



**OSMANIA UNIVERSITY
HYDERABAD - 500 007**

No. **326**/H/Pharm./2019-2020/Acad.IV-1
To

Dated: **23** -03-2019

**All the Secretaries/Principals of
Pharmacy Colleges Affiliated to
Osmania University.**

Sub:- Affiliated Colleges – Visit of Inspection Committee to consider grant of extension of provisional affiliation to the Pharmacy Colleges to offer various **UG and PG Pharmacy Courses** for the academic year **2019-2020** – Reg.

Sir,

With reference to the subject cited above, I am desired to inform you that the University has decided to conduct Inspection to the Colleges offering UG and PG Pharmacy Courses for the academic year 2019-2020. The Inspection Committee will be visiting the Colleges in the third week of April, 2019, for considering grant of extension of provisional affiliation to the Colleges to offer UG and PG Pharmacy Courses for the academic year 2019-2020. **Kindly note that Inspection Committee would be verifying all the requirements as per AICTE process hand book for the year 2019-2020. Hence, the Secretary/Principal of the College may ensure that the compliances must be as per AICTE norms (all the requirements shall be as per AICTE process handbook for the year 2019-2020) for the academic year 2019-2020.**

The management of the College is therefore directed to submit the filled in application form placed on the University Website with all the necessary documents as mentioned in the Annexure 'A', without fail, along with the prescribed fee of **Rs.20,000/- per each UG Pharmacy Course and Rs.25,000/- per each PG Pharmacy Course** through a Demand Draft in favour of "Registrar, Osmania University" on any nationalized bank on or before **12-04-2019** towards Inspection and Processing Fee for the academic year **2019-2020**. **The application form may be downloaded from the University website www.osmania.ac.in**

Further, it is requested to keep **all the records in Original ready as mentioned in Annexure 'A'** for verification by the Inspection Committee. It is also requested to ensure that all the teaching staff of your College be present on the day of inspection, failing which their names will not be considered as on rolls of the College.

Yours faithfully,

**DEPUTY REGISTRAR
(Academic)**

Copy to:-

- 1.The Dean, Faculty of Pharmacy. OU.
- 2.The Director, Directorate of Academic Audit, O.U.
- 3.The Director (Infrastructure), OU – with a request to place it on the official website of the University.

ANNEXURE 'A'

1. Latest compliance reports
2. List of teaching staff in the prescribed format.
3. Proceedings of OU Selection Committee for the faculty appointed.
4. a. AICTE permission / renewal for the year 2018-2019 & 2019-2020.
b. PCI permission / renewal for the year 2018-2019 & 2019-2020.
5. State Government permission for the year 2018-2019 & 2019-2020.
6. Minority Status Certificate/Letter from the competent authority.
7. Affiliation Orders of the University for the previous Year.
8. Land Documents / Building plan approvals (enclose Copies).
9. Details of accommodation - Room wise, floor wise, and course wise.
10. Staff Attendance Register, Teaching Diaries
11. Student Attendance Registers.
12. Library Accession Register – with details of books / Journals added during the last academic year.
13. Library Books Issue Register.
14. Acquaintance Register.
15. Bills / Payment receipts / Bank Statement for the purchase of Library Books and Journals and other purchases including equipment, computers, licensed Software.
16. Statement of consolidated attendance which was sent to the Examination Branch during the last academic year.
17. Valued Answer Scripts of Internal Assessment Test and statement of marks sent to the Examination Branch during the last academic year.
18. Bank Pass Book / Bank Statement of the financial transactions.
19. Enclose the report of Anti-Ragging Committee and measures taken by the College.
20. Display the college name prominently stating that the College is affiliated to Osmania University and also enclose photograph of the College building.
21. Undertaking to be submitted with regard to conduct of University Examinations.
22. Fire Safety Certificate/ Sanitary Certification from the Competent Authority.
23. Implementation of Biometric Attendance, CCTV to be installed within the premises of the Institution and Barrier free built environment to be provided.



**OSMANIA UNIVERSITY
HYDERABAD-500 007**

APPLICATION FOR THE GRANT OF EXTENSION OF PROVISIONAL AFFILIATION TO
OFFER B.PHARMACY/M.PHARMACY / PHARM D. AND PHARM D. (PB) COURSES FOR
THE ACADEMIC YEAR 2019-2020

Date of Inspection: _____ Course: _____

Inspection Fee: D.D. No: _____ Date: _____ Amount Rs: _____

| | | | | |
|----|--|----------------------|----------------------------|-------------------|
| 1. | Name of the College with postal address Landline: Mobile : E-mail ID: Website: | | | |
| 2 | Name of the Society/ Registration No. & Address with Phone Nos. E-mail ID: | | | |
| 3. | Name of the Secretary / Correspondent with Telephone No. | | | |
| 4 | a) Name of the Principal | | | |
| | b) Qualifications & Date of Birth | | | |
| | c) Whether appointed through OU Selection Committee. | | | |
| | Mobile : E-mail ID: | | | |
| 5 | Nature of accommodation (Ownership/Lease deed) | Document Nos. Own | | |
| 6 | Land Area Details | Actual Land Area | Expected Land Area | |
| | | | | |
| 7 | Year of Establishment | | | |
| 8 | UG Courses run by the College: | S. No. | Courses | Sanctioned Intake |
| | | 1 | B.Pharmacy | |
| | | 2 | Pharm D | |
| | | | | |
| 9 | PG Courses (with specialization) run by the College | 1 | M.Pharmacy(specialisation) | |
| | | 2 | Pharm D (PB) | |
| | | 3 | | |
| | | | | |

Note: All the requirements shall be as per AICTE process handbook for the year 2019-2020

| | | | |
|-----|---|---|--|
| 10. | a.AICTE permission letter No. &Date:for the year 2018-2019 & 2019-2020 b.PCI permission letter No. &Date:for the year 2018-2019 & 2019-2020 c.Is the college recognized as Research Centre by OU. If Yes, enclose the permission letter of the OU., showing the period of Recognition. | Yes/No | |
| 11. | State Govt. G.O. No. & Date for the year 2018-2019 & 2019-2020 | | |
| 12. | OU Affiliation Order No. & Date for the year 2018-2019 | | |
| 13. | i) Whether any other Institutions/Colleges are running in the same premises, ii) If Yes, whether permission from AICTE/ PCI is obtained. | Yes/No Yes/No | |
| 14. | Status of the College (In case of MinorityCollege, latest Minority Certificate issued by the competent authority to be enclosed) | Minority/Non Minority Co-Education / Women | |
| 15. | Name of the University nominee on the Governing Body with period from_____to _____, along with Letter no. & date (Enclose copy) | | |
| 16. | Name of the University Nominee on the Selection Committee with period from_____ to_____ along with Letter no. & date (Enclose copy) | | |
| 17. | Number of Governing Body Meetings convened during the academic year 2018-2019 with University nominees | | |
| 18. | Working Hours of the College | | |
| 19. | Work load statement Department-wise, Teacher-wise (to be enclosed) | | |
| 20. | Block time table for the course showing (i) Room No, (ii) Name of the Class (iii) Name of the Teacher in each period (to be enclosed), | | |
| 21. | Whether revised pay scales of VI Pay Commission are paid to the staff. | Yes / No | |
| 22. | Details of salary paid. Acquaintance Register to be produced. Enclose bank statement. | Maximum salary / Minimum salary paid | |
| | | Paid through Cheque:Name of the Bank and Branch | |

SUMMARY OF TOTAL INFORMATION

| | | | | | | | | | |
|--------------------------------|----------------------------------|--------|---------|----------|---------|--------|---------|---------|----------|
| Student's strength: | | | | | | | | | |
| No. of students on rolls | | Isem | II sem | III sem | VI sem | V sem | VI sem | VII sem | VIII sem |
| UG Course | B.Pharmacy | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Total | | | | | | | | |
| No. of students on rolls | | | | | | I Year | | II Year | |
| | | | | | | I sem | II sem | III sem | VI sem |
| PG Courses with specialization | M.Pharmacy (Pharma Chemistry) | | | | | | | | |
| | M.Pharmacy (Pharmaceutics) | | | | | | | | |
| | M.Pharmacy (Pharmacology) | | | | | | | | |
| | M.Pharmacy (Pharma Analysis) | | | | | | | | |
| | M.Pharmacy (Pharmacognosy) | | | | | | | | |
| | M.Pharmacy (Industrial Pharmacy) | | | | | | | | |
| | | | | | | | | | |
| | Pharm D (PB) | | | | | | | | |
| | | | | | | | | | |
| | Total | | | | | | | | |
| | | | | | | | | | |
| | Pharm D | I Year | II Year | III Year | IV Year | V Year | VI Year | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| Name of the Course | Sanctioned intake for first year | First Year students admitted under | | |
|---|----------------------------------|------------------------------------|------------------|------------------------|
| | | Convener Quota | Management Quota | Minority (SW-II / III) |
| | | | | |
| | | | | |
| Principal: | | | | |
| a) Name, Qualifications and Date of Birth | | | | |
| b) Whether appointed through OU Selection Committee | | | Yes / No | |

| Faculty Details: (Specify Regular/Adhoc) | | | | | | |
|---|----------------------------|------------|------------|---------|--------------|-------|
| S.No | Department/ Designation | B.Pharmacy | M.Pharmacy | Pharm D | Pharm D (PB) | Total |
| 1 | Professors | | | | | |
| 2 | Assoc. Prof. | | | | | |
| 3 | Asst. Prof. | | | | | |
| | Total: | | | | | |

| Non-Teaching Staff: For all the Courses | | | | | | | | | |
|---|--------------|-----------|------------|------------|-------------|--------------|-------------|--------------|-------|
| S.No | Course. | Lab Asst. | Drafts man | Tech. Gr-I | Tech. Gr-II | Comp. Opert. | Program mer | Lab Attn dt. | Total |
| 1 | B.Pharmacy | | | | | | | | |
| 2 | M.Pharmacy | | | | | | | | |
| 3 | Pharm D | | | | | | | | |
| 4 | Pharm D (PB) | | | | | | | | |
| | Total | | | | | | | | |

LIBRARY:

Total Area (in Sq.ft):meter square or sqm.;FSI : Total built up area/Total Land area

Library Facilities:

| Type | Number/Quantity |
|--|-----------------|
| Volumes | |
| Titles | |
| National Journals | |
| International Journals | |
| Library management software | |
| Reading Room capacity | |
| Multimedia PC's | |
| E-Journals | |
| Delnet Membership Details | |
| Membership of National Digital Library | |
| Total Amount Spent on Books during the year 2018-2019, along with details of no. of Titles and volumes | |
| Total Amount Spent on Journals during the year 2018-2019, along with details of no. of National & International Journals | |
| Whether qualified librarian appointed; if so, mention name and qualification. | |

Computational Facilities: (Please refer to the AICTE process handbook for the year 2019-2020) UG-1:6 and PG 1:4)

| Type | Number / Quantity |
|--|-------------------|
| Desktops | |
| Server Machines | |
| Licensed software | |
| Network components (LAN / WAN) | |
| Internet Bandwidth / Wi Fi Not less than 82 Mbps | |
| Printers / Other equipment 5% of Computers | |
| Arrangement for NPTEL/SWAYAM etc., shall be made available | |

| Instructional Area: | | | | | |
|--------------------------------------|------------|------------|---------|--------------|-------|
| Particulars | B.Pharmacy | M.Pharmacy | Pharm D | Pharm D (PB) | Total |
| Class Rooms | | | | | |
| Tutorial Rooms | | | | | |
| Drawing Hall | | | | | |
| Staff Rooms | | | | | |
| Laboratories | | | | | |
| Workshop | | | | | |
| Computer Center | | | | | |
| Library & Reading Room | | | | | |
| Seminar Hall | | | | | |
| | | | | | |
| Total No. of UG Class/Tutorial Rooms | | | | | |
| Total No. of PG Class/Tutorial Rooms | | | | | |

| | |
|---|---------------------------|
| Administrative Area: | |
| Particulars | Area (in Sq.m) |
| Principal Office | |
| Administrative Office | |
| Exams Control Office | |
| Placement Office | |
| Central Store | |
| Maintenance | |
| Security | |
| Amenities: | |
| Particulars | Available / Not available |
| Boys Common Room | |
| Girls Common Room | |
| Cafeteria | |
| Backup Electric Supply / Generator | |
| Safety provisions including fire and other calamities | |
| Transport facility | |
| Parking area | |
| Drinking water facility | |
| Separate toilets for Boys and Girls | |
| First aid cum sick Room | |
| Display of Courses and approved intake at the entrance of the College. | |
| Barrier Free Built Environment | |
| Biometric System of Attendance for students & Staff | |
| CCTV installation in appropriate locations within the premises of the institution | |

| Results Analysis (Year wise- Pass Percentage 2018-2019) | | | | | | | | |
|---|--------|---------|----------|---------|--------|--------|---------|----------|
| UG Course B.Pharmacy | I Sem | II Sem | IIISem | VI Sem | V Sem | VI Sem | VII Sem | VIII Sem |
| | | | | | | | | |
| PG Course(s) with specialization (I year / II year) | | | | | I Sem | II Sem | IIISem | VI Sem |
| M.Pharmacy (Pharma Chemistry) | | | | | | | | |
| M.Pharmacy (Pharmaceutics) | | | | | | | | |
| M.Pharmacy (Pharmacology) | | | | | | | | |
| M.Pharmacy (Pharma Analysis) | | | | | | | | |
| M.Pharmacy (Pharmacognosy) | | | | | | | | |
| Pharm D (PB) | | | | | | | | |
| | | | | | | | | |
| Pharm D | I Year | II Year | III Year | IV Year | V Year | | VI Year | |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |

| | | |
|---|-----|----|
| Whether any remedial classes were conducted for weak students | Yes | No |
|---|-----|----|

| | |
|---|------------------------|
| Placements: During the Academic Years 2017-2019 | |
| Name of the Company | No. of Students Placed |
| | |
| | |
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| Whether Physical Director appointed, if so, Mention name and qualifications | |
| | |
| Details of Games & Sports and other curricular activities | |
| | |
| | |
| Anti Ragging | |
| 1. Whether the College appointed Anti-Ragging Committee, if so, copy of the constitution of committee and its members to be enclosed. 2. Report of the Anti-Ragging Committee for the year 2018-2019 be enclosed. 3. Measures taken by the College to prevent ragging. | |
| | |
| | |
| RTI Act | |
| Whether the college has appointed PIO and APIO. Mention the names of the PIO and APIO. (Enclose Copy) | |
| | |
| Women Protection Cell/Internal Complaints Committee | |
| Whether the college has appointed Women Protection Cell. (Enclose copy) | |
| | |
| Redressel Grievances Committee | |
| Whether the college has appointed Redressel Grievance Committee. (Enclose copy) | |
| | |
| Any other Information: | |
| | |

Note: All the requirements shall be as per AICTE process handbook for theyear 2019-2020

Signature:
Secretary /Correspondent
Name:

Signature of the Principal
Name:

Date:

.....

B.Pharmacy/Pharm D

Course Details:

| | | |
|----|-------------------------------|--|
| a) | Course – B.Pharmacy / Pharm D | |
| b) | Year of Starting | |
| c) | Sanctioned Intake | |

Actual strength of students' year wise:

| No. of Students on rolls | I year | II year | III year | IV year | V year | VI year |
|--------------------------|--------|---------|----------|---------|--------|---------|
| B.Pharmacy / Pharm D | | | | | | |
| | | | | | | |

Faculty Details:

Faculty required: 1:15 (Teacher Student Ratio)

Cadre Ratio 1:2:6 (Professor : Associate Professors : Assistant Professor)

(of which, a minimum of 80% should be regular/full time faculty and the remaining may be adjunct faculty / resource persons from industry).

| Designation | Required (As per norms) | Available | | Total Available |
|----------------------|----------------------------|--------------|--------|-----------------|
| | | OU Selection | Ad-hoc | |
| Principal | | | | |
| Professors | | | | |
| Associate Professors | | | | |
| Assistant Professors | | | | |
| Total: | | | | |

Non-Teaching staff:

| Department | Lab. Asst. | Programmers | Lab. Attenders | Total | Required | Deficiency |
|------------|------------|-------------|----------------|-------|----------|------------|
| B.Pharmacy | | | | | | |
| | | | | | | |

Accommodation Details:

| Particulars | Number | Area (Sq.m) of each |
|-----------------------------|--------|---------------------|
| Class Rooms | | |
| Tutorial rooms | | |
| Laboratories | | |
| Work Shop / Computer Centre | | |
| Staff Rooms | | |
| Dept. Library (if any) | | |
| | | |

Note: All the requirements shall be as per AICTE process handbook for theyear 2019-2020

| List of Laboratories: | | | | | |
|--|------------------------|--------------------------------|------------------------|---|---------------|
| S.No. | Name of the Laboratory | Area (in Sq.m) | Equipment available | Lab. class conducted (as per syllabus) | Batch Size |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| | | | | | |
| | | | | | |
| Computational Facilities: (Please refer the AICTE process handbook for theyear 2019-2020)UG-1:6 | | | | | |
| Item | | Description (configuration) | | Quantity | |
| Desktops | | | | | |
| Server Machines | | | | | |
| Licensed software | | | | | |
| Network components (LAN / WAN) | | | | | |
| Internet Bandwidth | | | | | |
| Printers / Other equipment | | | | | |
| | | | | | |
| Seminars/Conferences/Workshop Organized/Attended by the faculty of the Dept. | | | | | |
| S.No. | Particulars | Organized | | Attended | |
| 1 | Seminars | | | | |
| 2 | Conferences | | | | |
| 3 | Workshops | | | | |
| 4 | | | | | |
| Total | | | | | |

Note: All the requirements shall be as per AICTE process handbook for
theyear 2019-2020

Date:

Secretary/Principal
Signature

.....

M.Pharmacy/Pharma D (PB) Courses

Course Details:

| | | |
|----|--------------------------|--|
| a) | M.Pharmacy/Pharma D (PB) | |
| b) | Year of Starting | |
| c) | Sanctioned Intake | |

Actual strength of students' year wise:

| No. of Students on rolls | I year | | II year | |
|--------------------------|--------|--------|---------|--------|
| | I sem | II sem | III sem | VI sem |
| M.Pharmacy/Pharma D (PB) | | | | |

Faculty Details:

Faculty required 1:10 (Teacher Student Ratio)

Cadre Ratio 1:2 (Professor : Associate Professor/Asst.Professor)

(of which, a minimum of 80% should be regular/full time faculty and the remaining may be adjunct faculty / resource persons from industry).

| Designation | Required (As per norms) | Available | | Total Available |
|----------------------|----------------------------|--------------|--------|-----------------|
| | | OU Selection | Ad-hoc | |
| Principal | | | | |
| Professors | | | | |
| Associate Professors | | | | |
| Assistant Professors | | | | |
| Total: | | | | |

Non-Teaching staff:

| Department | Lab. Asst. | Programmers | Lab. Attenders | Total | Required | Deficiency |
|-------------------------|------------|-------------|----------------|-------|----------|------------|
| M.Pharmacy/Pharma D PB) | | | | | | |
| | | | | | | |

Accommodation Details:

| Particulars | Number | Area (Sq.m) of each |
|------------------|--------|---------------------|
| Class Rooms | | |
| Tutorial rooms | | |
| Laboratories | | |
| Seminar Hall | | |
| Staff Rooms | | |
| Dept. of Library | | |
| | | |

Note: All the requirements shall be as per AICTE process handbook for theyear 2019-2020

| List of Laboratories: | | | | | |
|-----------------------|------------------------|-------------------|------------------------|---|---------------|
| S.No. | Name of the Laboratory | Area (in Sq.m) | Equipment available | Lab. class conducted (as per syllabus) | Batch Size |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| | | | | | |
| | | | | | |

| Computational Facilities: (Please refer the AICTE process handbook for theyear 2019-2020) PG-1:4 | | |
|---|--------------------------------|----------|
| Item | Description (configuration) | Quantity |
| Desktops | | |
| Server Machines | | |
| Licensed software | | |
| Network components (LAN / WAN) | | |
| Internet Bandwidth | | |
| Printers / Other equipment | | |
| | | |

| Seminars/Conferences/Workshop Organized/Attended by the faculty of the Dept. | | | |
|--|-------------|-----------|----------|
| S.No. | Particulars | Organized | Attended |
| 1 | Seminars | | |
| 2 | Conferences | | |
| 3 | Workshops | | |
| 4 | | | |
| Total | | | |

Note: All the requirements shall be as per AICTE process handbook for theyear 2019-2020

Date:

.....

Secretary/Principal
Signature