 Research funds sanctioned and received from various agencies, industry and other organisations				
Nature of the Project	Duration	Name of the funding Agency	Total grant sanctioned	Amount received during the Academic year
Major projects	-	-	-	-
Minor Projects	---	----		
Interdisciplinary Projects	---	----	---	---
Industry sponsored Projects	3 months	Separate list attached	45390.00	45390.00
Projects sponsored by the University/ College	3 months	Separate list attached	12555.00	12555.00
Students Research Projects <i>(other than compulsory by the College)</i>	3 months	Separate list attached	52467.00	52467.00
International Projects	--	---	---	---
Any other(Specify)	-	-	-	-
Total Funds (Rs.)			110412.00	110412.00

Summary

Name of the Project/ Endowments, Chairs	Name of the Principal Investigator/C o-investigator	Department of Principal Investigator	Year of Award	Amount Sanction ed	Duration of the project	Name of the Funding Agency	Type (Government/non- Government)
Industry Sponsored							
Spray drying of pharmaceuticals	Dr. Mangesh Bhalekar	Pharmaceuti cs	2021-2022	9400.00	03 Month	Novachem Drugs Pvt Ltd	Non-Government
Determination of Sun Protection Factor of cosmetic product	Dr. Mithun Bandivadekar	Pharmaceuti cs	2021-2022	2360.00	03 Month	Parama Naturals, Satavayu Naturals LLP.	Non-Government
Formulation of Pheromone Tablet	Dr. Mangesh Bhalekar	Pharmaceuti cs	2021-2022	3630.00	03 Month	Green Core Biosolutions, Baramati	Non-Government
Formulation Filling, Sealing and Evaluation of gel	Dr. Mangesh Bhalekar	Pharmaceuti cs	2021-2022	30000.00	03 Month	Indus Biotech Private Ltd.	Non-Government
Total Fund Received (Rs.)				45390.00			
Outside Projects							
Formulation and evaluation of Liposome for cancer targeting	Dr. Mangesh Bhalekar	Pharmaceuti cs	2021-2022	12555	03 Month	Ashokrao Mane college of Pharmacy Petwadgaon, pune	Non-Government
Total Fund received (Rs.)				12555.00			

In-house Research Projects

Name of the Project/ Endowments, Chairs	Name of the Principal Investigator/Co-investigator	Department of Principal Investigator	Year of Award	Amount Sanctioned	Duration of the project	Name of the Funding Agency	Type (Government/non-Government)
Study of nootropic activity of THF polyherbal formulation in Rodents	S U Kolhe	Pharmacology	2021-22	4000	03 Months	Anam Bagwan, Atharva Suryawanshi AyushiShaha, Aditya Lokhande	Non-Government
Assessment of lethal effect of THF in lab animals	S U Kolhe	Pharmacology	2021-22	4000	03 Months	VidhiDagde, Apurva Pawar, Sonali Bhondve, R Bhagvat, P Devkate	Non-Government
To formulate and evaluate Carimor tablets for management of Dengue	A N Avlaskar	Pharmacognosy	2021-22	5900	03 Months	Vaishnavi Nikam, R Shingavi, Divyesh Jain	Non-Government
Development of HPTLC method for estimation of Lupeol from Kanchan Bark extract and marketed product	Dr M C Damle	Quality Assurance	2021-22	6101	03 Months	Rutuja Londhe, Uttekar Pranav, AwadJayesh	Non-Government

Development and validation of spectrophotometric method for determination of drugs	Dr S V Gandhi	Quality Assurance	2021-22	5200	03 Months	Pratiksha Waghmare, IshwariSapkal, Sakshi Wable	Non-Government
Formulation and evaluation of herbal dry shampoo	Mrs. Megha Shah	Pharmacognosy	2021-22	4000	03 Months	Rathod Namrata, Shah Ayushi, Siddhi sefalika, AtharvSuryavani	Non-Government
Preliminary and analytical study of medicinal plant(radish)	Mrs. Megha Shah	Pharmacognosy	2021-22	6000	03 Months	Sanket Pujari, Patil Harshwardhan, Vaibhavi Mulley, Dhumal Anand	Non-Government
Herbal Anti-spasmodic Gel for relief of menstrual cramps	Dr. Reshma Mirajkar	Pharmaceutics	2021-22	7000	03 Months	Girya Kulkarni, Sakshi Sagal, JyotiKupate, Tanmayavyas, Nirmala Rajpurohit	Non-Government
Formulation of Fexofenadine co-crystals for improved dissolution	Dr Mangesh Bhalekar	Pharmaceutics	2021-22	5546	03 Months	VidhiDayade, Vishwajit Lad, SarveshChourange, Neha	Non-Government

						Bamane	
Solid state studies of an active pharma ingredient	Dr. Monica Rao	Pharmaceutics	2021-22	4720	03 Months	Isha Gadge, Saloni J, Gargi Nikam, Saurav Kulkarni	Non-Government
Total In-house Project Fund (Rs.)=				52467.00			

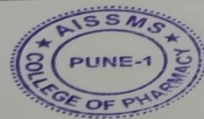
26.197
2.77.403
03.6300.1

**ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S
COLLEGE OF PHARMACY (B. PHARM.)
KENNEDY ROAD , NEAR R. T.O , PUNE -411 001.**

SCHEDULE FORMING PART OF THE RECEIPT & PAYMENT ACCOUNT
FOR THE YEAR ENDED 31ST MARCH 2022

SCHEDULE D OTHER RECEIPTS AND PAYMENTS

NO.	PARTICULARS	RECEIPTS	PAYMENT
B	FOR 2020-2021		
1	OBC Freeship (2020-21)	12,10,379.75	12,10,379.75
2	OBC Scholarship (2020-2021)	13,00,517.75	13,00,517.75
3	SBC Scholarship (2020-2021)	1,94,916.00	1,94,916.00
4	SC Freeship (2020-2021)	5,07,290.00	5,07,290.00
5	SC Scholarship (2020-2021)	29,00,646.00	29,00,646.00
6	ST Freeship (2020-2021)	9,61,645.00	9,61,645.00
7	ST Scholarship (2020-2021)	8,69,907.00	8,69,907.00
8	VJNT Freeship (2020-2021)	6,74,891.50	6,74,891.50
9	VJNT Scholarship (2020-2021)	23,74,664.00	23,74,664.00
VII	UNIVERSITY RESEARCH PROJECT		
1	Dr. Ashwini R. Madgulkar	-	26,464.00
2	Dr. Mrinalini Chintamani Damle	13,755.00	10,220.00
3	Dr. Trupti Sameer Chitre	32,778.00	12,727.00
4	Prof. Amruta Avalaskar	-	24,310.00
5	Prof. Kalyani Dharendra Asgaonkar	22,822.00	12,179.00
6	Dr. Reshma N. Mirajkar	-	7,832.00
7	Prof. Swati Govardhan Narkhede	26,749.00	13,752.00
VIII	OTHERS		
1	TDS Payable	1,18,960.00	1,24,055.00
2	In-House Project	18,900.00	35,600.00
3	Remuneration to Staff	4,703.00	-
4	Mr. Rahul R. Padalkar	358.00	-
5	Students Aid Fund	31,000.00	-
6	University Exam Fees	8,48,380.00	8,48,380.00
7	University Eligibility fee	1,27,700.00	1,27,700.00
8	Loans & Advances	14,01,383.00	1,37,559.00
9	Mah-DBT Scholarship-2019-20	2,419.75	53,509.75
10	Miscellaneous Advance	50,575.00	14,000.00
11	Payable Student Insurance fees	83,840.00	84,087.00
12	Payable to Mr. Akshay Bavaskar	-	2,500.00
13	Payable to Transcript / Recommendation Fees	2,537.00	3,063.00



ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S
COLLEGE OF PHARMACY (M. PHARM.)
 KENNEDY ROAD , NEAR R TO , PUNE - 411 001.
 SCHEDULES FORMING PART OF THE **RECEIPT & PAYMENT** ACCOUNT
 FOR THE YEAR ENDED 31ST MARCH 2022

SCHEDULE D OTHER RECEIPTS AND PAYMENTS

SR. NO.	PARTICULARS	RECEIPTS Rs.	PAYMENT Rs.
IV	FEE RECEIVABLE FROM STUDENTS	-	5,979.00
1	Year 2017-2018	80,820.50	16,698.50
2	Year 2018-2019	2,01,450.25	6,455.75
3	Year 2019-2020	52,22,218.25	41,823.03
4	Year 2020-2021	1,39,08,921.50	2,17,61,439.00
5	Year 2021-2022		
V	SCHOLARSHIP/ FREESHIP RECEIVABLE FROM SDSWO		
A	FOR 2019-2020		
1	OBC Scholarship (2019-2020)	37,908.75	37,908.75
2	ST Freeship (2019-2020)	71,812.50	71,812.50
3	VJNT Scholarship (2019-2020)	72,585.00	72,585.00
B	FOR 2020-2021		
1	EBC Scholarship (2020-2021)	16,39,726.00	16,39,726.00
2	OBC Scholarship (2020-2021)	2,75,546.25	2,75,546.25
3	SC Scholarship (2020-2021)	8,54,669.00	8,54,669.00
4	ST Freeship (2020-2021)	4,39,000.00	4,39,000.00
5	VJNT Scholarship (2020-2021)	8,03,140.00	8,03,140.00
VI	OTHERS		
1	TDS For Party	37,440.00	41,431.00
2	Industrial Project	37,630.00	34,000.00
3	Other receivable	12,000.00	-
4	Advance to Staff & Suppliers	6,04,851.00	6,04,851.00
5	Grant from AICTE Research Promotion Scheme 2017-18	67,710.00	-
6	Grant from AICTE Research Promotion Scheme	1,804.00	1,804.00
7	Grant from Skill and Personality Development Centre	39,283.00	3,41,133.00
8	Student Aid Fund	18,500.00	-
9	Stamp Expenses	185.00	185.00
10	Misc. Advance	4,21,175.00	4,08,350.00
11	Pre-Paid Affiliation Fees for PCI	2,00,000.00	2,36,000.00
12	Pre-Paid University Affiliation Fees	38,200.00	-
13	Project in house	14,200.00	-
14	Khandhare Priyanka	852.00	-
15	Fees Against Students Bank Loan	1,27,437.00	77,437.00
TOTAL		2,90,78,234.00	3,11,28,086.78



(Enclosed with Application)

C

AISSMS

College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No. 1107 C. No. 04510200000881 Date 02/07/21

Amount credited on A/C No.: 04510200000881 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Nova chem Drugs
pvt. Ltd.

Class Industry Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) <u>Industry project</u>	<u>8000/-</u>
13) <u>GST</u>	<u>1440/-</u>
14) <u>NEFT- 000106084698</u>	
15) <u>02/07/21</u>	
16)	
TOTAL Rs.	9,440/-

Total in words Rupees Nine thousand
Four hundred forty only

Accept the amount as above 9,440/-

Checked By Dr. M.R. Bhalekar
Deposited By Shehamit



(For Candidates)

D

AISSMS

College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No. 1107 C. No. 04510200000881 Date 02/07/21

Amount credited on A/C No.: 04510200000881 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Nova chem Drugs
pvt. Ltd.

Class Industry Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) <u>Industry project</u>	<u>8000/-</u>
13) <u>GST</u>	<u>1440/-</u>
14) <u>NEFT- 000106084698</u>	
15) <u>02/07/21</u>	
16)	
TOTAL Rs.	9,440/-

Total in words Rupees Nine thousand
Four hundred forty only

Accept the amount as above 9,440/-

Checked By Dr. M.R. Bhalekar
Deposited By Shehamit Gawade



NOVACHEM

ICICI Bank Advice Receipt

7/5/21 3:44 PM

Transaction Details

Account Number: 056405004327

Transaction Date: 02-07-2021 00:00:00

Transaction Amount: INR 9,440.00

Debit/Credit: Debit

Transaction Description : NEFT:000106084698/BAR
B0SHIPOO/PRINCIPAL

Note: This is an electronically generated receipt and
does not need any signature.

' सत्याला मरण नाही '

26058208
26058204



ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S
COLLEGE OF PHARMACY

(Approved by AICTE & PCI, New Delhi, Recognized by Govt. of Maharashtra
and Affiliated to Savitribai Phule Pune University)

Kennedy Road, Near R.T.O., Pune - 411 001.

www.aissmscop.com Email: contact@aissmscop.com College ID No.: PU/PN/Pharm/117/(1996)

Ref. No.:

Date : 25 JUN 2021

INVOICE

To, Ms Novachem Drugs Pvt Ltd, Pune 29/2, D2 block, Chinchwad MIDC, Pune- 411019 GST No-27AAACN9231H1ZG		
sr	Particulars	Amount (Rs)
1.	Spray Drying trail at our facility	8000=00
	GST@18%	1440=00
	Grand Total	9440=00

The payment should be made in favour of Principal, AISSMS College of Pharmacy, Pune.

GST no 27AAATA1675PSD001

Dr Ashwini R Madgulkar
Principal

AISSMS College of Pharmacy
Pune-1

GOP/PN/2021-22/11-3

Date: 23-06-21

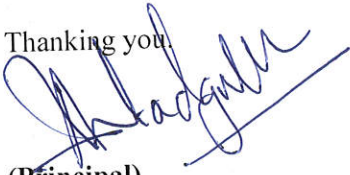
To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.
Sub: Submission of proposal of sponsored research project for approval.

AISSMS College of Pharmacy Pune-1 Inward No: 15-19 Date: 15.07.2021

Respected Sir,

Please find enclosed research proposal titled, " **Spray drying of pharmaceuticals**" under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

Thanking you


(Principal)
Principal
AISSMS College of Pharmacy
Pune-1


(M. C. D. Amle)
(Project Co-ordinator)


(Chief Investigator)
Dr. M. R. Bhalekar

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., **Pune-411001.**


Subject: Permission for Industry sponsored short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. **M R Bhalekar**
The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.


Yours sincerely
(Name and signature of Students)

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A)

Name of the Industry: Nova Chem Drugs Pvt, Ltd. Pune

Complete postal address:

29/2, DII BLOCK, MIDC CHINCHWAD, PUNE-411019 (MAHARASHTRA)

Title of Project: “ **Spray drying of pharmaceuticals**”

Proposed duration of Project: 07 Days

Ref. No. and date of letter through proper channel:

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Total cost of actuals.(Details are mentioned below)	Nil
2	Infrastructure utility fees.(50% of actuals)	1800=00
3	Society processing fees. .(50% of actuals)	1800=00
4	Staff remuneration .(same as actuals)	
	Dr M R Bhalekar	2000=00
	Dr A R Madgulkar	1950=00
	Mr Sandip Patil	1000=00
	Mr M M Chopane	450=00
	Grand Total	8000=00

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
	All ingredients provided by Nova Chem	—	—
Grand total			



(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

Dr Mangesh Bhalekar

UNDERTAKING

I undersigned hereby take responsibility of the project titled, “ Spray drying of pharmaceuticals”

to be conducted between 22 June -28 June 2021

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.



(Name and signature of Chief Investigator)
Dr Mangesh Bhalekar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, ““ Spray drying of pharmaceuticals”

”



(Hon. Secretary, AISSMS Pune)

Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date :

Amount : 9440 = 00

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.



(Name and signature of Project –Coordinator)

Dr MR I. Shalekar



Mangesh Bhaleker <mrhbhalekar@gmail.com>

Spray Dryer Trial

4 messages

Vinayak Jangam <vinayak.jangam@novachemdrugs.com>

Wed, Jun 16, 2021 at 5:25 PM

Reply-To: vinayak.jangam@novachemdrugs.com

To: mrhbhalekar@gmail.com

Cc: "vijay.patil@novachemdrugs.com" <vijay.patil@novachemdrugs.com>

Dear sir,

We want to do trial of our project on your spray dryer. We carry all the excipients will trial. Please let me know the availability as well as the per day charges for trial.

Thanks & Regards.

VINAYAK JANGAM

NOVA CHEM DRUGS (P) LTD

29/2, DII BLOCK, MIDC CHINCHWAD,

PUNE-411019 (MAHARASHTRA)

TEL: 91 20 66112991

91 20 66112992

Please do not print this mail unless you really need to - go green!*Mangesh Bhaleker** <mrhbhalekar@gmail.com>

Fri, Jun 18, 2021 at 5:44 PM

To: vinayak.jangam@novachemdrugs.com

Cc: "vijay.patil@novachemdrugs.com" <vijay.patil@novachemdrugs.com>

Dear Mr Vinayak

Thanks for your enquiry. As per our telephonic discussion we are doing trial of spray dryer to weed out some minor problems we found in working on Monday we will make final trial and confirm about availability of equipment. The charges for trials would be Rs 8000/- and our lab assistant and myself would assist you in this.

We suggest we can schedule the trials on Thursday and Friday however we are open to days of your convenience.

Regards

Dr Mangesh Bhalekar

[Quoted text hidden]

Vinayak Jangam <vinayak.jangam@novachemdrugs.com>

Wed, Jun 23, 2021 at 10:57 AM

Reply-To: vinayak.jangam@novachemdrugs.com

To: Mangesh Bhaleker <mrhbhalekar@gmail.com>

Cc: "vijay.patil@novachemdrugs.com" <vijay.patil@novachemdrugs.com>

Dear sir,

Tommaro we are to come for trial at your facility on mornig section.

Thanks & Regards.

VINAYAK JANGAM

NOVA CHEM DRUGS (P) LTD

29/2, DII BLOCK, MIDC CHINCHWAD,

PUNE-411019 (MAHARASHTRA)

TEL: 91 20 66112991

91 20 66112992

**Please do not print this mail unless you really need to - go green!*

From: "Mangesh Bhaleker" <mrbhalekar@gmail.com>
Sent: Friday, June 18, 2021 5:45 PM
To: vinayak.jangam@novachemdrugs.com
Cc: "vijay.patil@novachemdrugs.com" <vijay.patil@novachemdrugs.com>
Subject: Re: Spray Dryer Trial
[Quoted text hidden]

Mangesh Bhaleker <mrbhalekar@gmail.com>
To: vinayak.jangam@novachemdrugs.com

Wed, Jun 23, 2021 at 12:51 PM

Dear Mr Vinayak
As per our discussion the charges for your complete work are Rs 8000/-
and you can come at 9 am tomorrow.
Thanks for choosing us.
Regards
Dr Mangesh Bhalekar

On Wed, Jun 16, 2021 at 5:25 PM Vinayak Jangam <vinayak.jangam@novachemdrugs.com> wrote:
[Quoted text hidden]

(Enclosed with Application)

C

AISSMS
College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No. **1294** Date **03.12.2021**
c. No. 04510200000881
Amount credited on A/C No. **500000000000** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Satvayur
Natural L.P.
Class Company Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	-
2) Application Form Fees.....	-
3) Development Fees.....	-
4) Tuition Fees.....	-
5) Misc. & University Charges.....	-
6) Caution Money Deposit.....	-
7) Journal Fees.....	-
8) University / Board Eligibility Fee.....	-
9) Other Fee	-
10) Student Activity Fee.....	-
11) Insurance Fee.....	-
12) <u>Sample Fees</u>	<u>2,360/-</u>
13) <u>(P centus Dept)</u>	-
14) <u>UPI ID No.:-</u>	-
15) <u>13372515163</u>	-
16) <u>03.12.2021</u>	-
TOTAL Rs.	2,360/-

Total in words Rupees Two Thousands
Three Hundred Sixty
only - 2,360/-
Accept the amount as above



Checked By [Signature]

Deposited By [Signature]

AISSMS
College of Pharmacy
Pune - 1
Inward No. 97-15
Date. 03.02.2022



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH



Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,
2F, 12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade

COP/PN/ 2021-22/125 - (1)

21 JAN 2022

To,
The Hon. Secretary
AISSMS, Shivaji Nagar
Pune-441105.





AISSMS SOCIETY
PUNE
Inward No. 8956
Date: 25/1/2022

8956
2/2/22

Sub: For Approval of Industry Sponsored Project.

Respected Sir,

We have been approached by Parama Natural Satavayur Natural LLP, Pune Cosmetic Industry for a project on "Invitro determination of Sun Protection Factor of Cosmetic Product ".The industry project expenditure is calculated as per format A, Which is based on Actual expenditure on project. Since there is no expenditure cost involved in this project. So you are requested to allow distribution of proposed charges of Rs.2000/- between Society and Principal Investigators equally.



(Dr.M.M.Bandivadekar)  (Mr.Jitendra Gajbe)  (Dr.M.R.Bhalekar)  (Dr.M.C.Damle)
(Principal Investigator) (Project Co-ordinator)

Thanking you



Your Sincerely


Dr. Ashwini R Madgulkar

Principal
AISSMS College of Pharmacy
Pune-1

25/1/2022
Submitted
Recommended for
Approval


JG/MMB/MRB
07/02/2022

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A)

Name of the Industry: *Paroma Natural, Satavayya Natural LLP*
 Complete postal address: *Penchachel, Post Office, Shambhu Vihar Society,
 Aurh, Pune, Maharashtra 411007.*

Title of Project: *Determination of sun protection factor of cosmetic product*
 Proposed duration of Project: *3* Months

Ref. No. and date of letter through proper channel:

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Total cost of actuals. (Details are mentioned below)	0.00
2	Infrastructure utility fees. (50% of actuals)	500/-
3	Society processing fees. (50% of actuals)	500/-
4	Staff remuneration. (same as actuals)	1000/-
	Grand Total	2000/-

360 (GST)

DETAILS OF ACTUALS

2360

Sr. No.	Item (Consumables)	Qty. Required (Min. pack size)	Cost
	NA	NA	0.00
	}	}	}
	}	}	}
	Grand total		0.00

read
 Dr. *Mithun Bordinadkar* Mr. *J.H. Goye*
 (Name and Signature of Chief Investigator)

[Signature]
 (Accountant sign)

* Cost of consumables shall be calculated using standard catalogue.

Date: 04/01/2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.


Sub: Submission of proposal of ^{Industry} sponsored research project for approval.


Respected Sir,

Please find enclosed research proposal titled, "Determination of Sun protection Factor of Cosmetics Product of Paradma Naturals" under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

Thanking you.


(Chief Investigator)


Dr. M. R. Bhalekar
(Project Co-ordinator)


(Principal)

Dr. Mithun Bhandarkar
Mrs. Jitendra Gaikbe

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.


Subject: Permission for Industry sponsored short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term ^{Industry} self supported research project under the guidance of Mr. / Mrs. / Prof. / Dr. Mithun Bhandarkar & Mrs. J. Gaikbe. The duly filled format has been enclosed for your kind information and approval.

I / We will be obliged, if you consider my /our request and permit us for the same.


Thanking you.


Yours sincerely
(Name and signature of Students)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, Determination of Sun protection Factor of Cosmetic product to be conducted between

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.


Dr. Mithun Bendive Dekar

(Name and signature of Chief Investigator)


Mr. Jitendra K. Gajjar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Determination of Sun protection Factor of Cosmetic product"

(Hon. Secretary, AISSMS Pune)

Hon. Secretary

All India Smt. Shivaji Memorial Societ

Pune-411 005.

POST APPROVAL DETAILS

Details of Payment : Online UPI Transaction 133725151163

Challan No. with Date : 1294 03/12/2021

Amount : 2,860/-

(Kindly enclose Xerox copies of Application and Challan)


The requisite formalities have been completed and verified by the undersigned.


(Name and signature of Project -Coordinator)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, Determination of Sun protection Factor of Cosmetic product to be conducted between Dec. 2024 to Feb 2025.

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.


Dr. Mithun Bhandarkar
(Name and signature of Chief Investigator)


Mr. Jitendra H. Gayle

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Determination of Sun protection Factor of Cosmetic product"

(Hon. Secretary, AISSMS Pune)

Hon. Secretary

All India Shri. Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS


Details of Payment : Online UPI Transaction 133725157163

Challan No. with Date : 1294 03/12/2024

Amount : 2,860/-

(Kindly enclose Xerox copies of Application and Challan) yy

The requisite formalities have been completed and verified by the undersigned.


Mr. Jitendra H. Gayle
(Name and signature of Project -Coordinator)

D. M. R. Bhandarkar

No. 04510200000881

(Enclosed with Application)

C

AISSMS

College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.:

1245

Date: 07/10/2021

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Green Core

Biosolutions

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) <u>Industry Project</u>	<u>3630.00</u>
13)	
14) <u>Ref. No. -</u>	
15) <u>IMPS 128015740187</u>	
16)	
TOTAL Rs.	<u>3630 /-</u>

Total in words Rupees Three Thousand Six Hundred & Thirty Only

Accept the amount as above

Checked By Dr. M.R. Bhulekar



Deposited By Ms. Suvosna Jaisankar

(Enclosed with Application)

C

AISSMS
College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.:

1245

Date: 07/06/2021

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Green Care

Biosolutions

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Industry Project	3630.00
13)	
14) Ref. No. -	
15) <u>IMPSE 128015760187</u>	
16)	
TOTAL Rs.	3630 /-

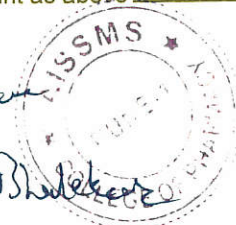
Total in words Rupees Three Thousand
Six Hundred & Thirty Only

Accept the amount as above

M. J. Jalekar

Checked By

Dr. M. R. Bhalekar



M. Subhanna Jankar

Deposited By

M. Subhanna Jankar

' सत्याला मरण नाही '

26058208
26058204

ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S
COLLEGE OF PHARMACY

(Approved by AICTE & PCI, New Delhi, Recognized by Govt. of Maharashtra
and Affiliated to Savitribai Phule Pune University)

Kennedy Road, Near R.T.O., Pune - 411 001.

www.aissmscop.com Email: contact@aissmscop.com College ID No.: PU/PN/Pharm/117/(1996)



Ref. No.:

INVOICE

Date :

22 SEP 2021

To, Ms Grencore Biosolutions
G 350, Katphal Road, MIDC, Baramati, Dist Pune.

sr	Particulars	Amount (Rs)
1.	Formulation of tablets	3630=00
	Grand Total	3630=00

The payment should be made in favor of Principal, AISSMS College of Pharmacy, Pune.

Dr Ashwini R Madgulkar

Principal
AISSMS College of Pharmacy
Pune-1

COP/1PN/2021-22/44-①

A.I.S.S.M. SOCIETY
PUNE
Inward No. 2187
Date: 20/8/2021

2187
21/8

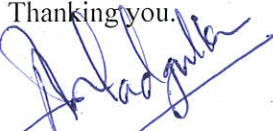
To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.
Sub: Submission of proposal of sponsored research project for approval.

20 AUG 2021
AISSMS
College of Pharmacy
Pune-01
Inward No. 64-①
Date: 22.10.2021.

Respected Sir,

Please find enclosed research proposal titled, “**Formulation of pheromone tablet**”. under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

Thanking you.


(Principal)

Principal
AISSMS College of Pharmacy
Pune-1


(Project Co-ordinator)


(Chief Investigator)
Dr. M R Bhalekar

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

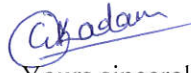
Subject: Permission for Industry sponsored short term research project.


Respected Madam,

I / We the undersigned would like to undertake a short term industry project under the guidance of Dr Mangsh Bhalekar
The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.


Yours sincerely
(Name and signature of Industry Person)
Mr. Ganesh Kadam

MRB/MMC

22/10/2021

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A)

Name of the Industry: Greencore biosolutions
Complete postal address: G 350, Katphal Road, MIDC, Baramati, Dist Pune.

Title of Project: , " **Formulation of pheromone tablet**".

Proposed duration of Project: 30 days


Ref. No. and date of letter through proper channel:

Proposed Expenditure:

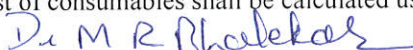
Sr. No.	Parameter	Amount (Rs)
1	Total cost of actuals.(Details are mentioned below)	00=00
2	Infrastructure utility fees.(50% of actuals)	750=00
3	Society processing fees. .(50% of actuals)	750=00
4	Staff remuneration .(same as actuals)	
	Dr Ashwini Madgulkar	420=00
	Mr M M Chopane	210=00
	Dr M R Bhalekar	800=00
	Mr S R Patil	700=00
	Total	3630=00

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
	All ingredients were supplied by Industry		
Grand total			


(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

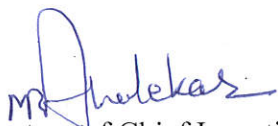



Mr M M Chopane

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Formulation of pheromone tablet".. Will be conducted between 1 August 2021 to 30 August 2021.

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.



(Name and signature of Chief Investigator)
Dr Mangesh Bhalekar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Formulation of pheromone tablet".

”



(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment : *FMPS. 7272908181*
Challan No. with Date : *7-10-21, 1263-NO.*
Amount : *3630/-*

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.



(Name and signature of Project –Coordinator)

Dr M R Bhalekar

GUIDELINES FOR INDUSTRY SPONSORED PROJECTS (Format-A)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor.
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-A) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator shall put forward the summary report in the prescribed format to the society through principal for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall collect 100% amount as an advance from the sponsorer after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsorer then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the college account against which the official receipt shall be issued the sponsor.



GREENCORE BIOSOLUTIONS

G-350, Katphal Road, M.I.D.C., Baramati, District-Pune, Maharashtra.

Email: info@greencore.in Website: www.greencore.in

Contact: +91 98 5070 4243 ; +91 7272 90 8181

Ref. No. : GreenCore/Letter/2021-08/01

August 05, 2021

To
The Principal
AISSMS College Of Pharmacy
Kennedy Road, Near R.T.O.,
Pune-411001,
Maharashtra, India

Sub: Permission to use Tablet Compression Machine.

Respected Madam,

Let me take this opportunity to introduce GreenCore BioSolutions. We are providing various solutions to farmers to grow their produce without using harsh pesticides. We are promoting Integrated Pest Management using various pheromone traps. We are assisting farmers to control pests without using harsh chemicals.

We would like to use college facilities for compression of tablets to make pheromone based tablets. We would like to use the facility for two days.

Request you to allow us on 9th and 10th August on payment basis.

Look forward to your positive reply.

Thanks and Regards,
Ganesh Kadam
Contact: +91 7272908181

GreenCore BioSolutions
Baramati MIDC, Baramati, Pune
Maharashtra.

Email : info@greencore.in
Website : www.greencore.in

(Enclosed with Application)

C

AISSMS
College of Pharmacy (M.Pharm)
Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **1398** Date: **3/9/22**

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Indus Bireth (td)

Class _____ Year 2022 - 2023

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
2) Industry Page 4	30000.00
13) Less TDS	3000.00
4) Total.	27000.00
15) Add GST @ 15%	5400.00
16) NEFT/RTGS 2225863596131	
TOTAL Rs.	32400.00

Total in words Rupees Thirty Two Thousand
Four Hundred Only

Accept the amount as above _____



Mr. Indus Bireth
Deposited By

' सत्याला मरण नाही '



ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S
COLLEGE OF PHARMACY

26058208
26058204

(Approved by AICTE & PCI, New Delhi, Recognized by Govt. of Maharashtra
and Affiliated to Savitribai Phule Pune University)

Kennedy Road, Near R.T.O., Pune - 411 001.

www.aissmscop.com Email: contact@aissmscop.com College ID No.: PU/PN/Pharm/117/(1996)

Ref. No.: COP/PN/2022-23/68-①

Date: 14.09.2022

INVOICE

To, Ms Indus Biotech Ltd Rahul Residency, Salunkhe Vihar, Kondwa, Pune.		
sr	Particulars	Amount (Rs)
1.	Formulation filling, sealing and evaluation of gel	30000=00
	GST@18%	5400=00
	Grand Total	35400=00

The payment should be made in favor of Principal, AISSMS College of Pharmacy, Pune.
A/c no 04510200000881, IFSC code BARB0SHIPOO (Fifth letter is zero)
GST no- 27AAATA1675TIZD, A/c no 04510200000881,

Dr Ashwini R Madgulkar
Principal
AISSMS College of Pharmacy
Pune-1

AISSMS
College of Pharmacy

Pune-01
Inver No: 64-40

Date: 22.10.2021



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

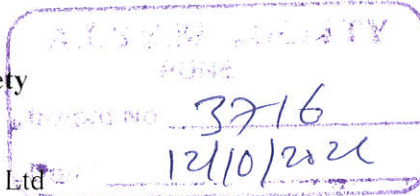


Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,
2F,12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade

Ref. No. COP/PN/2020-21/69 - ③

Date:- 6-10-21

To,
The Honorary Secretary
All India Shri Shivaji Memorial Society
Pune -411005



3716
21/10

Sub: About projects with Indus Biotech Ltd

Respected sir

In past we have completed industry project with Indus Biotech with your approval. As communicated to you in last week Indus Biotech has approached us for next project and you have permitted us to conduct the project.

In this regards

- 1) we will be entering MoU with the said industry and they will be granting us about **3-4 projects in near future**. We have done project with Indus Biotech in past and have a confidentiality non disclosure agreement for the same. The terms of **MoU** that we have agreed upon are attached as separate sheet for which your approval is needed.
- 2) Before starting of project we need to provide analysis of water at our lab for which about **Rs 7000/-** will be required and is included in project cost. Your approval for this too will be needed.
- 3) The Indus Biotech is ready to provide the two machines for filling and sealing of gel required in this project as **gift by which will be costing 1.25 lakh**
- 4) we need to buy an **air compressor which would cost about 20000/-** required for running the same, which will be useful for other instruments also.

The project proposal in approved format A is enclosed along with for your kind approval.


Prepared by

Dr R R Padalkar


Checked by

Dr M R Bhalekar


Accountant

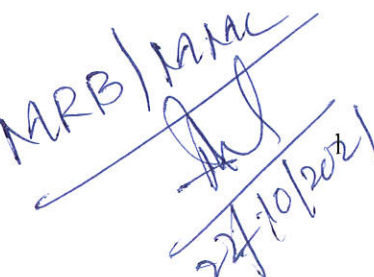
Mr M M Chopane



Dr Ashwini Madgulkar

Principal

AISSMS College of Pharmacy
Pune-1


MRB/NAAC
22/10/2021

GUIDELINES FOR INDUSTRY SPONSORED PROJECTS (Format-A)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor.
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-A) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator shall put forward the summary report in the prescribed format to the society through principal for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall collect 100% amount as an advance from the sponsorer after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsorer then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the college account against which the official receipt shall be issued the sponsor.

COP/PN/2021-22/69-14

Date:

6 OCT 2021

To,

Hon. Secretary

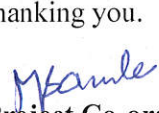
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, “ **Formulation filling, sealing and evaluation of gel**”. under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

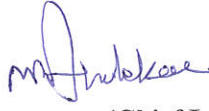
Thanking you.


(Project Co-ordinator)

Dr M C Damle



Dr M R Bhalekar



Dr M R Bhalekar




(Chief Investigator)

Dr RR Padalkar


(Accountant)

Mr M M Chopane


(Principal)

Dr Ashwini Madgulkar

Principal

AISSMS College of Pharmacy
Pune-1

To,

The Principal,

AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for Industry sponsored short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Dr Mangsh Bhalekar and Mr Rahul Padalkar
The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.


Yours sincerely

(Name and signature of Students)

Ms Sunil Ramdasi

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-C)

Name of the Industry: M/s Indus Biotech Private Ltd,
Complete postal address: 1 Rahul Residency, Plot No 6 &7, Off Salunke Vihar Road,
Kondhwa, Pune 411048


Title of Project: **“Formulation filling, sealing and evaluation of gel”**.

Proposed duration of Project: 6 months
Ref. No. and date of letter through proper channel:
Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Total cost of actuals.(Details are mentioned below)	70 10000=00
2	Infrastructure utility fees.(50% of actuals)	5000=00
3	Society processing fees. .(50% of actuals)	5000=00
4	Staff remuneration .(same as actual)	
	Dr Ashwini Madgulkar	2000=00
	Dr M R Bhalekar	3000=00
	Mr R R Padalkar	2500=00
	Mr S R Patil	15 00=00
	Mr M M Chopane	1000=00
	Total	30000=00

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
1	All ingredients will be supplied by Industry		
2.	Water analysis	NA	7000=00
3.	Instrument operating cost	NA	3000=00
Grand total			10000=00


Dr. M. R. Bhulekar

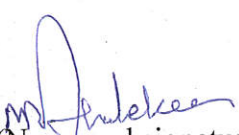
(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Formulation filling, sealing and evaluation of gel". Will be conducted between 5/10/2021 to 30/4/2022.

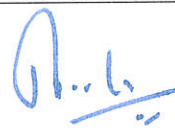
I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.


(Name and signature of Chief Investigator)
Dr Mangesh Bhalekar Dr RR Padalkar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, " Formulation Development and invitro evaluation of Fenugreek oil gel".

”



(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date :

Amount :

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project –Coordinator)

It is understood mutually that

Indus biotech will offer products for development to AISSMS COP.

The filling and sealing equipment for same will be provided by Indus biotech to AISSMS CoP as per Indus Biotech specifications for the machine. This will be the sole property of Indus Biotech Pvt.Ltd. donated to AISSMS Collage of pharmacy for Product Development work & for Academic studies of M. Pharm students.

The work will form part of M Pharm students academic project work which will be recorded in his / her dissertation and will be published with joint credits.

The official guide will be from AISSMS CoP and person from Indus Biotech will be actively involved in progress of work.

The testing services to be availed outside will be paid by Indus Biotech.

Any testing work at AISSMS involving consumables will be charged nominally or can be included in project cost.

The remuneration will be on product/project basis which will be decided mutually.

Both the parties mutually decide Time Frame of Project and AISSMS shall strictly follow the timeframe as decided and review will be performed time to time by both Indus Biotech Pvt.Ltd. & AISSMS COP.

Anticipating delay in project should be intimated by AISSMS to Indus Biotech with revised time frame. Time frame in case of delay should not be extended in any case beyond 15 days from previous completion date of project.

Both the parties will enter in MoU as deemed fit to Indus Biotech.

ANNEX. (Charges for Trials & Projects)

Trial Charges of Formulation Rs.5000

Trial Charges with Stability Studies Rs.25000

Project Work : Includes :

Formulation

Evaluation (Analysis) : Physicochemical Parameters

Stability : Accelerated Stability with Evaluation at specified conditions & Time Points

Fees of Project work done at AISSMS shall be decided based on the project work involved which feels appropriate to both the parties.

Protocol & Report writing in Indus Format (Indus Biotech Formulation person shall guide to students in writing protocol & report.

Trial & Project Work Agreement between INDUS BIOTECH PVT.LTD. & AIMMS Collage of Pharmacy, RB Motilal Kennedy Rd, near R.T.O Office Pune, Railway Officers Colony, Sangamvadi, Pune, Maharashtra 411001 (Principal : Dr.Ashwini Madgulkar , E mail :armadgulkar@gmail.com, armadgulkar@aismscop.com

Witness : mrbhalekar@aismscop.com Dr.Mangesh Bhalekar

(Enclosed with Application)

C

AISSMS
College of Pharmacy (M.Pharm)
Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **1317**

Date: 8/4/22

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Manju Chaudhari

Ashtekar Mane College of Pharmacy, Peth Vadgaon

Class M. Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) <u>Outside Student Project</u>	<u>10640 = 00</u>
13) <u>GST @ 18%</u>	<u>1915 = 00</u>
14)	
15)	
16)	
TOTAL Rs.	12555 = 00

Total in words Rupees Twelve Thousand Five
Hundred & Fifty Five only

Accept the amount as above

Mr. Ashtekar

Checked By

Mr. M. R. Phulekar

Manju

Deposited By

AISSMS
College of Pharmacy
Pune-1

Invoice No. 18-39
Date: 05.05.2022

COP/PN/2022-23/160

7 APR 2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

Sub: Submission of proposal of sponsored research project for approval.

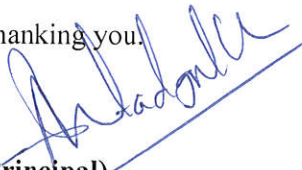
A.I.S.S.M. SOCIETY
PUNE

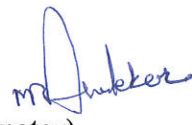
Invoice No. 165
Date: 7/4/2022

Respected Sir,

Please find enclosed research proposal titled, "Formulation and evaluation of liposomes for cancer targeting" under Category Outside Research Project (Format B) for your approval. You are requested to do the needful at the earliest. Total Project cost Rs.10640 /-

Thanking you.


(Principal)
Principal
AISSMS College of Pharmacy
Pune-1


(Project Co-ordinator)
D. M. R. Bhalekar


(Chief Investigator)
D. M. R. Bhalekar

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., **Pune-411001.**


Subject: Permission for self supported short term research project.

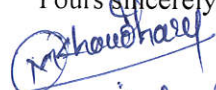
Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. M. R. Bhalekar. The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

MRB/MME

06/05/2022

Yours sincerely

Manju A. Chouhary
Ashokrao Mame college of Pharmacy,
Peth - Vadgaon.

**PROTOCOL FOR OUT SIDE INSTITUTE
RESEARCH PROJECT (Format-B)**

Name of Applicant : Mrs Manju Chaudhari

Complete postal address : Ashokrao Mane College of Pharmacy, Peth Vadgao

Title of Project : Formulation and evaluation of liposomes for cancer targeting

Proposed duration of Project : 03 months

Ref. No. and date of application through proper channel :

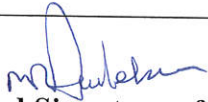
Proposed Expenditure :

Sr. No.	Parameter	Amount
1	Infrastructure utility fees. (10% of actuals)	760=00
2	Society processing fees. (10% of actuals)	760=00
3	Staff remuneration (20% of actuals)	1520=00
4	Total cost of actuals.	7600=00
	Grand Total	10640=00

DETAILS OF ACTUALS

Details of consumables required for the project:

Sr. No.	Item(Consumables)	Qty. Required	Cost
01	Rota		2000=00
02	Particle size		3600=00
04	Viscosity		2000=00
Grand total			7600=00


(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

Dr Mangesh Bhalekar

UNDERTAKING

I undersigned hereby take responsibility of the project titled, “: Formulation and evaluation of liposomes for cancer targeting” to be conducted between 10 April to 15 June 2022. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)
Dr Mangesh Bhalekar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, “ Formulation and evaluation of liposomes for cancer targeting

.”

(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date : 1817 date 8-4-22

Amount : 1- 12555/-

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

Dr M R Bhalekar

(Name and signature of Project -Coordinator)

GUIDELINES FOR OUTSIDE STUDENT RESEARCH PROJECTS (Format B)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
 2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
 3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor.
 4. To the above figure following charges shall be charged extra to the student:
 - a. 10% of the Actuals: As infrastructure utility fees
 - b. 10% of the Actuals: As processing charges to the society.
 - c. 20% of the Actuals: As staff remuneration
 5. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-B) to the society thru principal for approval.
 6. The actual experimental work shall be started only after approval from the society.
 7. The student investigator/s shall be appointed by the Chief Investigator.
 8. The outside student can utilise the facilities until the duration of the project provided under the supervision of the Chief Investigator.
 9. After completion of the approved research project, Chief Investigator shall put forward the summary report to the society for the disbursement of remuneration to the staff.
 10. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
 11. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.
- Note:** Chief Investigator shall collect 100% amount as an advance from the sponsor after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsor then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the College account (A/c No. 421546) against which the official receipt shall be issued to the sponsor.

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **2433** Date: **27/12/2021**

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5


Received from Mr./Miss Atharva R. Suryawarshi

Class T.Y. B. Pharmacy Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	}
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	
13) Other Fee.....	
14) Fee (Project).....	4000/-
15) UPI Transaction ID- 16) 1396199350742 Date: 27/12/2021	}
TOTAL Rs.	

Total in words Rupees Four Thousand
only/-

Accept the amount as above 4000/-

Checked By [Signature]


A. Suryawarshi
Deposited By

ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY
COLLEGE OF PHARMACY
Kennedy Road, Near R.T.O. Office,
Pune - 411 001.

AISSMS
College of Pharmacy
Pune-1
Inward No. 95-45
Date. 01.02.2022

8

COP/PM/2021-22/114-3

Date: 07 JAN 2022

To,

Hon. Secretary

All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

Sub: Submission of proposal of sponsored research project for approval.

AISSMS SOCIETY
PUNE
Inward No. 8453
Date. 10/11/2022

8453
3/1/22

Respected Sir,

Please find enclosed research proposal titled, "Study of Nootropic activity of PHF in Rodents."

under Category In house Research Project (Format C) for your approval.

You are requested to do the needful at the earliest. Total Project cost Rs. ---4000/-

Thanking you.

[Signature]
(Principal)
Principal
AISSMS College of Pharmacy
Pune-1

[Signature]
(Project Co-ordinator)
Dr. Mayesh Bhalekar

[Signature]
(Mrs. S. U. Kolhe)

[Signature]
(Chief Investigator)
Mrs. S. U. Kolhe

To,

The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

I/ We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. S. U. Kolhe
The duly filled format has been enclosed for your kind information and approval

I/ We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely
(Name and signature of Students)

[Signature]
Swati / MRB/MCD
01/10/2022

Aanam M. Bugwan.
[Signature]
ARSuryawanshi, Atharva. Suryawanshi
[Signature] Astat
[Signature] Hokhande
Ayushi Shah
Aditya Lokhande

UNDERTAKING

I undersigned hereby take responsibility of the project titled, *Study of Nocturnal activity of PHF in rodents.*
to be conducted between *Jan - Mar, 2022*

I also assure you that the project will be carried out after regular academic schedule
and I will remain present during the project work.



S. U. Kolhe

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.



(Hon. Secretary, AISSMS Pune)

Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date : *2433 27/12/2021*

Amount : *4000/-*

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.



(Name and signature of Project -Coordinator)

M R Shelkar

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **2456** Date: **3/1/22**

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Vidhi Anil
Dagade

Class T.V Bpharm Year 2021 - 2022

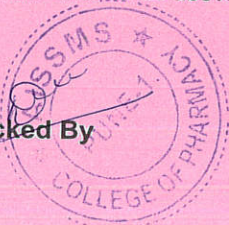
Particulars	Amount Rs.
1) Interim Fee.....	}
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	}
13) Other Fee <u>In house project</u>	
Transaction ID - T22010312534016	
14) <u>9952259</u>	}
15) <u>Date = 3/1/22</u>	
16).....	
TOTAL Rs.	4000/-

Total in words Rupees Four thousand
rupees only

Accept the amount as above 4000/-

Checked By

Deposited By



Dagade

ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY
COLLEGE OF PHARMACY
Kennedy Road, Near R.T.O. Office,
Pune - 411 001.

AISSMS College of Pharmacy Pune-1	
Inward No.	95-50
Date.	01-02-2022

9

COP/PM/2021-22/117 (2)

A.I.S.S.M. SOCIETY PUNE	
Inward No.	8454
Date:	10/1/2022

Date: 07 JAN 2022

8454
3/1/22

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.
Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, "Assessment of lethal effects of PHF in laboratory Animals." under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest. Total Project cost Rs. ~~4000/-~~

Thanking you.

[Signature]
(Principal)
Principal
AISSMS College of Pharmacy
Pune-1

[Signature]
(Project Co-ordinator)
M. B. M. D. S. (Dr. M. D. S. M. D. S.)

[Signature]
(Chief Investigator)
(Mrs. S. V. Kolhe)

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., **Pune-411001.**

Subject: Permission for self supported short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. / Dr. *S. V. Kolhe*
The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

[Signature]

Yours sincerely
(Name and signature of Students)

Apurva K Powar

[Signature] Vidhi Anil. Dagade.

[Signature] M. B. M. D. S.

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: S.U. Kolhe

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: Assessment of lethal effects of PHF in laboratory animals.
Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
—	—	—	—
Grand total			

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	—
	Grand Total	4000/-

S.U. Kolhe 

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, *Assesment of lethal effects of PHF in laboratory Animals.*
to be conducted between *1 Jan - 1 March 2022*

I also assure you that the project will be carried out after regular academic schedule
and I will remain present during the project work.

S. U. Kolhe 
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.


(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date : *2456 31/1/2022*

Amount : *4000/-*

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.


D. M. R. Bhalekar 
(Name and signature of Project -Coordinator)

AISSMS
College of Pharmacy
Pune-1
Inward No. 18-71
Date: 05-05-2022

COP/PM/2021-22/153

Date: 9/03/2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society
Shivaji Nagar
Pune- 411005.

AISSMS
Inward No. 10882
Date: 25/3/2022

10882
5/5/22

Sub: Submission of proposal of sponsored research project for approval.

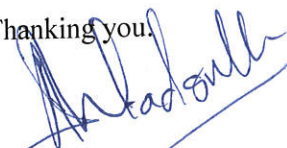
Respected Sir,

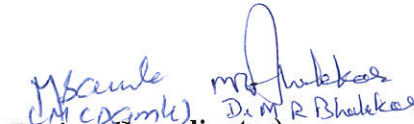
Please find enclosed research proposal titled,

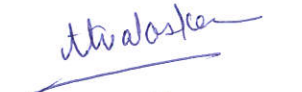
To formulate and Evaluate Caution table
for management of Dengue.

under Category In house Research Project (Format C) for your approval.
You are requested to do the needful at the earliest. Total Project cost Rs. 5000/-

Thanking you.


(Principal)
Principal
AISSMS College of Pharmacy
Pune-1


(Project Co-ordinator)


A. N. Avastkar
(Chief Investigator)

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., **Pune-411001.**

Subject: Permission for self supported short term research project.

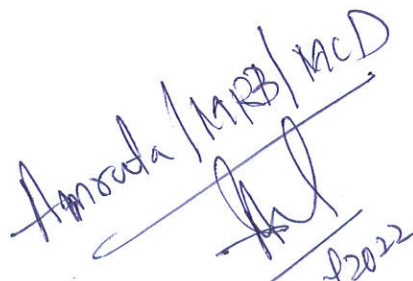
Respected Madam,




I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr.
The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely
(Name and signature of Students)


Ananda / MRB / MCD
06/05/2022

- 1) Vaishnavi Sanjay Nikam - 
- 2) Riche Sanbosh Shingavi - 
- 3) Divyabh Jain - 

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: *A. N. Avalaskar*

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: *To formulate and evaluate Calimex tablets for management of Dengue*
Proposed duration of Project: 03 Months *March 2022 - May 2022*

Ref. No. and date of application through proper channel:

Proposed Expenditure:

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
1.	<i>Alcohol</i>	<i>200 ml</i>	<i>200/-</i>
2.	<i>Methanol</i>	<i>100 ml</i>	<i>200/-</i>
3.	<i>Sucrose</i>	<i>10 g</i>	<i>100/-</i>
4.	<i>Solvents for TLC</i>		<i>500/-</i>
Grand total			<i>1000/-</i>

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	<i>1000/-</i>
	Grand Total	<i>5000/-</i>

Avalaskar

A. N. Avalaskar

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, *To formulate & evaluate Control
Tables in the management of Dengue.*
to be conducted between *15 March 2022 - 31 May 2022.*

I also assure you that the project will be carried out after regular academic schedule
and I will remain present during the project work.

Avalastkar
A. N. Avalastkar
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.



(Hon. Secretary, AISSMS Pune)

Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date :

Amount :

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project –Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2526 Date: 30/05/22

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Nikam Vaishnavi

Sanjay

Class T.Y B. Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	}
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee <u>Inhouse</u>	<u>5000/-</u>
14) <u>GST</u>	<u>900/-</u>
15) <u>UPI ID</u>	}
16) <u>215066936907</u>	
TOTAL Rs.	5900/-

Total in words Rupees Five thousand
nine hundred only

Accept the amount as above 5900/-



Checked By

Nikam Vaishnavi

Deposited By

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **2164**

Date: **10/06/2022**

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from-Mr./Miss **Pratiksha Waghmare**

Class **S.Y. B. Pharm** Year **2021 - 2022**

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee	
14) Inhouse pjt fee	9361-
15)	
16)	
TOTAL Rs.	9361-

Total in words Rupees **Nine Hundred**
and Thirty six only

Accept the amount as above **9361-**



Deposited By

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2166

Date: 08/04/2022

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Pratiksha Waghmare

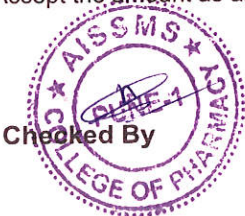
Class S.Y. B.Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee <u>Inhouse PFT</u>	<u>42641-</u>
14) <u>GST @ 18%</u>	<u>9361-</u>
15)	
16)	
TOTAL Rs.	<u>5200</u>

Total in words Rupees Five Thousand

Two Hundred only

Accept the amount as above 5200/-



Checked By

Deposited By

13

AISSMS
College of Pharmacy
Pune-01
Award No. 18 (54)
Date: 25.05.2022
Date: 24 FEB 2022

AISSMS COLLEGE OF PHARMACY
Kennedy Road, Near RTO, Pune

COP/PM/2021-2022/138-1

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

AISSMS
Award No. 10,010
Date: 25/2/2022

10010
5/5/22

Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, "Development and Validation of Spectrophotometric method for Determination of Drugs" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest. Total Project cost Rs. 5,200/-

Thanking you.

Santosh Gandhi
Dr Santosh Gandhi
(Chief Investigator)

M C Damle
Dr M C Damle, Dr M.R Bhalekar
(Project Co-ordinator)

Ashwini Madgulkar
Dr Ashwini Madgulkar
Principal
(Principal)
AISSMS College of Pharmacy
Pune-1

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune - 411001.

Subject: Permission for self supported short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /**Dr. Santosh V. Gandhi**. The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely
(Name and signature of Students)

SUG/MRB/MCD
[Signature]
6/05/2022

- 1) Pratiksha Mahadev Waghmare - *Pratiksha*
- 2) WABLE SAKSHI - *Swable*
- 3) Ishwari Sundar Sapkal - *Ishwari*

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: Ms. Pratiksha Waghmare, Ms. Ishwari Sapkal, Ms. Sakshi Wable
Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: **“Development and Validation of Spectrophotometric method for Determination of Drugs”**


Proposed duration of Project: 03 Months

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	1200/-
	Grand Total	5,200/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
01	Methanol (AR Grade)	2.5 lit * 2	1,200/-
--	--	--	--
Grand total			1,200/-


CDR. S.V. Gaudel
(Name and Signature of Chief Investigator)


(Accountant Sign)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "**Development and Validation of Spectrophotometric method for Determination of Drugs**" to be conducted between **01/03/2022 to 31/05/2022**

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

Beaudu
(Dr. S.V. Gandhi)
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.



(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment: *online payment (Transaction ID - 0451020000882)*

Challan No. with Date: *2165 dated 05/05/2022*

Amount: *5200/-*

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.



AISSMSCOLLEG

Transaction type
Other bank account using IMPS-IFSC

To
04510200000882-AISSMSCOLLEG

From
SUNDAR MACHHINDRA SAPKAL

Amount
₹ 5,200.00

SAVE



Safe Banking: Never share your User ID, password or any other information with anyone on phone, SMS or Email. ICICI Bank does not call/email customers for such information. Beware of fraudsters asking for such details posing as Bank staff.



Transaction Successful

08:40 PM on 10 Jun 2022

Paid to



AISSMS COLLEGE OF PHARMACY
PUNE

₹936

XXXXXXXXXX0882

Bank Of Baroda



Transfer Details



Transaction ID

T2206102040250998351694



Debited from



*****2928

₹936

UTR: 216139026107



Send Again



View History



Share Receipt



Contact PhonePe Support



Powered by

ICICI Bank

INHOUSE PROJECT SUMMARY REPORT 2021-22

Project No. COP/PN/2021-22/138-1


Title: Development and Validation of Spectrophotometric method for Determination of Drugs

PRATIKSHA WAGHAMARE, SAKSHI WABLE, ISHWARI SAPKAL, SANTOSH GANDHI

Chemometrics is the (multivariate) discipline that use mathematical and statistical methods, to design or select optimal measurement procedures and experiments; and to provide maximum chemical information by analysing chemical data. Aim was to develop Chemometric - assisted UV-spectrophotometric method for simultaneous determination of Lamivudine and Zidovudine in pharmaceutical formulation. A simple, accurate and precise spectrophotometric method has been developed for simultaneous determination of Lamivudine and Zidovudine in bulk and in combined pharmaceutical dosage form. The methods developed were PLS and PCR models using methanol as solvent. Regression analysis of beers plot showed good correlation range of 2.5- 15 µg/ml for Lamivudine and 5-30 µg/ml for Zidovudine. Proposed methods have been extensively validated as per ICH guidelines. There was no significant difference between the performance of the proposed methods regarding the mean values and standard deviations. Methods can be used for routine determination of these two drugs in combined dosage form.

Outcomes:

1. Presentation of research work entitled “Development and Validation of Chemometric Method for Determination of Drugs” by Pratiksha Waghmare, Sakshi Wable, Ishwari Sapkal at inhouse poster presentation competition organized by AISSMS College of Pharmacy, Pune.
2. Poster presentation of research work entitled “Development and Validation of Chemometric Method for Determination of Drugs” by Pratiksha Waghmare, Sakshi Wable, Ishwari Sapkal, Santosh Gandhi at National Level Scientific Poster Competition organized by P. Wadhvani College of Pharmacy, Yawatmal on 25th September 2022.


(Dr. Santosh V. Gandhi)
(Chief Investigator)

(Enclosed with Application)

C

13
12

AISSMS
College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **2533** Date: **21/06/22**

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

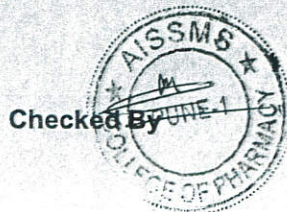
Received from Mr./Miss **Rutuja Londhe**
Pravin

Class **S.Y. B pharmacy** Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	}
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	
13) Other Fee in house project	931/-
14) U.I.R - 217242790314	}
15)	
16)	
TOTAL Rs.	

Total in words Rupees **Nine hundred and**
thirty one

Accept the amount as above **931/-**



Checked By

@Londhe
Deposited By

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2178 Date: 12/15/22

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Rutuja Londhe
Pravin

Class B.Y. B pharmacy Year 2021 - 2022

Particulars	Amount Rs.
1) Merit Fee.....	}
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	
13) Other Fee <u>Inhouse</u> <u>5170/-</u>	
14) <u>Project</u>	
15) <u>VTR-213236709270</u>	
16)	
TOTAL Rs.	5,170/-

Total in words Rupees Five thousand
one hundred & seventy

Accept the amount as above 5170/-



Checked By

R. Londhe
Deposited By

AISSMS COLLEGE OF PHARMACY, PUNE 411001

COP/PM/2021-22/132

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.

AISSMS Date: 8th Feb. 2022
College of Pharmacy
Pune-01
Inward No. 18-31
Date: 05.05.2022

A.I.S.S.M. SOCIETY
PUNE
Inward No. 9414
Date: 11/2/22

Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, "Development of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed product" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

M Damle (Chief Investigator)
M Damle (Project Co-ordinator)
D.M.R. Bhalekar

(Principal)
Principal
AISSMS College of Pharmacy
Pune-1

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

✓ We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Mrinalini C. Damle
The duly filled format has been enclosed for your kind information and approval

✓ We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely
(Name and signature of Students)

1. Londhe Rutuja - Londhe
2. Uttekar Princy - Princy
3. Jayesh Awad - Jayesh

MCD
26/05/2022

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: Rutuja Londhe, Pranav Uttekar, Jayesh Avhad
Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: , " Development of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed product"

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	1170/-
	Grand Total	5170/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	Methanol AR grade	2.5 Lts	670/-
2.	Toluene	500 ml	250/-
3.	Ethyl acetate	500 ml	250/-
Grand total			1170/-

M. Scankle
(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

M. M. Chopane
(Accountant Sign)
(Mr. M-M. Chopane)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, " Development of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed products"

to be conducted between Feb. to Apr. 2022

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

M. Pawle
(Dr M C Damle)
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled " Development of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed products"

A. L.

(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date : 2178 dt 12/5/2022 ₹ 2533 dt 21/06/22

Amount : 5170/- + R. 931 (GST)

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

M. Pawle
(M C Damle)
(Name and signature of Project -Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in store s to be procured by the students.
3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

(Enclosed with Application)

C

AISSMS
College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan NO.: **1257**

Date: **24/03/2022**

A/c. No. 04510200000881

Amount credited on A/C No.: ~~04510200000881~~ in the

BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Siddhi Seyalika.

Class T. Y. B Pharm. Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	4000/-
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) Other Fee	
10) Student Activity Fee.....	

AISSMS
College of Pharmacy
Pune-01
Inward No. 15-24
Date: 05.05.2022

Date: 15.02.2022

COP/PH/2021-22/133 (3)

To,

Hon. Secretary

All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.

Sub: Submission of proposal of Research project for approval.


A.I.S.S.M. SOCIETY
PUNE
Inward No. 9517
Date: 15/2/2022


9517
5/2/22


Respected Sir,

Please find enclosed Research proposal titled, "**Formulation and Evaluation of Herbal Dry Shampoo.**" under Category of In house project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.


Mrs Megha S Shah
Chief Investigator


Dr M C Damle, Dr M.R Bhalekar
Project Co-ordinator


Dr Ashwini Madgulkar
Principal

To,

The Principal,

AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for Self supported short term research Project.

Respected Madam,


We the undersigned would like to undertake a short term self supported Research project under the guidance of **Mrs. Megha S Shah** from Pharmacognosy Department. The duly filled format has been enclosed for your kind information and approval.


We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely

(Name and signature of Students)

1. Apushi Shah - 
2. Namrata Rathod - NRRathod
3. Siddhi Sefalika - Siddhi sefalika
4. Atharva Suryawanshi - ARSuryawanshi

M.S / MRB / MCD

06/05/2022

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: Rathod Namrata, Shah Ayushi, Suryvanshi Atharv

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: "Formulation and Evaluation of Herbal Dry Shampoo."

Proposed duration of Project: 03 Months

Proposed Expenditure:

Sr No.	Parameter	Amount
1	Infrastructure Utility Fees	1000/-
2	Society Processing Fees	1000/-
3	Staff Remuneration	2000/-
4	Total Cost of Actuals (Details are mentioned below)	0/-
	Grand Total	4000/-

*Except water will not use any solvent and chemical from College.


Mrs Megha S Shah
(Name and Signature of Chief Investigator)


(Accountant Sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Formulation and Evaluation of Herbal Dry Shampoo." to be conducted between 01/03/2022 to 01/06/2022


We will ensure that the chemical usage will not exceed the quantity mentioned on page 2. also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.


Mrs Megha S Shah

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. "Formulation and Evaluation of herbal dry shampoo."


(Hon. Secretary, AISSMS Pune)

Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS


Details of Payment:

Challan No. 1257

Amount: 4000

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.


Dr M C Damle, Dr M.R Bhalekar

(Name and signature of Project -Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
3. To the above figure following charges shall be charged extra to the student: a. Rs.1000/-: As infrastructure utility fees. b. Rs. 1000/-: As processing charges to the society. Rs.2000/-: As staff remuneration
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **2206**

Date: **08/3/2022**

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss **Vaibhavi Mulley**

Class **T.Y.B.P.** Year **2022** - **2023**

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee	
14) Transaction ID: 206706184631	
15) Inhouse Project fees 6000/-	
16) Date: 8/3/22	
TOTAL Rs.	6000/-

Total in words Rupees **Six Thousand.**

Accept the amount as above **6000/-**



Deposited By [Signature]

AISSMS
College of Pharmacy
Pune-01
Inward No: 18-95
Date: 05-05-2022

COP/PN/2021-22/133-4

AISSMS COLLEGE OF PHARMACY

Date: 11.02.2022.

To,
Hon. Secretary

All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.

A.I.S.S.M. SOCIETY
PUNE
Inward No. 9518
Date: 15/2/2022


9518
5/2/22


Sub: Submission of proposal of Research project for approval.


Respected Sir,


Please find enclosed Research proposal titled, "Pharmacognostical and analytical study of medicinal plants" under Category of In house project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.


Mrs Megha S. Shah
(Chief Investigator)


Dr M C Damle, Dr M.R Bhalekar
(Project Co-ordinator)


Dr Ashwini Madgulkar
(Principal)


Dr Santosh Gandhi
(Co-investigator)

To,

The Principal,

AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for Self supported short term research Project.

Respected Madam,

We the undersigned would like to undertake a short term self supported Research project under the guidance of Mrs. Megha S Shah from Pharmacognosy Department.


The duly filled format has been enclosed for your kind information and approval.

We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely


(Name and signature of Students)

1. Vaibhavi Mulley - 

2. Sonket Pujari - 

3. Aneel dhumal - 

4. Harshwardhan Patil 

M.S/MRB/MCD

06/05/2022

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: Patil Harshwardhan, Mulley Vaibhavi, Dhumal Anand, Pujari Sanket

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: "Pharmacognostical and analytical study of medicinal plants"

Proposed duration of Project: 03 Months

Proposed Expenditure:

Sr No.	Parameter	Amount
1	Infrastructure Utility Fees	1000/-
2	Society Processing Fees	1000/-
3	Staff Remuneration	2000/-
4	Total Cost of Actuals (Details are mentioned below)	2000/-
	Grand Total	6000/-

DETAILS OF ACTUALS

Sr No.	Item (Consumables)	QTY. Required (min Pack Size)	Approx cost
1	Methanol (AR Grade)	2.5 litre × 2 Unit	1200
2	HPTLC plate	4 Plates (20 × 20 cm)	800
		Grand Total	2000

Megha S Shah
Gandhi

Mrs Megha S Shah **Dr Santosh V Gandhi**
(Name and Signature of Chief and Co-Investigator)


Gandhi

(Signature)
(Accountant Sign)

UNDERTAKING


I undersigned hereby take responsibility of the project titled, "Pharmacognostical and analytical study of medicinal plants" to be conducted between 01/03/2022 to 31/05/2022

We will ensure that the chemical usage will not exceed the quantity mentioned on page 2. also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.


Mrs Megha S Shah 
Dr Santosh V. Gandhi
(Name and signature of Chief & Co-Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. *pharmacognostical and analytical study of medicinal plants*.


(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

Details of Payment:



Challan No. 2206

Date: 8/3/22

Amount: 6000/-

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

 
Dr M C Damle, Dr M.R Bhalekar
(Name and signature of Project -Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
3. To the above figure following charges shall be charged extra to the student: a Rs.1000/-: As infrastructure utility fees. b. Rs.1000/-: As processing charges to the society. Rs.2000/-: As staff remuneration
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

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AISSMS
College of Pharmacy
Pune-1
Inward No. 1864
Date 05.05.2022

COP/PN/2021-22/148-5

Date: 28 Feb/2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

ALL INDIA SOCIETY
PUNE
Inward No. 1024
Date: 4/3/2022

1024
5/5/22

Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, " **Herbal Antispasmodic gel for relief of Menstrual cramps.** " under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest. Total Project cost Rs. 7000/-

Thanking you.

[Signature]
(Principal)

[Signature]
(Project Co-ordinator)

[Signature]
(Chief Investigator)
(Dr. R.N. Mirojkar)

Principal
AISSMS College of Pharmacy
Pune-1

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

I/ We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. The duly filled format has been enclosed for your kind information and approval

I/ We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

[Signature]
RNM / MRB / MMD
05/05/2022

Yours sincerely
(Name and signature of Students)

Grija Kulkarni *[Signature]*
Sakshi Bagal *[Signature]*
Jyoti Kupate *[Signature]*
Tanmaya Vyas *[Signature]*
Nirmala Rajpurshet *[Signature]*

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant:

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project:

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
1.	Cinnamon. oil	50ml	₹ 300
2.	Pluronic-F127	250g	₹ 500
3.	Hydroxypropyl methylcellulose K4M	250g	₹ 750
4.	Methyl Paraben	250g	₹ 400
5.	Propyl Paraben	250g	₹ 450
6.	Vitamin E (Antioxidant)	16 capsules	₹ 200
7.	Container	6	₹ 400
Grand total			3000/-

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	3000/-
	Grand Total	7000/- + 1260 (GST) = 8260


 (Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, *Herbal Antispasmodic gel for relief of menstrual cramps*,
to be conducted between *March 22 - May 22*

I also assure you that the project will be carried out after regular academic schedule
and I will remain present during the project work.

Dr. Reshma N. Kingkar
(Name and signature of Chief Investigator) *Reshma*

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.

A. S. ...
(Hon. Secretary, AISSMS Pune)

All India Smt. Shivaji Memorial Society,
Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

Details of Payment : *UPI Transaction Id :- 213814183792 / 220276206273*

Challan No. with Date : *2182 Date: 18/05/2022 / 2629 217/2022*

Amount : *7000/- + 1260 = 8260/-*

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

M. S. ...
(Name and signature of Project -Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2629

Date: 21/10/2022

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

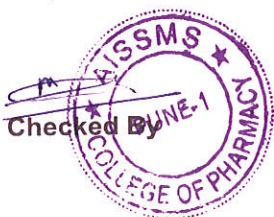
Received from Mr./Miss Sakshi Subhash Bagal

Class Final Year B.Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee <u>Project fee</u>	<u>₹1260/-</u>
14)	
15) <u>UPI Id</u> <u>220276206273</u>	
16)	
TOTAL Rs.	₹1260/-

Total in words Rupees One thousand two
hundred & sixty

Accept the amount as above ₹1260/-



T.R. Vyas
Deposited By



A

To AISSMS COLLEGE OF PHARMACY, PUNE

₹1,260.00

In house Project Gst payment

✔ Completed • 21 July 2022 at 11:38



Bank of India
XXXXXXXXXXXX7167



UPI transaction ID
220276206273

To
.... 0882

From: SAKSHI SUBHASH BAGAL (Bank of India)
sakshi.bagal04@okaxis

Google Transaction ID
CICAgJCwsPbVfw

POWERED BY UPI



(For Candidates)

D

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2182 Date: 18/5/22

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Lakshi Subhash

Bagal

Class F. Y. B. Pharm Year 2021 - 2022

Particulars	Amount Rs.	
1) Interim Fee.....	}	
2) Application Form Fees.....		
3) Development Fees.....		
4) Tuition Fees.....		
5) Misc. & University Charges.....		
6) Caution Money Deposit.....		
7) Journal Fees.....		
8) University / Board Eligibility Fee.....		
9) EVS Fee.....		
10) Student Activity Fee.....		
11) Insurance Fee.....		
12) Eligibility Fee		
13) Other Fee <u>Project fee</u>		<u>5932/-</u>
14) <u>GST</u>		<u>1068/-</u>
15) <u>UPI ID</u>		<u>1</u>
16) <u>213814183792</u>		
TOTAL Rs.	<u>7000/-</u>	

Total in words Rupees seven thousand only

Accept the amount as above 7000/-



Checked By

Lakshi Bagal

Deposited By

A.G. Patil Institute of Technology

Solapur, Maharashtra.



CERTIFICATE OF PARTICIPATION

This certificate declares that

Tanmaya Rajesh Vyas

has participated as a Finalist in 'IDEATHON 2021'

Prof. S. N. Upadhe
Coordinator, IDEATHON 21

Dr. S. B. Gadwal
CEO, MSME Incubation Center

Dr. V. V. Potdar
Vice Principal, AGPIT

Dr. S. A. Patil
Principal, AGPIT

Made for free with Certify'em

College of Pharmacy
Pune-01
Inward No. 1869
Date: 05.05.2022

(21)

COP/PN/2021-22/143-4

ALL INDIA SOCIETY
PUNE
Inward No. 10210
Date: 4/3/2022

MAR 2022

10210
5/5/22

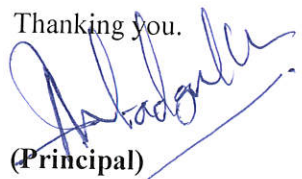
To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.
Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, "Formulation of fenofibrate cocrystals for improved dissolution".

under Category In house Research Project (Format C) for your approval.
You are requested to do the needful at the earliest.

Thanking you.



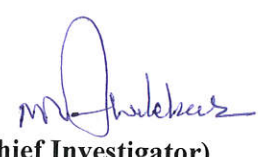
(Principal)

Principal
AISSMS College of Pharmacy
Pune-1



(Project Co-ordinator)

Dr M C Damle Dr M R Bhalekar



(Chief Investigator)

Dr M R Bhalekar

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Mangesh Bhalekar
The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

MRB / MRC

26/05/2022

Yours sincerely
(Name and signature of Students)

Vidhi Anil Dagade Dagade
Vishwajeet Lad Vladis
Sarvesh Chourange GSC
Neha Bamane.

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: Dr Mangesh Bhalekar

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: Formulation of fenofibrate cocrystals for improved dissolution.

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	700 /-
	Grand Total	4700/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	Cinnamic acid	500 gm	375=00
2	Ascorbic acid	500 ml	225=00
Grand total			700=00


(Name and Signature of Chief Investigator)


Mr M M Chopane

* Cost of consumables shall be calculated using standard catalogue.

Accountant

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Formulation of fenofibrate cocrystals for improved dissolution

to be conducted between " 15/3/2022 to 15/6/2022"

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)

DR Mangesh Bhalekar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. Formulation of fenofibrate cocrystals for improved dissolution

(Hon. Secretary, AISSMS Pune)

Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date :

Amount :

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
5. The actual experimental work shall be started only after approval from the society.
6. The student investigator/s shall be appointed by the Chief Investigator.
7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.:

1908

Date: 12/17/22

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Vishwaji Lad

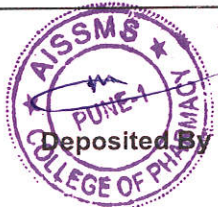
Class T.Y. B. Pharm Year 2022 - 2023

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	
13) Other Fee <u>GST on Inhouse project</u>	<u>846=00</u>
14)	
15)	
16)	
TOTAL Rs.	<u>846=00</u>

Total in words Rupees Eight Hundred & Forty
Six only

Accept the amount as above

M. Haleem
Checked By



(For Candidates)

D

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.:

1908

Date: 12/17/22

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Vishwaji Lad

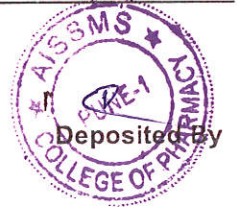
Class T.Y. B.Ph Year 2022 - 2023

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	
13) Other Fee <u>GST on Inhouse project</u>	<u>846=00</u>
14)	
15)	
16)	
TOTAL Rs.	<u>846=00</u>

Total in words Rupees Eight Hundred & Forty
Six only

Accept the amount as above

M. Haleem
Checked By



(For Bank)

A

AISSMS

College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2538 Date: 07/06/2022

Amount credited on A/C No.: **0451020000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Vishwajit Shantilal
Lad

Class T.Y B.Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	}
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	
13) Other Fee <u>Inhouse Project</u> <u>4700/-</u>	
14) <u>UTR: 215883043920</u>	
15) <u>07.06.2022</u>	
16)	
TOTAL Rs. <u>4700/-</u>	

Total in words Rupees Four thousand seven
hundred rupees only

Accept the amount as above 4700/-

Checked By

Deposited By

(For Office)

B

AISSMS

College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2538 Date: 07/06/2022

Amount credited on A/C No.: **0451020000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Vishwajit Shantilal
Lad

Class T.Y B.Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	}
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee.....	
13) Other Fee <u>Inhouse Project</u> <u>4700/-</u>	
14) <u>UTR: 215883043920</u>	
15) <u>07.06.2022</u>	
16)	
TOTAL Rs. <u>4700/-</u>	

Total in words Rupees Four thousand seven
hundred rupees only

Accept the amount as above 4700/-

Checked By

Deposited By



Transaction Successful

01:22 pm on 07 Jun 2022

Paid to



AISSMS College Of Pharmacy

₹4,700

XXXXXXXXXX0882

Bank Of Baroda



Transfer Details



Transaction ID

T2206071321529420979923



Debited from

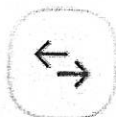
paytm 91*****87

₹4,700

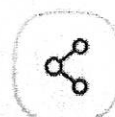
UTR: 215883043920



Send Again



View History



Share Receipt



Contact PhonePe Support



Powered by



(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: **2624** Date: 17/07/2022

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss ISHA GHADGE

Class Third Year Year 2021 - 2022
B. Pharm.

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee <u>Inhouse</u>	<u>7201-</u>
14) <u>Project</u>	
15) <u>VPI T. NO.:-</u>	
16) <u>219837543785</u>	
<u>17.07.2022</u>	
TOTAL Rs.	7201-

Total in words Rupees Seven Hundred
Twenty Rupees only -

Accept the amount as above 7201-

Checked By



Deposited By

Dobh

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No. 2179 ²¹⁷⁸⁸ Date: 13/05/22

Amount credited on A/C No.: **04510200000882** in the
BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Isha Ahadje

Class Third year, B-pharm Year 2021 - 2022

Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee	
14) <u>Project fees</u>	<u>4000/-</u>
15) <u>UPI transaction ID</u>	
16) <u>213391211250</u>	
TOTAL Rs.	4000/-

Total in words Rupees four thousand
rupees only.

Accept the amount as above 4,000/-

Checked By



Deposited By

Isha Ahadje

AISSMS
College of Pharmacy
Pune-01
Inward No. 18-65
Date: 05/05/2022



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,
2F,12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade

Ref. No. COP/PM/2021-22/146-147

Date: 10.03.2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.
Sub: Submission of proposal of sponsored research project for approval.

AISSMS
Inward No. 10423
Date: 11/3/2022

10423
5/5/22

Respected Sir,

Please find enclosed research proposal titled, **“Solid state studies of an active pharmaceutical ingredient”** under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

[Signature]
(Principal)

[Signature]
(Project Co-ordinator)
Dr. M. R. Bhalekar

[Signature]
(Chief Investigator)
[Dr. Monica RP Rao]

AISSMS College of Pharmacy

To, Pane-1
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

We the undersigned would like to undertake a short term self supported research project under the guidance of **Dr. Monica RP Rao**. The duly filled format has been enclosed for your kind information and approval

We will be obliged, if you consider our request and permit us for the same.

Thanking you.

Yours sincerely

Isha Ghadge
[Signature]

Saloni Joshi
[Signature]

Gargi Nikam
[Signature]

Saurav Kulkarni
[Signature]

MARPR / MRB/MCD
[Signature]
06/03/2022

**PROTOCOL FOR INHOUSE STUDENT'S
RESEARCH PROJECT (Format-C)**

Name of Applicant: **Dr. Monica RP Rao**

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: **“Solid state studies of an active pharmaceutical ingredient”**

Proposed duration of Project: **04 Months**

Ref. No. and date of application through proper channel: & 10.03.21

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	*
	Grand Total	4000/-

* Required chemicals will be obtained as a gift sample.

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1	API will be obtained as a gift sample.	Gift sample	-
Grand total			NA

Dr. Monica RP Rao



(Name and Signature of Chief Investigator)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Solid state studies of an active pharmaceutical ingredient" to be conducted between "~~April - July 2022~~" May - Aug 2022.

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)

Dr. Monica RP Rao

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. Solid state studies of an active pharmaceutical ingredient

(Hon. Secretary, AISSMS Pune)

Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS


Details of Payment:

Challan No. with Date: 2179 - 13.05.22

Amount: Rs 4000/-

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

 (Dr. MRP Rao)

(Name and signature of Project -Coordinator)



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH



Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,
2F, 12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade

IN HOUSE PROJECT REPORT

Title: "Solid state studies of an active pharmaceutical ingredient"

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SeDeM analysis of an antiviral drug was performed to assess its compressibility. Twelve micromeritic properties of the drug were evaluated and radar diagram was plotted to obtain a pictorial representation of the micromeritic properties. Heckel plots and Kawakita plots were also constructed to compare the results with SeDeM results. The drug was found to have poor flow properties which could affect the compressibility of the drug.

Dr. Monica RP Rao

[Project Guide]