



APPROVAL PROCESS 2021-22

APPLICATION REPORT

INSTITUTION DETAILS

INSTITUTION DETAILS: BASIC DETAILS

Current Application Number	1-9319925429	Application Type	Extension-Expansion-Closure
Current Status	Submitted	Sub Status	Payment Received
Permanent Institution ID	1-4623812701	Academic Year	2021-2022
Approval Status of Application	Data Not Available	Application Opened Date	09/03/2021
Application Submitted Date	06/04/2021	Attend Scrutiny Committee Date	Data Not Available
Appeal Requested Date	Data Not Available	Application Reopened Date	06/04/2021
Overall Deficiency	No		

INSTITUTION DETAILS: ADDITIONAL INFORMATION

Name of Institution	Mit College Of Pharmacy	Address of Institution	Mit Campus, Ram Ganga Vihar Phase-II, Moradabad
State/ UT	Uttar Pradesh	District	Moradabad
Town/ City/ Village	Moradabad	AICTE Region	Northern
PIN	244001	Women's Institution	No
Institution Type	Private-Self Financing	Any Self- Financed Course	Yes
Percentage Grant Received from Government	0	Are you an Institution for PWD Students	No
Whether Institution is NAAC Accredited ?	N	NAAC CGPA	Data Not Available
Letter Grade	Data Not Available	NAAC Status	Data Not Available
Minority Institution	No	Type of Minority	NA
Minority Name, if Linguistic	NA	Name of the Minority	NA
Minority Certificate Issued Date	Data Not Available	Minority Certificate Valid Till	Data Not Available
Approval Year of First Course	2019	Mandatory Disclosure Link	http://www.mitcop.com/wp-content/uploads/2021/03/Mandatory-Disclosure_AICTE.pdf
AISHE Prefix	C	AISHE Numeric Code	62432
AISHE Code	C-62432	Whether Institution is Graded Autonomy ?	Data Not Available
NBA Accreditation Points	Data Not Available	NBA Points Valid Till	Data Not Available
Whether your University has been recognized as an Institute of Eminence by MHRD?	Data Not Available	PCI Id	PCI-3072
COA Id	Data Not Available		

Date of Signature(dd/mm/yyyy)

Seal of Institution

Name & Signature of Director/Principal

HOI & Faculty Members

PRINCIPAL / DIRECTOR

PERSONAL DETAILS

Surname/Family name	Panda	First Name	Subhranshu
Father's Name	Brundaban Panda	Mother's Name	Chapala Kumari Panda
Date of Birth	15/01/1976	Mobile Number	9998516901
STD code	591	Land Phone Number	2452413
Email	drsubhran@gmail.com	PAN	ALPPP8092D

EDUCATIONAL DETAILS

Doctorate Degree	Yes	Master's Degree	M. PHARM
Bachelor's Degree	B. PHARM	Other Qualifications	LLB
International Certification (If Any)	NO	Field of Specialization	PHARMACEUTICS

DETAILS RELATED TO PROFESSION

Date of joining the Institution	22/07/2019	Appointment Type	Regular
Exact Designation	Director		

WORK EXPERIENCE DETAILS

Teaching Experience (Years)	20	Research Experience (Years)	3
Industry Experience (Years)	0		

OTHER DETAILS

Research Projects Guided - UG	45	Research Projects Guided - PG	40
Research Projects Guided - PhD	3	Number of Books Published	1
Papers Published - National	25	Papers Published - International	20

FACULTY NORMS AND PAY SCALE

Are all Approved teaching Faculty Members being paid as per present AICTE pay scale?	Yes
Are all the teaching Faculty Members, as per AICTE/UGC Norms?	No
List of Faculty Members and data uploaded on the institution's web portal.	Yes

FACULTY MEMBERS LIST

Details available as on AICTE Web Portal

Sr. No.	Faculty ID	Programme	Course	Faculty Type	FT/PT	First Name	Surname	Exact Designation	Date of Joining the Institution	Appointment Type	Doctorate	Master's Degree	Bachelor 's Degree	Other Qualifications	Aadhar Card	PAN Card	Total Gross Salary for the Last Financial Year	Pay Scale
1	1-7416750682	PHARMACY	PHARMACEUTICS		FT	SUBHRANSHU	PANDA	PRINCIPAL/DIRECTOR	22/07/2019	Regular	Yes					ALPPP8092D		
2	1-7417177698	PHARMACY	PHARMACEUTICAL CHEMISTRY		FT	HARI	SINGH	ASST PROFESSOR	15/07/2019	Regular	No					CWZPS3721F		

20	1-9423784751	PHARMACY	PHARMACEUTICAL BIOTECHNOLOGY	ROHIT	GAUTAM	LECTURER	01/01/2021	Regular	No										
19	1-9312179891	PHARMACY	PHARMACEUTICAL CHEMISTRY	ABHISHEK	KASHYAP	ASST PROFESSOR	14/12/2020	Regular	No										
18	1-9311142451	PHARMACY	PHARMACEUTICAL CHEMISTRY	VINITA	PANDEY	LECTURER	23/11/2020	Regular	No										
17	1-9311142221	PHARMACY	PHARMACEUTICS	NEHA	GUPTA	ASST PROFESSOR	23/11/2020	Regular	No										

ODL FACULTY DETAILS

Data not entered by Institution

OL FACULTY DETAILS

Data not entered by Institution

DECLARATION

BY THE AUTHORIZED SIGNATORY OF THE INSTITUTION DEPARTMENT

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

- a) I have carefully gone through the AICTE Regulations 2021, published in the Gazette of India Extraordinary Part III, Section- 4 dated 04th February, 2021, also all provisions mentioned in the Approval Process Handbook 2021-22.
- b) I am fully aware of the data uploaded by me in respect of my Institution on the web portal.
- c) I am aware that there is no provision for correction of data, alteration of data, subsequent editing and appeal etc. for the online application once submitted on the web portal.
- d) I am also aware that application for seeking Extension of Approval(EOA), Increase/Reduction of intake, Addition of new courses, Change of site, Closure of course, Supernumerary Seats under FN/Gulf quota Approval status/OCI, NRI, Change of name, and Conversion of women Institution into Co-ed Institution and vice versa (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Handbook 2021-22.
- e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my Institution on the portal.
- f) I am also aware that University is eligible for grant of Extension of Approval to the Existing Institution, Extended EoA(if Applicable as per APH 2021-22),only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Handbook 2021-22.

Signature of Authorized Signatory

Name :