PHARMACY COUNCIL OF INDIA
(Constituted under the Pharmacy Act, 1948)

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Maa Anandamai Marg
Okhla Phase I
NEW DELHI – 110 020

Circular


To

All Examining Authorities conducting Diploma Course in Pharmacy

Sub: Nominee of State Pharmacy Council in the Examining Committee of Examining Authority of D.Pharm course.

Sir/Madam,

This is in reference to the subject cited above. In this connection it is stated that-

a) D.Pharm course for the purpose of registration as a pharmacist is regulated by the statutory provisions of Education Regulations framed u/s 10 of the Pharmacy Act, 1948.

b) Currently Education Regulations, 2020 is in vogue. The same is available on Council’s website www.pci.nic.in

c) As per regulation 16 of the said Regulations, the examinations mentioned in regulations 9 to 15 shall be held by an authority (hereinafter referred to as the Examining Authority) in a State, which shall be approved by the Pharmacy Council of India under sub-section (2) of section 12 of the Pharmacy Act, 1948. Such approval shall be granted only if the Examining Authority concerned fulfills the conditions as specified in Appendix-B to these regulations.

d) Appendix-B of Regulations prescribes the conditions to be fulfilled by the Examining Authorities. The said Appendix-B is enclosed as Annexure-I for ready reference.

- Sub regulation 7 of the enclosed Appendix B stipulates as under –

  The Chairman and at least one expert member of Examining Committee of the Examining Authority concerned with appointment of examiners and conduct of pharmacy examinations should be persons possessing pharmacy qualifications.

- The PCI has prescribed an application proforma filled “Format for approval of the Examining Authority u/s 12(2) of the Pharmacy Act” for the providing the information to PCI by the examining authorities in this regard and is available on Council’s website under the schemes. A copy of the same is enclosed as Annexure-II.
e) The subject cited matter was considered by the 111 CC of the PCI in its meeting held on April, 2021 which decided to recommend to have one nominee of State Pharmacy Council in the Examining Committee of State Examining Authority of D.Pharm course.

In view of above it requested to include a nominee of the State Pharmacy Council in the examining committee of State Examining Authorities of D.Pharm Course. This will help in sharing of the policies of PCI and examining authorities thus enabling to have better coordination. Your kind support is solicited in the matter.

Yours faithfully

(ARCHNA MUDGAL)
Registrar-cum-Secretary
Annexure-I

Appendix-B
(See regulation 16)

Conditions to be fulfilled by the Examining Authority

1. The Examining Authority shall be either a statutory Indian University or a body constituted by the Central or State Government. It shall ensure that discipline and decorum of the examinations are strictly observed at the examination centers.

2. It shall permit the Inspector or Inspectors of the Pharmacy Council of India to visit and inspect the examinations.

3. It shall provide:-
   (a) adequate rooms with necessary furniture for holding written examinations;
   (b) well-equipped laboratories for holding practical examinations;
   (c) an adequate number of qualified and responsible examiners and staff to conduct and invigilate the examination; and
   (d) such other facilities as may be necessary for efficient and proper conduct of examinations.

4. It shall, if so required by a candidate, furnish the statement of marks secured by a candidate in the examinations after payment of prescribed fee, if any, to the Examining Authority.

5. It shall appoint examiners whose qualifications should be similar to those of the teachers in the respective subjects as shown in Appendix-A.

6. In pursuance of sub-section (3) of section 12 of the Pharmacy Act, 1948, the Examining Authority shall communicate to the Secretary, Pharmacy Council of India not less than six weeks in advance the dates fixed for examinations, the time-table for such examinations, so as to enable the Council to arrange for inspection of the examinations.

7. The Chairman and at least one expert member of Examining Committee of the Examining Authority concerned with appointment of examiners and conduct of pharmacy examinations should be persons possessing pharmacy qualifications.
Annexure-II

Format for approval of the Examining Authority u/s 12(2) of the Pharmacy Act

(As approved by 73rd Central Council (Sept., 2004) under Item No.143)

Details of Examining Authority

A) Name of the Examining Authority with complete Postal Address

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
STD Code __________________________
Telephone __________________________
Fax No. ____________________________
E-Mail ____________________________

B) Name, Designation and Address of Vice Chancellor/Registrar

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
STD Code __________________________
Telephone __________________________
Office ______________________________
Residence __________________________
Fax No. ____________________________
E-Mail ____________________________

C) Whether the Examining Authority is

- Statutory Indian University Yes/No
- Body constituted by the Central or State Government Central Govt./State Govt.
D) Name of the Pharmacy institutions affiliated to Examining Authority.

For D.Pharm course

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(If the number is more, please enclose the details as Appendix-I)

For B.Pharm course

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(If the number is more, please enclose the details as Appendix-II)
For M.Pharm course

(Fif the number is more, please enclose the details as Appendix-III)

For Pharm.D and Pharm.D (PB) course

(Fif the number is more, please enclose the details as Appendix-IV)
E) Details of Examining Committee of Examining Authority -

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name of Chairman (Pharmacy qualified persons) and Expert Member (Pharmacy qualified persons) of Examining Committee</th>
<th>Details of Employment</th>
<th>Signature</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Name of Inst. where presently employed</td>
<td>Designation</td>
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<td></td>
<td><strong>Chairman:</strong></td>
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<td><strong>Expert Member:</strong></td>
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</tbody>
</table>
F) Norms for appointment of Examiners for Pharmacy Examination (Both Theory & Practicals) be enclosed.

G) DETAILS OF EXAMINATION CENTRES APPROVED BY THE EXAMINING AUTHORITY.

i) Please enclose List of Examination Centres approved by the Examining Authority for conduct of D.Pharm examination (*Appendix-VI*).

ii) Please enclose List of Examination Centres approved by the Examining Authority for conduct of B.Pharm examination (*Appendix-VII*).

iii) Whether following facilities are provided in the Examinining Centres -

   a) adequate rooms with necessary furniture for holding written examinations. 
   b) Well equipped laboratories for holding practical exams.

   please enclose details as *Appendix-VIII*

   please enclose details as *Appendix-IX*

H. UNDERTAKING BY THE EXAMINING AUTHORITY TO FOLLOWING EFFECT:

- It shall permit the Inspector or Inspectors of the Pharmacy Council of India to visit and inspect the examinations.

- It shall, if so required by a candidate, furnish the statement of marks secured by a candidate in the examinations after payment of prescribed fee, if any, to the Examining Authority.

- In pursuance of sub-section (3) of section 12 of the Pharmacy Act, 1948, the Examining Authority shall communicate to the Secretary, Pharmacy Council of India not less than six weeks in advance the dates fixed for examinations, the time-table for such examinations, so as to enable the Council to arrange for inspection of the examinations.

Name of the Registrar________________________
(In Capital Letters)

Signature________________________
with date

Seal of __________________________
the University