# All India Council for Technical Education

**(An Autonomous Organization, Under Ministry of HRD, Govt. of India)**

Nelson Mandela Marg,Vasant Kunj, New Delhi-110067  Website: https://www.aicte-india.org

## APPROVAL PROCESS 2019-20

## Application Deficiency Report

**DEFICIENCY REPORT AS PER CURRENT INTAKE (Applicable for Existing Institutes only)**

| | | | |
|---|---|---|---|
| **Regional Office** | Northern | | |
| **Application Id** | 1-4529440361 | **Permanent Id** | |
| **Name of the Institute** | JAHANGIRABAD INSTITUTE OF TECHNOLOGY FACULTY OF PHARMACY | **Address** | JAHANGIRABAD TEHSIL NAWABGANJ DISTT BARABANKI LUCKNOW UTTAR PRADESH |
| **City/Village** | JAHANGIRABAD | **District** | BARABANKI |
| **State** | Uttar Pradesh | **Pin** | 225203 |

**Overall Deficiency of Institute:**     **Yes**

| Designation | Name | Appointment Type | Qualification | PhD | Qualified as per AICTE norms (YES/NO) |
|---|---|---|---|---|---|
| Principal/Director | SUPRIYA MAITY | Regular | B.PHARMA, M.PHARMA, | Yes | YES |

### Other Details

| Sr. No. | Details of Requirement | Status provided by the Institute | Deficiency |
|---|---|---|---|
| 1 | List of faculty and data uploaded on the Institute web portal | Yes | No |
| 2 | Are all approved teaching faculty being paid as per VI pay commission? | Yes | No |
| 3 | Whether Institute is operating from Permanent Site/ Temporary Site? | Permanent Site | No |
| 4 | Fees to be charged, Reservation policy, Admission policy and Document retention policy are uploaded in Institute's Website? | Yes | No |
| 5 | Courses/Approved Intake displayed at the entrance of the Institute? | No | **Yes** |

### Anti-Ragging Related  Deficiency Status

| Sr. No. | Details of Requirement | Status provided by the Institute | Deficiency |
|---|---|---|---|
| 1 | Constitution of Anti-Ragging Committee | No | **Yes** |
| 2 | Constitution of Anti-Ragging Squad | No | **Yes** |
| 3 | Undertaking obtained from all Students | No | **Yes** |
| 4 | Appointment of Counselors | No | **Yes** |
| 5 | Undertaking obtained from parents of all the students | No | **Yes** |
| 6 | Undertaking obtained from students staying in Hostel | No | **Yes** |
| 7 | Undertaking obtained from parents of students staying in Hostel | No | **Yes** |

### Ombudsman Related Deficiency Status

| Sr. No. | Details of Requirement | Status provided by the Institute | Deficiency |
|---|---|---|---|
| 1 | Grievance Committee | No | **Yes** |

### Total Number of Students in Institute

| | | |
|---|---|---|
| (i) | No. of  Students UG | 0 |
| (ii) | No. of  Students PG | 0 |
| (iii) | No. of  Students DIPLOMA | 0 |
| | Total Students (CI) (UG+PG+DIPLOMA) | 0 |

### Faculty

#### Institute Level Faculty

| Type | Actual No. | Required No. as per CI | Deficiency |
|---|---|---|---|
| Total Faculty(UG+PG+Diploma) | 0 | 0 | No |
| TOTAL | 0.00 | 0.00 | |

### Administrative Area

| Type | Actual Room Area (Sq.m.) | Expected Room Area (Sq.m.) | Deficiency |
|---|---|---|---|
| Principal / Director Office | 35 | 30 | No |
| Board Room | 57 | 20 | No |
| Office All Inclusive | 163 | 150 | No |
| Central Store | 30 | 30 | No |
| Maintenance | 13 | 10 | No |

Date of Signature(dd/mm/yyyy)                    Seal of Institute                    Name & Signature of Director/Principal

**Application Status:**     **Submitted**
**Application Sub-Status: Scrutiny Scheduled**

Report Generated on :-20/02/2019

| | | | |
|---|---|---|---|
| Security | 10 | 10 | No |
| Housekeeping | 26 | 10 | No |
| Pantry for Staff/Faculty | 34 | 10 | No |
| Exam Control Office | 54 | 30 | No |
| TOTAL | 422.00 | 300.00 | |

### Amenities Area

| Type | Actual Room Area (Sq. m.) | Expected Room Area (Sq. m.) | Deficiency |
|---|---|---|---|
| Boys Common Room | 84.82 | 75 | No |
| Girls Common Room | 75.57 | 75 | No |
| Cafeteria | 171.31 | 150 | No |
| Stationery Store | 18.07 | 10 | No |
| First aid cum Sick Room | 25.14 | 10 | No |
| TOTAL | 374.91 | 320.00 | |

### Computational Facilities

| Type | Available | Required | Deficiency |
|---|---|---|---|
| Internet Bandwidth | 32 | 32 | No |
| Printers | 3 | 1 | No |
| A1 size Color Printers | 0 | 0 | No |
| Number of PCs in Language lab | 20 | 20 | No |
| Legal Application S/W | 10 | 10 | No |
| Legal System S/W | 1 | 1 | No |
| PCs to Student ratio | 20 | 20 | No |
| TOTAL | 86.00 | 84.00 | |

### Library Facilities

| Type | Available | Required | Deficiency |
|---|---|---|---|
| Volumes | 1500 | 1250 | No |
| Titles | 500 | 150 | No |
| Journals | 9 | 9 | No |
| Library Management Software | 1 | 1 | No |
| Reading Room Seating Capacity | 24 | 24 | No |
| MultiMediaPC | 10 | 10 | No |
| TOTAL | 2044.00 | 1444.00 | |

### Instructional Area-Common Facilities

| Type | Available | Required | Deficiency |
|---|---|---|---|
| Computer Center inclusive of Language Laboratory | 142 | 75 | No |
| Library & Reading Room | 240 | 150 | No |
| TOTAL | 382.00 | 225.00 | |

### Land Area Details

| Type | Available | Required | Deficiency |
|---|---|---|---|
| Total Area of Land | 4 | 2 | No |
| Maximum number of Pieces | 1 | 1 | No |
| Minimum per Piece of Area | 4 | 2 | No |
| TOTAL | 9.00 | 5.00 | |

### PHARMACY / New Programme

| Type | Level | Actual Room Area (Sqm.) | Expected Room Area (Sqm.) | Deficiency |
|---|---|---|---|---|
| Class Room-Tutorial Room-UG | UNDER GRADUATE | 273 | 165 | No |
| Classroom - PG | POST GRADUATE | 0 | 0 | No |
| Laboratories-All | UG/PG | 351 | 300 | No |
| Machine Room | UG/PG | 103 | 75 | No |
| Seminar Hall | UG/PG | 175 | 132 | No |
| TOTAL | | 902.00 | 672.00 | |

### PHARMACY-Diploma / New Programme

Date of Signature(dd/mm/yyyy)      Seal of Institute      Name & Signature of Director/Principal

# Application Deficiency Report

**Application Status:** **Submitted**
**Application Sub-Status: Scrutiny Scheduled**

| Type | Level | Actual Room Area (Sqm.) | Expected Room Area (Sqm.) | Deficiency |
|---|---|---|---|---|
| ClassRooms | DIPLOMA/POST DIPLOMA | 68 | 66 | No |
| Tutorial Room | DIPLOMA/POST DIPLOMA | 39 | 33 | No |
| Laboratories | DIPLOMA/POST DIPLOMA | 317 | 225 | No |
| Machine Room | DIPLOMA/POST DIPLOMA | 138 | 75 | No |
| TOTAL | | 562.00 | 399.00 | |

## Other Facilities

| Sr. No. | Type | Availability | Deficiency |
|---|---|---|---|
| 1 | All Weather Approach (Motorised Road) | Yes | No |
| 2 | Barrier free Environment | Yes | No |
| 3 | Electric Supply | Yes | No |
| 4 | General Insurance | Yes | No |
| 5 | Institution Web Site | Yes | No |
| 6 | Standalone Language Laboratory | Yes | No |
| 7 | Medical & Counseling | Yes | No |
| 8 | Notice Boards | Yes | No |
| 9 | Potable Water Supply | Yes | No |
| 10 | Safety Provisions | Yes | No |
| 11 | Sewage Disposal System | Yes | No |
| 12 | Telephone & FAX | Yes | No |
| 13 | Vehicle Parking | Yes | No |
| 14 | First Aid | Yes | No |
| 15 | Appointment of Student Counsellor | Yes | No |
| 16 | Establishment of Anti Ragging committee | Yes | No |
| 17 | Establishment of committee for SC/ST | Yes | No |
| 18 | Establishment of Internal Complaint Committee(ICC) As per section 4 of SexualHarassment of Women at Workplace (Prevention, Prohibition and Redressal) Act,2013 | No | Yes |
| 19 | Establishment of Grievance Redressal Committee in the Institute and Appointment of OMBUDSMAN by the University | Yes | No |
| 20 | Digital Payment for all Financial Transactions as per MHRD Directives | Yes | No |
| 21 | Compliance of the National Academic Depository(NAD) as per MHRD Directives | No | Yes |
| 22 | Display Board within the premises as well as in the Website of the Institution Indicating the Feedback Facility of Students and Faculty available in the AICTE Web Portal | Yes | No |
| 23 | Implementing Food Safety and Standard Act,2006 in the Institution | Yes | No |
| 24 | Copies of AICTE Approvals (LOA and EOA of subsequent years)obtained since Inception of Institution till date shall be placed in the Website of the Institution | No | Yes |
| 25 | Provision to watch MOOCS Courses through Swayam | No | Yes |
| 26 | Implementation ofUnnat Bharat Abhiyan | Yes | No |
| 27 | Institution-Industry Cell | No | Yes |
| 28 | Group Insurance for Employees | Yes | No |
| 29 | Insurance for Students | Yes | No |
| 30 | Applied membership-National Digital Library | Yes | No |
| 31 | Implementation of Security Measures | No | Yes |
| 32 | Online Grievance Rederssal Mechanism | Yes | No |
| 33 | Internal Quality Assurance Cell | Yes | No |
| 34 | Fire and Safety Certificate | Yes | No |
| 35 | Display of information submitted to AICTE (including the accreditation status and Board of Governors) along with mandatory disclosures in the Web site of the Institution | Yes | No |
| 36 | Sports facilities | No | Yes |
| 37 | Group Accident Policy to be provided for the employees | Yes | No |

Date of Signature(dd/mm/yyyy)                     Seal of Institute                     Name & Signature of Director/Principal

# Application Deficiency Report

| 38 | Efforts to encourage Final Year students to appear GATE examination | No | Yes |
|----|---------------------------------------------------------------------|----|----|
| 39 | Auditorium | No | Yes |
| 40 | Display of Course(s) and "Approved Intake" in the Institution at the entrance of the Institution. Course(s) taken through duly recognized MOOCs shall be used as Supplementary Course(s) | No | Yes |
| 41 | Intellectual Property Right Cell | No | Yes |
| 42 | Implementation of mandatory Internship policy for students | No | Yes |
| 43 | Implementation of teacher training policy | No | Yes |
| 44 | Implementation of examination reforms | No | Yes |
| 45 | Implementation of Startup Policy | No | Yes |
| 46 | Innovation Cell/Club | No | Yes |
| 47 | Media Cell | No | Yes |
| 48 | Training and Placement Cell with budget allocation proof of 1% of the total Institutional budget | No | Yes |
| 49 | Participation in the National Innovation Ranking | No | Yes |
| 50 | Whether your Institution has introduced online Aadhar linked Biometric attendance for regular faculty members? | No | Yes |
| 51 | Backup Electric Supply | Yes | No |

**Note**

XX- No Rooms Available

DNA- Data Not Available / Insufficient Data

Blank Field-Data Not Entered

* Laboratories required and Actual Number includes Total Number of Laboratories, Research Laboratories, and Additional WS/Labs for UG and PG courses, as applicable

^ Actual Number of Tutorial Rooms for Under Graduate includes the Number of Tutorial Rooms Available for PG, if applicable

** Actual Number of Guest Rooms for Under Graduate includes the Actual Number of Guest Rooms Available for PG, if applicable

*** Actual Number of Kitchen for Under Graduate includes the Actual Number of Kitchen Available for PG, if applicable

***Note :- All the Dates in the Report are in (dd/mm/yyyy) format

Date of Signature(dd/mm/yyyy)                    Seal of Institute                    Name & Signature of Director/Principal

# Application Deficiency Report

### DECLARATION
### BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTE/UNIVERSITY DEPARTMENT

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

**a) I have carefully gone through the AICTE Regulations Notification dated on 30th November, 2016, published in the Gazette of India - Extraordinary Part III, Section- 4 and its amendment 05th December 2017 also the various provisions mentioned in the Approval Process Hand Book 2019-20.**

**b) I am fully aware of the data uploaded by me in respect of my institute 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 uploaded 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 PIO/FN/Gulf quota Approval status/OCI, NRI, Change of name, and Conversion of women institute into  Co-ed institute and vice versa (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2019-20.**

**e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my institute on the portal.**

**f) I am also aware that Institute is eligible for grant of**
**Approval of New Institutes/University Department/Constituent College,**
**only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2019-20.**


**Signature of Principal/Director/Registrar**

**Name :**

**Seal/Stamp of the Institute/University Department**

## APPROVAL PROCESS 2019-20

## Application Report Part-1

**1.** **Guidelines on submission of documents along with print copy of application/s for New Institute/University Department (Refer annexure 16)**

**Ensure that all copies are in A4 size only (Land documents/building drawing may be up to A0 sizes). Also, ensure that all copies are attested.**

Refer **Documents for Approval Process 2019-20 (Annexure 16 & 17)** uploaded on AICTE Website.

Please number all copies of documents as given below:

| Your Regional office code | Your Application Id | Annexure Number | Sr. No. as in Annexure 16 | Page Number (3 digits) |
|---|---|---|---|---|

E.g. consider numbering an affidavit (comprising of 2 pages), which is sr. no. 2 in annexure 16,

| | | | | |
|---|---|---|---|---|
| WRO | 1-11234567 | 16.1 | 02 | 001 |
| WRO | 1-11234567 | 16.1 | 02 | 002 |

The number so generated  WRO**1-1123456716.10**02**001** should be written on top of each page with bold pen as shown below

| W | R | O | 1 | - | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 1 | 6 | . | 1 | 0 | 0 | 2 | 0 | 0 | 1 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

*Note: Please do not bind or staple, as all pages are going to be scanned.  All pages should be knotted on the left hand top corner. This set of knotted documents should be submitted.*

Provide index page on top of set of documents as follows,

| Region - WRO | | Application ID : 1-11234567 | |
|---|---|---|---|
| **Annexure No.** | **Sr No.as in Annexure 17 (2 digits)of documents which are being submitted now** | **Page No. (3 digits)** | |
| | | **From** | **To** |
| 16.10 | 02 | 001 | 002 |
| 16.10 | 03 | 001 | 005 |

**2.** **Guidelines on submission of documents along with print copy of application/s for Approvals of Existing Institutes (Refer annexure 17)**

- Extension of Approval to the existing Institutions/ Continuation of approval after a break in the preceding Academic Year/ Restoration.
- Extended EoA
- Increase in Intake/ Additional Course(s)
- Addition of Integrated/ Dual Degree Course
- To Start Diploma in Degree Pharmacy Institutions and vice-versa
- Conversion of Management Institutions running PGDM Course into MBA Course
- Conversion of Second Shift Course(s) into First Shift Course(s)
- Introduction of Fellowship Programme in Management
- Introduction of Supernumerary Seats for Foreign Nationals/ Overseas Citizen of India (OCI)/ Persons of Indian Origin (PIO)/ Children of Indian Workers in Gulf Countries
- Introduction of seats for Non Resident Indian(s)
- Change in name of the Course(s)/ Reduction in Intake/ Closure of Programme(s) and/ or Course(s)
- Change in name of the Institution or Affiliating University/Board

Please number all copies of documents as given below:

| Your Regional office code | Your Application Id | Annexure No. | Sr No. as in Annexure 17 | Page No. (3 digits) |
|---|---|---|---|---|

E.g. consider numbering an affidavit (comprising of 2 pages), which is sr. no. 2 in annexure 16,

| | | | | |
|---|---|---|---|---|
| WRO | 1-11234567 | 17.10 | 02 | 001 |
| WRO | 1-11234567 | 17.10 | 02 | 002 |

The number so generated  WRO**1-1123456717.10**02**001** should be written on top of each page with bold pen as shown below

| W | R | O | 1 | - | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 1 | 7 | . | 1 | 0 | 0 | 2 | 0 | 0 | 1 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

Please do not bind or staple, as all pages are going to be scanned.  All pages should be knotted on the left hand top corner. This set of knotted documents should be submitted.

Date of Signature(dd/mm/yyyy)                    Seal of Institute                    Name & Signature of Director/Principal

**Application Status:**      **Submitted**
**Application Sub-Status: Scrutiny Scheduled**

Provide index page on top of set of documents as follows,

| Region – WRO | | Application ID : 1-11234567 | |
|---|---|---|---|
| Annexure No. | Sr. No. as in annexure 18 (2 digits)of documents which are being submitted now | Page No.  (3 digits) | |
| | | From | To |
| 17.10 | 02 | 001 | 002 |
| 17.10 | 03 | 001 | 005 |

**Regional Office codes**

| Eastern | ERO | | North-West | NWR | | South Central | SCR | | South- West | SWR |
|---|---|---|---|---|---|---|---|---|---|---|
| Northern | NRO | | Central | CRO | | Guwahati Camp Office | ERO | | Southern | SRO |
| Western | WRO | | Central Camp office Vadodra | CRO | | South West Camp office | SWR | | | |

**Important Note for Payments:**

    a)    Institutions which do not follow the AICTE guidelines shall be responsible for rejection/ delay in updation of their application and neither AICTE nor the Collecting Bank shall be responsible for any such consequence."

    b)    No DD / Cheque / PO to be sent to either Head Office / Regional Office of AICTE. Such payments shall not be processed and the applications are liable to be rejected.

**Note:** Please submit the hard copy of this Report to Regional Officer only if Application status is "Submitted" and Application Substatus is "Payment Received" / "Payment Not Applicable" – **IN CASE OF GOVT/GOVT. AIDED/  CENTRAL/STATE UNIVERSITY DEPT**

\*\*All the Dates in the Report are in dd/mm/yyyy format.

\*\*NA refers to Not Applicable

Date of Signature(dd/mm/yyyy)              Seal of Institute            Name & Signature of Director/Principal

| Permanent Institute Id | NA | Current Application No. | 1-4529440361 |
|---|---|---|---|
| Application Type | New Application / New Institute | AICTE File No. | NEW |

**Institute Details**

| | | | |
|---|---|---|---|
| Name of the Institute/University Department | JAHANGIRABAD INSTITUTE OF TECHNOLOGY FACULTY OF PHARMACY | Address of the Institute/University Department | JAHANGIRABAD TEHSIL NAWABGANJ DISTT BARABANKI LUCKNOW UTTAR PRADESH |
| State/UT | Uttar Pradesh | District | BARABANKI |
| Pin | 225203 | AICTE Region | Northern |
| Town/Village | JAHANGIRABAD | STD code | 5248 |
| Land Phone No. | 321802 | Email | jitfph@gmail.com |
| Cell No. | 9999241786 | Alternate Email | jitfph@yahoo.com |
| FAX No. | 321802 | Website | www.jitpharmacy.co.in |
| Institute Type | Unaided - Private | Women Only Institute | No |
| Type Of Minority | Religious | Name of the Minority | MUSLIM |
| Minority Institute | Yes | Minority Name, if Linguistic | |
| PAN | AAATJ3220B | Primary Bank Account No. | NA |
| Bank Name | NA | IFSC No. | NA |
| Approval Year of First Course | Data Not Provided by the Institute | Date of First Approval by AICTE | Data Not Provided by the Institute |

**Questionnaire for New Institutes**

| Sr. No. | Particulars | Details Provided by Institute |
|---|---|---|
| (i) | Whether the Institute is having approval from Council of Architecture (COA)? | No |
| (ii) | Whether the Institute is a Non-Technical Institute seeking approval for MBA/MCA? | No |
| (iii) | Whether your institution is a part of Deemed to be University / State private University? | No |
| (iv) | Whether your department is part of State / Central University? | No |

**Questionnaire**

| Sr. No. | Particulars | Details Provided by Institute |
|---|---|---|
| (i) | Any Unaided Course(In case of Government Aided Institute)? | Yes |
| (ii) | Number of teaching faculty approved by University/Government? | 9 |
| (iii) | Are all approved teaching faculty being paid as per VI pay commission? | Yes |
| (iv) | Are all the teaching faculty, as per AICTE qualification? | Yes |
| (v) | Do you wish to apply closure of Institute? | No |
| (vi) | Type of Institute Closure Requested? | NA |
| (vii) | Percentage Grant/Funds Received from Government? | 0 |
| (viii) | Whether Institute is operating from Permanent Site/Temporary Site? | Permanent Site |
| (ix) | Whether mandatory disclosure is uploaded in Institute's website? | Yes |
| (x) | Whether the Institute following ICAI(Institute of Chartered Accountants of India) Accounting Formats? | No |
| (xi) | Fees to be charged, Reservation policy, Admission policy and Document retention policy are duly approved by State Govt? | Yes |
| (xii) | Fees to be charged, Reservation policy, Admission policy and Document retention policy are duly approved by Affiliating Board/University?: | Yes |
| (xiii) | Fees to be charged, Reservation policy, Admission policy and Document retention policy are uploaded in Institute's Website? | Yes |
| (xiv) | Whether List of faculty along with details and other data uploaded/updated on the institute web Portal? | Yes |
| (xv) | Courses/Approved Intake displayed at the entrance of the Institute? | No |
| (xvi) | Is the Cafeteria shared among other Institutes? | No |
| (xvii) | Is Library and Reading Room shared among other Institutes? | No |
| (xviii) | Is the Computer Centre shared among other Institutes? | No |

**Application Details**

| Sr. No. | Particulars | Details Provided by Institute |
|---|---|---|
| (i) | Change of Institute Site | No |
| (ii) | Increase in Intake / Application for New Course | No |
| (iii) | Closure of Course / Reduction in Intake | No |
| (iv) | PIO/FN/Gulf quota Approval status/OCI | No |
| (v) | NRI | No |
| (vi) | Change of Name of the Institute | No |
| (vii) | Old Name of the Institute | NA |
| (viii) | New Institute Name | NA |
| (ix) | Conversion of Women's Institution into Co-Ed Institution | No |
| (x) | Conversion of Co-ed Institution into Women Institution | No |

Date of Signature(dd/mm/yyyy)                 Seal of Institute            Name & Signature of Director/Principal

**Application Status:** **Submitted**
**Application Sub-Status: Scrutiny Scheduled**

Report Generated on :-20/02/2019

| (xi) | Introducing a Twining Program with an AICTE approved Indian Institution | No |
|---|---|---|
| (xii) | Introduction of New/Integrated Course | No |

## Payment Details

| Sr.No. | Payment Id | Mode of Payment | Bank Transaction Id | Transaction Id | Receipt Flag | Part Payment Amount | Total Amount | Transaction Date |
|---|---|---|---|---|---|---|---|---|
| 1 | | CIB (ICICI Only) | 1637828267 | | Y | 600000 | 600000 | 07/02/2019 |

## Details about Parent Organization(Trust/Company)

| | | | |
|---|---|---|---|
| Name of the Parent organization | JEHANGIRABAD EDUCATIONAL TRUST | Address | D-19, ABULFAZAL ENCLAVE |
| Town/Village | ABULFAZAL | State/UT | Delhi |
| District | NEW DELHI | Pin Code | 110025 |
| Website | www.jitpharmacy.co.in | Type of the Organization | Trust |
| Registered with | SUB REGISTAR NEW DELHI | Registration Date | 31/01/2001 |

## Details about Contact Person

| | | | |
|---|---|---|---|
| Title | Mr. | First Name | SAFI | Last Name | MOHMMAD |
| Address | FATEHPUR TAGA | Town/Village | FATEHPUR TAGA |
| State/UT | Haryana | District | FARIDABAD |
| Pin Code | 121004 | Designation | TRUSTEE |
| Cell No. | 9999241786 | Alternate Cell No. | 9999241786 |
| Email | jitfph@gmail.com | Alternate Email Address | jitfph@yahoo.com |
| STD Code | 5248 | Land Phone No. | 321802 | Fax No. | 321802 |

## Land Details

| | | | |
|---|---|---|---|
| Location | Rural | North Eastern States/Land in Hilly Area | No |
| No. of pieces of Land | 1 | Max distance in farthest pieces | NA |
| Land registered with | SUB REGISTRAR | Land Piece Area 1 in acres | 4 |
| Land ownership details | Registered Sale Deed | Land Piece Area 2 in acres | NA |
| Total area in acres | 4 | Land Piece Area 3 in acres | NA |
| Land Registration Date | 27/08/2007 | Land Use Certificate issued by | TEHSILDAR |
| Land Use Certificate date | 14/12/2016 | Latitude and Longitude | Latitude - 26, 59, 36 Longitude - 81, 14, 15 |
| Mortgage Details(if any) | No | Purpose of Mortgage | No |
| FSI | Data Not Provided by the Institute | Build Up Area(Sqm) | Data Not Provided by the Institute |
| Additional land for Merger or New Program | | Data Not Provided by the Institute | |

## Other Land Details

| | | | |
|---|---|---|---|
| Sr. No. | 1 | Land Registration No. | 5639 |
| Date of Registration | 27/08/2007 | Area of Land (acres) | 5 |
| Khasra Number | 21M | Plot Number, Survey Number, etc | 21M |
| Land Situated At | JAHANGIRABAD | Land Registered in the name Of | TRUST |
| Type of Ownership (Sale deed/ Gift deed/Govt/Private Lease) | Registered Sale Deed | Land Use Certificate Issued | Yes |
| In case of Private Lease- Name of the Leaser | | Name of the Leasee | |
| Owner of the land ( In whose name last sale deed was made) | | | |
| Land Use Certificate Issuing Authority | TESILDAR NAWABGANJ | Is the Land Mortgaged | No |
| Details of Land If the Land is Mortgaged | Data Not Provided by the Institute | Land required at the time of First AICTE approval(In Acres) | 2 |
| Land available at the time of First AICTE approval(In Acres) | | 4 | |

## Building Details

| | | |
|---|---|---|
| Date of Signature(dd/mm/yyyy) | Seal of Institute | Name & Signature of Director/Principal |

**Application Status:** **Submitted**
**Application Sub-Status: Scrutiny Scheduled**

Report Generated on :-20/02/2019

| Building Status | Available | Total built up Area(Sqm) Planned | 4200 |
|---|---|---|---|
| Total built up Area(Sqm) ready | 3800 | Total Carpet Area(Sqm)-Instructional-ready | 1294 |
| Total Carpet Area(Sqm) Administrative-ready | 846 | Total Carpet Area (Sqm)-Amenities-ready | 765 |
| Access and Circulation Area (Sqm) | 895 | Activities in the building other than courses approved by AICTE | NO |
| Whether Toilet Area is maintained as per National Building Code (NBC) Norms? | Yes | Whether Access and Circulation Area is maintained as per National Building Code (NBC) Norms? | Yes |

**Funds Position for Building Construction(Rs in Lakhs)**

| Loans: | Data Not Provided by the Institute | Own Share: | Data Not Provided by the Institute | Funds allocated: | Data Not Provided by the Institute |
|---|---|---|---|---|---|

**Other Building Details**

Data not entered by Institute

**Programme and Courses**

| Sr. No. | 1 | Course Unique Id | 1-4859288028 | Programme | PHARMACY |
|---|---|---|---|---|---|
| Level | DIPLOMA | Course | PHARMACY | Shift | 1st Shift |
| FT/PT | FULL TIME | Started In | 2019 | Applying For | Application for new course |
| Course Duration | 2 | Current Intake (2018-19) | 0 | Applied for Intake(2019-20) | 60 |
| NRI | Not interested | University/ Board | Uttar Pradesh Board of Technical Education, Lucknow | PIO / FN / Gulf Quota Approval status OCI | Not interested |
| Twining Program Request | | Not interested | NBA Accreditation status (As on 10th April, 2018) | | No |

| Sr. No. | 2 | Course Unique Id | 1-4859288033 | Programme | PHARMACY |
|---|---|---|---|---|---|
| Level | UNDER GRADUATE | Course | PHARMACY | Shift | 1st Shift |
| FT/PT | FULL TIME | Started In | 2019 | Applying For | Application for new course |
| Course Duration | 4 | Current Intake (2018-19) | 0 | Applied for Intake(2019-20) | 100 |
| NRI | Not interested | University/ Board | Dr. A.P.J. Abdul Kalam Technical University, Uttar Pradesh, Lucknow | PIO / FN / Gulf Quota Approval status OCI | Not interested |
| Twining Program Request | | Not interested | NBA Accreditation status (As on 10th April, 2018) | | No |

**Dual Degree/Integrated Course Details**

Data not entered by Institute

**Vocational Course Details**

Data not entered by Institute

**Instructional Area**

| Sr. No. | Programme | Level | Building No. | Building Name | Room Type | Room No. | Average Carpet Area (Sqm) | Flooring | Wall & Painting | Elec & lighting | Furniture & Fixtures |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | PHARMACY | DIPLOMA | 1 | MAIN | Classroom | C1 | 68 | Ready | Ready | Ready | Ready |
| 2 | PHARMACY | UNDER GRADUATE | 1 | MAIN | Classroom | C2 | 107.09 | Ready | Ready | Ready | Ready |
| 3 | PHARMACY | UNDER | 1 | MAIN | Classroom | C3 | 98.3 | Ready | Ready | Ready | Ready |

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

| Sr. No. | Building | Program | Building No. | Building Name | Room Type | Room Id | Area (Sqm) | Flooring | Wall & Painting | Elec & lighting | Furniture & Fixtures |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | GRADUATE | | | | | | | | | |
| 4 | PHARMACY | DIPLOMA | 1 | MAIN | Instrument Room | I1 | 112.7 | Ready | Ready | Ready | Ready |
| 5 | PHARMACY | DIPLOMA | 1 | MAIN | Laboratory | L1 | 75.58 | Ready | Ready | Ready | Ready |
| 6 | PHARMACY | DIPLOMA | 1 | MAIN | Laboratory | L2 | 138 | Ready | Ready | Ready | Ready |
| 7 | PHARMACY | DIPLOMA | 1 | MAIN` | Laboratory | L3 | 102.92 | Ready | Ready | Ready | Ready |
| 8 | PHARMACY | DIPLOMA | 1 | MAIN | Machine Room | L4 | 138 | Ready | Ready | Ready | Ready |
| 9 | PHARMACY | UNDER GRADUATE | 1 | MAIN | Laboratory | L5 | 113.35 | Ready | Ready | Ready | Ready |
| 10 | PHARMACY | UNDER GRADUATE | 1 | MAIN | Laboratory | L6 | 76.09 | Ready | Ready | Ready | Ready |
| 11 | PHARMACY | UNDER GRADUATE | 1 | MAIN` | Laboratory | L7 | 78.1 | Ready | Ready | Ready | Ready |
| 12 | PHARMACY | UNDER GRADUATE | 1 | MAIN` | Laboratory | L8 | 84.17 | Ready | Ready | Ready | Ready |
| 13 | PHARMACY | UNDER GRADUATE | 1 | MAIN | Machine Room | M1 | 102.92 | Ready | Ready | Ready | Ready |
| 14 | PHARMACY | UNDER GRADUATE | 1 | MAIN | Seminar Hall | S1 | 175.09 | Ready | Ready | Ready | Ready |
| 15 | PHARMACY | UNDER GRADUATE | 1 | MAIN | Tutorial Room | T1 | 68.32 | Ready | Ready | Ready | Ready |
| 16 | PHARMACY | DIPLOMA | 1 | MAIN | Tutorial Room | T2 | 38.88 | Ready | Ready | Ready | Ready |

## Instructional Area Common Facilities

| Sr. No. | Building No. | Building Name | Room Type | Room Id | Area (Sqm) | Flooring | Wall & Painting | Elec & lighting | Furniture & Fixtures |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 1 | MAIN | Computer Center | CC1 | 142.24 | Ready | Ready | Ready | Ready |
| 2 | 1 | MAIN | Library&Reading Room | L1 | 240.43 | Ready | Ready | Ready | Ready |

## Administrative Area

| Sr. No. | Building No. | Building Name | Room Type | Room Id | Area (Sqm) | Flooring | Wall & Painting | Elec & lighting | Furniture & Fixtures |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 1 | MAIN | Principal Directors Office | A1 | 35.63 | Ready | Ready | Ready | Ready |
| 2 | 1 | MAIN | Pantry for Staff | A10 | 34.22 | Ready | Ready | Ready | Ready |
| 3 | 1 | MAIN | Exam Control Office | A11 | 54.21 | Ready | Ready | Ready | Ready |
| 4 | 1 | MAIN | Placement Office | A12 | 34.32 | Ready | Ready | Ready | Ready |
| 5 | 1 | MAIN | Board Room | A2 | 57.03 | Ready | Ready | Ready | Ready |
| 6 | 1 | MAIN | Office All Inclusive | A3 | 163.12 | Ready | Ready | Ready | Ready |
| 7 | 1 | MAIN | Cabin for Head of Dept | A4 | 44.82 | Ready | Ready | Ready | Ready |
| 8 | 1 | MAIN | Faculty Room | A5 | 76.8 | Ready | Ready | Ready | Ready |
| 9 | 1 | MAIN | Central Store | A6 | 30.15 | Ready | Ready | Ready | Ready |
| 10 | 1 | MAIN | Maintenance | A7 | 13.73 | Ready | Ready | Ready | Ready |
| 11 | 1 | MAIN | Security | A8 | 10 | Ready | Ready | Ready | Ready |
| 12 | 1 | MAIN | Housekeeping | A9 | 26.44 | Ready | Ready | Ready | Ready |

## Amenities Area

| Sr. No. | Building No. | Building Name | Room Type | Room Id | Area (Sqm) | Flooring | Wall & Painting | Elec & lighting | Furniture & Fixtures |
|---|---|---|---|---|---|---|---|---|---|

Date of Signature(dd/mm/yyyy)    Seal of Institute    Name & Signature of Director/Principal

| 1 | 1 | MAIN | Cafeteria | E1 | 171.31 | Ready | Ready | Ready | Ready |
| 2 | 1 | MAIN | Stationery Store | E2 | 18.07 | Ready | Ready | Ready | Ready |
| 3 | 1 | MAIN | Toilet | E3 | 158.96 | Ready | Ready | Ready | Ready |
| 4 | 1 | MAIN | Boys Common Room | E4 | 84.82 | Ready | Ready | Ready | Ready |
| 5 | 1 | MAIN | Girls Common Room | E5 | 75.57 | Ready | Ready | Ready | Ready |
| 6 | 1 | MAIN | First aid cum Sick Room | E6 | 25.14 | Ready | Ready | Ready | Ready |

## Circulation Area

| Sr. No. | Building No. | Building Name | Room Type | Room Id | Area (Sqm) | Flooring | Wall & Painting | Elec & lighting | Furniture & Fixtures |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 1 | MAIN | Other Common Area (in Sq m) | 746 | Yes | Ready | Ready | Ready | Y |

## Laboratory Details

Data not entered by Institute

## Library Books

| Sr. No. | Programme | Titles | Volumes | No. of Journals Published Abroad | No. of Journals Published in India | No. of e-Book Titles | No. of e-Book Volumes |
|---|---|---|---|---|---|---|---|
| 1 | PHARMACY | 500 | 1500 | 3 | 6 | 0 | 0 |

## Library Facilities

| Sr. No | Working Hrs. | E journal Subscription | Annual Budget (Rs) | Area in Sqm | Library Networking | Bar Code or RF Tab book handling | Reprographic Facility | Reading Room Capacity (No. of Students) | Multime dia PCs (No.) | Library Management Software |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 9.00 AM TO 5 PM | NA | 150000 | 240 | YES | No | Y | 24 | 10 | Yes |

| **e-Journal Declaration** | **Status of declaration check box** |
|---|---|
| BY CLICKING THIS CHECK BOX THE INSTITUTE HEREBY DECLARES THAT IT HAS SUBSCRIBED FOR ALL THE REQUIRED E-JOURNALS AS MENTIONED IN APPROVAL PROCESS HANDBOOK 2019-2020. | No |

## Computational Facility

| Sr. No | Legal System Software | Legal Application Software | Internet Bandwidth in Mbps | Internet Contention Ratio | PCs/Laptop exclusively available to students | PCs/Laptop available in Administrative Office | No. of PCs/Laptop available in Library | No. of PCs/Laptop in language lab | PCs/Laptop available to Faculty Members | Printers available to student |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 1 | 10 | 32 | 1:1 | 20 | 2 | 2 | 20 | 2 | 3 |

## Hostel Facility

Data not entered by Institute

## Operational Funds

Data not entered by Institute

## Financial Details(in Rs)

Data not entered by Institute

Date of Signature(dd/mm/yyyy)

Seal of Institute

Name & Signature of Director/Principal

**Application Status:** **Submitted**
**Application Sub-Status:** **Scrutiny Scheduled**

Report Generated on :-20/02/2019

## DECLARATION
### BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTE/UNIVERSITY DEPARTMENT

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

**a) I have carefully gone through the AICTE Regulations Notification dated on 30th November, 2016, published in the Gazette of India - Extraordinary Part III, Section- 4 and its amendment 05th December 2017 also the various provisions mentioned in the Approval Process Hand Book 2019-20.**

**b) I am fully aware of the data uploaded by me in respect of my institute 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 uploaded 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 PIO/FN/Gulf quota Approval status/OCI, NRI, Change of name, and Conversion of women institute into Co-ed institute and vice versa (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2019-20.**

**e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my institute on the portal.**

**f) I am also aware that Institute is eligible for grant of**
**Approval of New Institutes/University Department/Constituent College,**
**only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2019-20.**

**Signature of Principal/Director/Registrar**

**Name :**

**Seal/Stamp of the Institute/University Department**

Date of Signature(dd/mm/yyyy)　　　　　　　　　　Seal of Institute　　　　　　　Name & Signature of Director/Principal

## APPROVAL PROCESS 2019-20

## Application Report Part-2

| | |
|---|---|
| **Permanent Institute Id** | NA |
| **Current Application No.** | 1-4529440361 |
| **Application No. of 2017-2018** | NA |
| **AICTE File No.** | NEW |
| **Application Type** | New Institute |
| **Organization Registration No.** | 438/4/2909/144-157 |

### Principal/Director/Registrar

| | | | |
|---|---|---|---|
| **Surname** | MAITY | **First Name** | SUPRIYA |
| **Father's Name** | SUKAMAR MAITY | **Date of Birth** | 09/01/1981 |
| **Doctorate Degree** | Yes | **Field of Specialization** | PHARMACEUTICAL CHEMISTRY |
| **Master's Degree** | M.PHARMA | **Bachelor Degree** | B.PHARMA |
| **Other Qualifications** | | **Date of Joining the Institute as head** | 01/01/2019 |
| **Appointment Type** | Regular | **Exact Designation** | Director |

| **Experience (T-R-I)** | **Teaching** | **Research** | **Industry** |
|---|---|---|---|
| | 15 | 1 | 1 |

### Faculty Counts

| | |
|---|---|
| Total No. of Faculty | 0 |

| | |
|---|---|
| No. of Teaching  faculty approved by University/Government? | 9 |

### Faculty Details

Data not entered by Institute

### Adjunct Faculty/Resource Person from Industry Details

Data not entered by Institute

### Technical Staff

Data not entered by Institute

### Admin & Library Staff

Data not entered by Institute

**DECLARATION**
**BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTE/UNIVERSITY DEPARTMENT**

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**only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2019-20.**

**Signature of Principal/Director/Registrar**

**Name :**

**Seal/Stamp of the Institute/University Department**

Date of Signature(dd/mm/yyyy)                              Seal of Institute                              Name & Signature of Director/Principal