Institution Detail

PCI-10390	Shree Swaminarayan Institute of Pharmacy	New	Private Institute	-
PCI Code	Institution Name	Register Type	Institution Type	Year of Establishment

Application For

(Academic Session)	Conduct	u/s 12	Yes/No	Number of admissions requested	Yes/No	Proposed Intake
B.Pharm 2025-2026	Conduct	U/5 12	163/110	Number of autilissions requested	163/110	100

Institution Information

House No./Apt.No.:	1	response_sif.institution_information	NH. 8
Area/Locality/Sector:	Near Ahmedabad-Himmatnagar Highway	Landmark :	Near Petrol Pump
Village:	Tajpur	Gram Panchayat :	Tajpur
Block/Tehsil:	Prantij	State :	GUJARAT
District :	SABAR KANTHA	Pin Code :	383205
Mobile Number :	6357675562	Landline Number With STD Code :	2770255132
Email ID	swaminarayanpharmacy@gmail.com		'
Post Office :	Tajpur	Police Station :	Prantij
Nearest Railway Station :	Himmatnagar	Nearest Airport :	Ahmedabad
Status of the Course Conducting Body :	State Goverment University	Name of the Society/Trust/Management :	Prayas The Foundation Sports Culture and Education Trust
House No./Apt.No.:	1	Street/Road/Lane :	NH. 8
Area/Locality/Sector:	Near Ahmedabad-Himmatnagar Highway	Landmark :	Majra Cross Road
Village:	Tajpur	Gram Panchayat :	Tajpur
Block/Tehsil:	Prantij	State:	GUJARAT
District :	SABAR KANTHA	Pin Code :	383205
Mobile Number :	9898966365	Landline Number With STD Code :	2770255132
Email ID	swamibn20@gmail.com		
Post Office :	Tajpur	Police Station :	Prantij
Nearest Railway Station :	Himmatnagar	Nearest Airport :	Ahmedabad
Name of Head of Institution :	-	Pharmacy Council No :	-
House No./Apt.No.:	-	Street/Road/Lane :	-
Area/Locality/Sector:	-	Landmark :	-
Village :	-	Gram Panchayat :	-
Block/Tehsil:	-	State :	-

about:blank 1/12

District :	-	Pin Code :	-
Mobile Number :	-	Landline Number With STD Code :	-
Email ID	-		
Post Office :	-	Police Station :	-
Nearest Railway Station :	-	Nearest Airport :	-

Other Institution in Same Campus

Sr.No.	Institution Name	College Running Since
	No data fou	ınd.

Examining Authority

1	B.Pharm	Gujarat Technological University, Ahmedabad, Gujarat	registrar@gtu.ac.in	9099063730
Sr.No.	Course	Examining Authority	Email	Phone Number

Accreditation Information

Accreditation From :	_	Accreditation Upto :	-
Grade:	-	Accreditation Certificate :	NA
NIRF Ranking :	-	Upload Ranking Certificates:	NA

Accreditation Certificate NBA

Sr.No.	Course	Approved From	Approved Upto	Certifying Body	NBA Document
No data found.					

Any Other Accreditation

01.140.	Oddisc	Approved From	No data found.	Certifying Body	Document
Sr.No.	Course	Approved From	Approved Upto	Certifying Body	Document

Statutory Document

Institution Name:	Shree Swaminarayan Institute of Pharmacy/PCI-10390	Institution Address:	Shree Swaminarayan Institute of Pharmacy
Consent of Affiliation of Examining Authority:	View Document	NOC/Approval of the State Govt:	View Document
State govt has taken up the policy decision to the effect not to issue the NOC	NA	Name of State Govt	-

Infrastructure Details

Independent Building :	YES	Remarks :	Fulfilled
Separate Campus :	YES	Remarks :	NA
Wing of another college:	NO	Remarks:	Fulfilled
Land Type :	Rural	Status:	YES

about:blank 2/12

.0/20, 0.20 1			
Availability of land :	2 Acer	Remarks :	Fulfilled
Survey No.	208 (Old 396)	Extent of Land	-
Land Details to be in name of Trust and Society :	own	Upload Land Details:	View Document
Sale Deed Remarks:	1004/4/36/2009	Sale Deed:	View Document
Approved Building Plan Remarks:	31103	Approved Building Plan:	View Document
Longitude:	23.3654	Latitude:	72.799646
Instructional area:	410 sqmt	Upload instructional area:	View Document
Administrative area:	138.53 sqmt	Upload Administrative area:	View Document
Amenities area:	2650	Upload amenities area:	View Document
Circulation area:	816	Upload Circulation area:	View Document
Total Builtup area of the Institution in Sqmts:	6712	Total Floor of Institution:	3
_and Area as per norms:	YES	Enclose Certified copy of Land Use Certificate:	View Document
Upload Certificate of single piece of land:	NA	Upload latest revenue paid receipt :	View Document
Multi Institutional Campus Status:	NO	Remarks:	-
Allocated land no.:	-	Enclose copy of allocated land:	NA
ls Institutes building complete and ownership of building and land is with Institution:	YES		
Enclose Building Completion Certificate:	View Document	Enclose Approved Building Map by local govt. authority having land number in map:	View Document
Enclose building insurance certificate :	NA	Enclose Building Fire Safety Certificate :	View Document
Enclose CA certified copy of building costruction :	NA	If No, Enclose certificate/declaration :	NA
s previously any institution was running on the same building/land:	YES	If yes, enclose closure certificate from the concern authority:	View Document
f yes, enclose copy:	NA		-
Any other courses running in the same building:	NO	Remarks:	-
f yes, name of courses:	-	If No, Enclose declaration:	NA
Institution Photo:	View Document		•

Physical Infrastructure

Own Building	YES	Rented Building	NO
Number of Class Rooms	1	Number of Lab	3
Museum	YES	Machine Room	YES
Preparation Room	YES	Store Room	YES
Library	YES	Principal Room	YES

about:blank 3/12

Staff Room	YES	Smart Class Room	YES	
CCTV Surveillance	YES	Biometric Device	-	

Institution Class Room

Sr.No.	Course Name	Room Name	Required Area	Available Area	Unit	Latitude	Longitude	Inside Room Image	Outside Room Image	QR Code
1	B.Pharm	Class Room 1	75	75	Sqmts	23.365646	72.799006	View Document	View Document	

Institution Lab Registration

Sr.No.	Course Name	Lab Name	Semester	Department Name	Required Area(sqmts)	Available Area(sqmts)	Inside Lab Image	Outside Lab Image	QR Code
1	B.Pharm	Pharmacology Lab 1	1	Dept of Pharmacology	75	75	View Document	View Document	
2	B.Pharm	Pharmaceutics Lab	1	Dept of Pharmaceutics	75	75	View Document	View Document	
3	B.Pharm	PHARMACEUTICAL CHEMISTRY LAB 1	1	Dept of Pharmaceutical Chemistry	75	75	View Document	View Document	

Institution Common Facilities

Sr.No	Common Facility Name	Latitude	Longitude	Required Area	Available Area	Unit	Common Facility Image	QR Code
1	Drinking Water facility - Water Cooler (Essential).	23.365492	72.799964	0	1		View Document	
2	Herbal Garden (Essential)	32.365366	72.799587	0	200	sqmt	View Document	
3	Toilet Blocks for Boys (Desirable)	23.364774	72.799616	0	40	Sq.mt	View Document	
4	Girl's Common Room (Essential)	23.364794	72.799405	60	60	Sq.mts	View Document	

about:blank 4/12

5	Store Room - I (Essential)	23.364975	72.799764	1	39	Sq mts	View Document	
6	Area of the Machine Room (Essential)	23.362812	72.798546	100	100	Sq.mts	View Document	
7	Auditorium (Essential)	23.36636	72.800238	300	300	sqmt	View Document	

Institution Computer Lab Details

Sr.No.	Name	Latitude	Longitude	Required	Available	Unit	Bill Image	Image with Geotag	QR Code
1	Computer Room for B.Pharm Course	23.365316	72.798901	1		15	View Document	View Document	

Institution Amenity Detail

Sr.No.	Amenities Name	Latitude	Longitude	Required	Available	Unit	Upload Image with Geotag	QR Code
1	Medical Facility (First Aid) Essential	23.364794	72.799405	0	45		View Document	
2	Faculty Room (Essential)	23.364878	72.799609	1	39	Sq mts	View Document	
3	Canteen (Essential)	23.366126	72.800277	100	100	Sq. mts	View Document	
4	Office (Essential)	23.365995	72.80052	0	85	sq mts	View Document	
5	Parking Area for staff and students (Essential)	23.365304	72.799694	0	1	Sq mts	View Document	

Laboratory

Gas Supply :	No	Water Supply:	Yes
Electricity Supply: Yes		Is social pharmacy laboratories maintained as per new regulations:	Yes
Latest Electricity Bill:	View Document	Latest Water Bill:	View Document

about:blank 5/12

Latest Gas Bill:	View Document
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Curriculum

Class Conducted

Sr.No.	Course Se	emester Sul	1.00	of Hours		No. of Hours		Prescribed No. of Hours (Tutorial)	No. of Hours Conducted (Tutorial)
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Faculty

Non-teaching-staff

Sr. No.	Name of the Staff	Qualification	Mobile Number	Designation	Date Of Joining
1	Mr. Yakin B. Joshi	M.Com	9099173076	Administrative Officer	13-01-2025

Faculty Workload

Sr. No.	Faculty Name	Course	Subject	Theory (Number of Hours per week including tutorials)	Practical (Number of Hours per week)	Year	Remarks	
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Faculty Salary Details

Lab Technician Detail

Sr.No.	Pharmacy Council No	Technician Name	Qualification	Mobile No	Joining Date	Designation Name
1	BH-P-25-30207	MUKESHKUMAR DAYALAL .		9799152912	13-01-2025	Laboratory Technician

Faculty Consent

Sr.No.	Faculty Name	Email	Qualification	Mobile Number	Consent Letter	Previous Institution NOC
1	KHANJAN BHARATKUMAR RAJYAGURU	khanjanrajyagurub@gmail.com	M.pharm	8140154322	View Document	NA
2	Nidhi Jayeshbhai Solanki	nidhijsolanki20@gmail.com	Pharm D	7490857848	View Document	NA
3	RAVIKUMAR RAMESHKUMAR PATEL	drravikumarrpatel@gmail.com	M.PHARM PHD	9428114678	View Document	NA
4	JIGNESHKUMAR PASHABHAI PRAJAPATI	prajapatijignesh44@gmail.com	MASTER OF PHARMACY	9033296323	View Document	NA
5	Hardik jagdishbhai gajjar	ghardy619@gmail.com	MPHARM	9429738083	View Document	NA

Income And Expenditure

Income	

about:blank 6/12

15/25, 6:20 PM Standard Inspection Form							
Sr. No.	Particulars	Amount in (INR)					
1	Tution Fee	₹0.00					
2	Sports Fee	₹0.00					
3	Grants Others	₹0.00					
4	Library Fee	₹0.00					
5	Uinion Fee	₹0.00					
6	Others	₹0.00					
7	Grants Govt	₹0.00					
	Total	₹0.00					
	Expenditure						
Sr. No.	Particulars	Amount in (INR)					
1	Equipment	₹0.00					
2	Others	₹0.00					
3	Building	₹0.00					
	Total	₹0.00					
	Revenue Expenditure						
Sr. No.	Particulars	Amount in (INR)					
1	Revenue Exp - Salary	₹0.00					
2	Misc.Expenditure	₹0.00					
3	Annual maintenances	₹0.00					
4	Maintenance Exp - Others	₹0.00					
5	Stationary	₹0.00					
6	Maintenance Exp - College	₹0.00					
7	Deposit held by the College	₹0.00					
8	Others	₹0.00					
9	Apex Bodies Fee	₹0.00					
10	Chemicals	₹0.00					
	Total	₹0.00					

Upload Audited accounts of immediate Previous Year:	View Document	Upload Society/Trust/Company Constitution Details:	View Document
Institution Pancard No.:	AABTP4911C	Upload Institution Pancard:	View Document
GST Registration No.:	-	Upload GST Registration Certificate:	NA
GSTR 3B:	-	Enclose Latest return's copy:	NA

Bank Account(s) Detail

Sr. No.	Bank Name	Account No.	IFC Code	Holder Name	Cancelled Cheque
1	IDFC FIRST BANK	10175317141	IDFB0042343	PRAYAS THE FOUNDATION OF SPORTS CULTURE AND EDUCATION TRUST	View Document

about:blank 7/12

Bachelor Degree Equipment Details

Sr. No.	Course	Equipment	Department	Equip Model No.	Min Required	Qty(avl)	Working(qty)	Item Cost	DOP	Bill	QR Code
1	B.Pharm	Tray dryer	Dept of Pharmaceutics	111	01	0	0	0	13- 01- 2025	View Document	回為 (B) (2) (B) (B) (B) (B)

Master Degree Equipment Details

Chemical Reagents And Other Consumables Equipment

Sr.No	Equipment Type	Vendor	Purchase Date	Purchase Bill
1	Chemical	NA	13-01-2025	View Document

Library Norms

Is Library available as per the norms	Yes	Library Area	150
Is Reading Room available	Yes	Total Seating Capacity	50
Enclose appointment of Librarian:	View Document		

Books

Sr. No.	Course	Titles Required	Titles Available	Volume Required	Volume Available	Journals Required	Journals Available
1	B.Pharm	500	0	1500	0	150	0

Journals

Total no. of National Journals available	0	Enclose Details of the Journals Subscribed:	View Document
Total no. of International Journals available	0	Enclose CA Certified GST Paid Bills of Books and Journals	View Document

Computer Lab Norms

Is Computer Lab available as per the norms	No	Total no. of computer available	0
If yes, enclose CA certified GST Paid Bills of computers and printers with remark for use of licensed software	NA		

Subject Wise Classification

Sr. No.	Course	Available Numbers	Available Titles
1	Advanced Instrumentation Techniques	0	0
2	Biochemistry	0	0
3	Biopharmaceutics and Pharmacokinetics	0	0

about:blank 8/12

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4	Biostatistics and Research Methodology	0	0
5	Cell and Molecular Biology	0	0
6	Communication Skills	0	0
7	Computer Aided Drug Design	0	0
8	Computer Applications in Pharmacy	0	0
9	Cosmetic Science	0	0
10	Dietary Supplements and Nutraceuticals	0	0
11	Environmental sciences	0	0
12	Experimental Pharmacology	0	0
13	Herbal Drug Technology	0	0
14	Human Anatomy & Physiology	0	0
15	Human Anatomy and Physiology - II	0	0
16	Industrial Pharmacy - I	0	0
17	Industrial Pharmacy - II	0	0
18	Instrumental Methods of Analysis	0	0
19	Medicinal Chemistry - I	0	0
20	Medicinal Chemistry - II	0	0
21	Medicinal Chemistry - III	0	0
22	Novel Drug Delivery System	0	0
23	Pathophysiology	0	0
24	Pharmaceutical Analysis - I	0	0
25	Pharmaceutical Biotechnology	0	0
26	Pharmaceutical Engineering	0	0
27	Pharmaceutical inorganic chemistry	0	0
28	Pharmaceutical jurisprudence	0	0
29	Pharmaceutical Marketing	0	0
30	Pharmaceutical microbiology	0	0
31	Pharmaceutical Organic Chemistry - I	0	0
32	Pharmaceutical Organic Chemistry - III	0	0
33	Pharmaceutical Organic Chemistry II	0	0
34	Pharmaceutical Regulatory Science	0	0
35	Pharmaceutics-I	0	0
36	Pharmacognosy and Phytochemistry - I	0	0
37	Pharmacognosy and Phytochemistry - II	0	0
38	Pharmacology - I	0	0
39	Pharmacology - II	0	0
40	Pharmacology - III	0	0

about:blank 9/12

41	Pharmacovigilance	0	0
42	Pharmacy Practice	0	0
43	Physical Pharmaceutics - II	0	0
44	Physical Pharmaceutics I	0	0
45	Practice School	0	0
46	Quality Assurance	0	0
47	Quality Control and Standardization of Herbals	0	0
48	Remedial Biology	0	0
49	Remedial Mathematics	0	0
50	Social and Preventive Pharmacy	0	0

Library accession register for previous year

View Document

PG And PhD Projects

No.	Name of the Supervisor RAVIKUMAR	No. BH-P-23-	Candidate	Project	Thesis/Dissertation	months)	Year	
1	RAMESHKUMAR PATEL	22717	NA	PG	NA	0	2025	

Projects Completed

1	RAVIKUMAR RAMESHKUMAR PATEL	BH-P-23-22717	NA	0	₹0.00	NA	2025
Sr. No.	Name of the Investigator	Investigator BH No.	Title of the Project	Duration(in months)	Sanctioned Amount(in Lakhs)	Funding Agency	Year

On Going Projects

Sr. No.	Name of the Faculty	Centralised Pharmacy No.	Title of the Project	Duration(in months)	Sanctioned Amount(in Lakhs)	Funded By
1	RAVIKUMAR RAMESHKUMAR PATEL	BH-P-23-22717	NA	0	₹0.00	NA

Research Collaboration

1	NA	Training	NA	2025
Sr. No.	Name of Collaborating Organization	Nature of Collaboration	Outcome of Collaboration	Year

Research Publication

Sr.No.	Authors	Title	Journal	Volume : Issue ; Page Numbers	Impact Factor	Year
1	NA	NA	NA	0	0	2025

Consultancy Service

Sr.No.	Name of the Individual/Industry	Name of the Institution/Industry	Title of the work	Duration	Amount Received	Year
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1 NA NA NA 0 ₹0.00 2

Patents

Sr.No.		Filed (Provide Patent Application Number)	,	,	
1	NA	NA NA	Innovation	NA	NA

Workshops Conducted

Sr.No	Type of Activity	Title of the Event	Duration(in days)	Number of Participants	Date	Workshops Conducted Image
1	Workshop	NA	0	0	11-01-2025	View Document

Workshops Attended

1	Seminar	NA	NA	NA	11-01-2025	View Document
Sr.No.	Type of Activity	Title of the Event	Name of The Faculty	Place	Date	Workshops Conducted Image

Research Papers Presented

1	NA	NA	Workshop	₹0.00	NA	11-01- 2025	View Document
Sr.No.	Name of the Faculty/Student	Title of The paper	Name of the workshop/Seminars/Conferences	Amount Granted from Funding Agency	Place	Date	Workshops Conducted Image

Sports

Name:	GANAVA RAJNIKANT VILYAMBHAI	Qualification:	MASTER OF PHYSICAL EDUCATION, PHD
Experience (in Years):	10	Upload Degree/Experience:	View Document

Sr.No.	Activity	Activity Name	No. of Teachers Participated	No. of Students Participated	Year
1	Conducted	NA	0	0	11-01-2025

Name:	GANAVA RAJNIKANT VILYAMBHAI	Qualification:	MASTER OF PHYSICAL EDUCATION, PHD
Experience (in Years):	10	Upload Degree/Experience:	View Document

Sr.No.	Activity	Activity Name	No. of Teachers Participated	No. of Students Participated	Year
1			0	0	-

Curricular Activity

1	NA	0	11-01-2025	View Document
Sr.No.	Title of the Event	Number of Participants	Date	Workshops Conducted Image

Anti Ragging Cell

Nan	e of the Chairperson cell:	NA	No. of meeting in a year:	0	
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about:blank 11/12

No of Activities in a year (Workshop/Guest Lecture/Orientation):	0	Case reported in previous years:	No	
If yes, status of the case(Pending/Closed):	Closed	Copy of orders for having constituted the committee as per SAKSHAM Guidelines:	View Document	

Gender Sensitization Cell

Name of the Chairperson cell:	ell: NA No. of meeting in a year:		0
No of Activities in a year:	0	Case reported in previous years:	No
If yes, status of the case:	Closed	Copy of orders for having constituted the committee as per SAKSHAM Guidelines:	View Document

Anti Discrimination Cell

Name of the Chairperson of Anti discrimination cell:	NA	No. of meeting in a year:	0
Case reported in previous years:	No	If yes, status of the case:	-
Copy of the orders for having constituted the committee:	View Document		

Career Guidance Cell/ Placement Cell

Name of the Placement Officer:	NA	Mobile Number of the Placement officer:	
No. of students participated:	0	No. of the Student Placed:	0
Percentage of placement:	0	No. of Companies participated in Placement Drive:	0
Copy of the Constitution to be enclosed as Annexure:	View Document		

Information Available On Website

Dean/Principal		Affiliated university and its VC Registrar	
Results of All Examinations in previous years	No	Details of Members of Gender of Harrasment Committee Members with Contact Details including Landline ,ph.no, email etc	No
Details of Contact Available on College Website Tool	Yes	Teaching Staff	Yes
List Of Student Admitted Category wise(UG,PG) in current and previous year	No	Details of Members of Anti Ragging Committee Members with Contact Details including Landline ,ph.no, email etc	No
Toll Free Number To Report Ragging	No	Details of Email Address Available on College Website Tool	Yes

Court Case

Whether any Court Case is filed by the institution against PCI		
Affidavit:	NA	

Additional Information

Whether the deficiencies pointed in earlier IR have been rectified:	No	Affidavit Document:	NA	
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about:blank 12/12