Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra, 2F,12B recognition by UGC, Affiliated to Savitribai Phule Pune University Accredited by NAAC with A Grade

2018-19

3.1.1 – Research funds sanctioned and received from various agencies, industry and other organisations during 2018-19

Total fund received= 24.7 Lakh

3.1.1 Research funds sanctioned and received from various agencies, industry and other organisations					
Nature of the Project	Duration	Name of the funding Agency	Total grant sanctioned	Amount received during the Academic year	
Major projects	03 Years	All India Council for technical Education, New Delhi	2317647	2317647	
Minor Projects				-	
Interdisciplinary					
Projects					
Industry sponsored	3 months	Indus Biotech Pune	39000.00	39000.00	
Projects					
Projects sponsored by	3 months	Separate list attached	56800.00	56800.00	
the University/ College					
Students Research	3 months	Separate list attached	56420.00	56420.00	
Projects					
(other than compulsory					
by the College)					
International Projects					
		Total Funds (Rs.)	2469867.00	2469867.00	

Summary

Major research Project

Name of the Project/ Endowments, Chairs	Name of the Principal Investigator/Co- investivator	Department of Principal Investigator	Year of Award	Amount Sanctioned	Duration of the project	Name of the Funding Agency	Type (Government/non- Government)
Lipid Nanoparticles for Oral			2017-18	2317647.00	03 Years	Research	,
Targeted Drug Delivery of						Promotion Scheme	
Disease Modifying Anti						All India Council	
Rheumatoid						for technical	
Phytopharmaceuticals						Education, New	
	Dr Mangesh Bhalekar	Pharmaceutics				Delhi.	Government
		Total fund	received=	2317647.00			
Industry Sponsored Research P	<mark>rojects</mark>					1	
Development of moisture						Indus Biotech Private	
protective coating for herbal tablet	Dr Mangesh Bhalekar	Pharmaceutics	2018-19	39000.00	03 Month	Ltd.	Non-Government
		Total fund recei	ived (Rs.) =	39000.00			
Outside Research Projects							
Pharmacological screening of 2							
amino 4 arylsubstituted phenyl							
quinoxaline derivatives for						Sharda	
possible anti-inflammatory						Mahavidyalaya,	
properties	Dr. S. V. Tembhurne	Pharmacology	2018-19	16800	03 Month	Parbhani	Non-Government

Pharmacokinetic							
biodistribution and toxicity							
studies of nanoparticulates							
containing anticancer						Dhairyasheel	
formulation	Dr S V Tembhurne	Pharmacology	2018-19	40000	03 Month	Ghadge	Non-Government
		Total Fun	ding (Rs.)=	56800.00			

In-house Project Funding

Name of the Project/ Endowments, Chairs	Name of the Principal Investigator/Co- investigator	Department of Principal Investigator	Year of Award	Amount Sanctioned	Duration of the project	Name of the Funding Agency	Type (Government/n on- Government)
Development and validation of HPTLC method for estimation of Etravirine	Dr. MC Damle	Quality Assurance	2018-19	5100.00	03 Months	Pranav Uttekar	Non- Government
Preparation of Mouth dissolving tablet of BCS II drug	Dr. MR Bhalekar	Pharmaceutics	2018-19	4500.00	03 Months	Dnyanada Bathe, SiddhantBhalerao	Non- Government
Development and validation of spectrophotometric method for determination of Pharmaceuticals	Dr. SV Gandhi	Quality Assurance	2018-19	6000.00	03 Months	Bhagyashree Patil, Shruti Khandave, Mayuri Pansare, Nishant Kolhe,	Non- Government
Spectrophotometric method development and validation of for the estimation of Pharmaceuticals	Dr. SV Gandhi	Quality Assurance	2018-19	6000.00	03 Months	Neha Sali, Shivam Jaiswal, Vipul Fegade, Vinod Gaikwad	Non- Government

Formulation and evaluation	Mrs.AmrutaAvalas	Pharmacognosy		4200.00		Abhishek Joshi, Mahesh	
of Herbal hard candy for	kar		2018-19			Aher, AvhadUttkarsha,	3 . T
Antitussive activity	1101				03 Months	Gaurav Mahajan	Non-
B 1 1		2 11		7500.00		37.1 75.1 4:1	Government
Development and		Quality		7500.00		Neha Raka, Aishwarya	
Validation of HPTLC	Dr. MC Damle	Assurance	2018-19			Pawar, Pratiksha Undre,	
method for Hesperidine	Di. Wie Duime		2010 19			AkanskhaMarkad,	
					03 Months	Divya Mehta	Non-
							Government
Evaluation of different		Pharmaceutics		4620.00		Rohom Saurabh,	
polymers with respect to	Dr. MR Bhalekar		2018-19			Ashwini Deokar,	
Donnon membrane effect					03 Months	RiddhiWarhal	Non-
							Government
Application of Pastillation		Pharmaceutics		4500.00		Atharva Kulkarni,	
to improve dissolution of	Dr. MR Bhalekar		2019-20			Brinda Nadar, Ria	
drug					03 Months	Kesar, Omkar More	Non-
							Government
Development of Analytical		Quality		7500.00		Harshada Vanave, Pooja	
method for drugs used in	Dr. MC Damle	Assurance	2018-19			Auti, AshleshaWavhal,	
the treatment of Hepatitis C	Dr. We Danne		2010-17			AnkitaBulani,	
					03 Months	VrushalDhengale	Non-
							Government
Development of Analytical		Quality		6500.00		Aishwarya Mate, Pranav	
method for combination of	Dr. MC Damle	Assurance	2018-19			Uttekar, Akshay	
drugsfor Hepatitis treatment					03 Months	Punmiya	Non-
_							Government
Total Fund (Rs.)=				56420.00			

RECEIPT & PAYMENT ACCOUNT

(For Year 2017-18)

Sl.No.	Receipt	Amount (Rs.)	Sr. No.		Amoun t (Rs.)
1.	To Opening Balance	00	1	By Nonrecurring Expenses	1941879.00
2.	To Grants Received by AICTE	2317647.00	2	By Recurring Expenses	
3.	To Interest Income (if any)	39114.00	i)	By Chemicals	59331.00
	-		ii)	By Contingency	103.00
				By Refund – DD NO.208011	58121.00
			- 3	By Refund- DD NO. 208012	3506.00
				By Net Balance With College	293821.00
	GrandTotal	2356761.00		Grand Total	2356761.00

(Signature of Chartered Accountant)

FOR R. P. MUTHA & ASSOCIATES CHARTERED ACCOUNTANTS

RAKESH P. MUTHA PARTNER M. NO. 118465

11 0 JAN 2023

Pune & Age of FRM-128084W as a standard Accountains

UPIN: 23118465BGXTZQ5898.

(Signature of Head of the Institute)

Name : Dr. Ashwini Madgulkar

Designation: Principal, AISSMS College

Full Address: All India Shri

ShivajiMemorialSociety's CollegePharmacy,

Kennedy Road,

Near RTO, Pune-411001

ALL INDIA COUNCIL FOR TECHNICAL EDUCATION

Nelson Mandela Marg, Vasant Kunj, New Delhi-110067,

Ref. No.: File No. 8-84/RIFD/RPS/POLICY-1/2016-17

Date: 4 August 2017

The Drawing and Disbursing Officer All India Council for Technical Education Nelson Mandela Marg, Vasant Kunj, New Delhi-110067,

Release of a sum of Rs.2317647/- being the 1st installment of the total grant of Rs.2352941/for conduct of Project under Research Promotion Scheme (RPS) during the financial year 2017-

Sir,

With reference to the Proposal submitted by the Institute, this is to convey the sanction of the Council for payment of Rs.2317647/-(Rupees Twenty Three Lakh Seventeen Thousand Six Hundred Forty Seven) as 1st installment out of a total approved grant-in-aid of Rs.2352941/- for conduct of a Project under the Research Promotion Scheme (RPS), as per details given below:-

Name of the Beneficiary Institution (University / College / Institution)

AISSMS COLLEGE OF PHARMACY KENNEDY ROAD, NEAR R.T.O., PUNE, MAHARASHTRA-411001

Principal Investigator's Name & : Dept./Course

Dr. MANGESH BHALEKAR PHARMACY

Rs.2352941/- (Rs. 2000000)- for non-recurring and

Rs.352941/- for recurring expenditure)

Amount to be Released during the year 2017-18

Grant-in-aid Sanctioned

Rs.2317647/- (Full amount of non recurring & 90 % of

recurring sanctioned)

Duration

111.

3 Years

VI. Title of the Project LIPID NANOPARTICLES FOR ORAL TARGETED DRUG DELIVERY OF DISEASE MODIFYING ANTI RHEUMATOID PHYTOPHARMACEUTICALS

- The sanctioned grant-in-aid is debitable to the major "601.1[a] (RPS)" Gen. and is valid for Payment during the financial year 2017-18.
- The grant-in-aid of the grant shall be drawn by the Drawing and Disbursing Officer (DDO), All India Council for Technical Education, New Delhi on the Grants-in-aid bill and shall be disbursed to and credited to the account of AISSMS COLLEGE OF PHARMACY, KENNEDY ROAD, NEAR R.T.O., PUNE, MAHARASHTRA-411001 through RTGS.
- The date of release of the grant by AICTE shall be taken as the date of commencement of the project. The Principal/Director/Registrar shall intimate about the receipt of the grant to AICTE. Any Expenditure, incurred prior to issuance of this Sanction Order, is not allowed to be adjusted in the grant and if the University/Institution do not take the project work within 6 months of the receipt of the grant, approval shall ipso facto lapse.

Contd...2/-

Documents to be submitted within two month of completion of the Project,

- The consolidated Utilization Certificate (UC), duly audited.
- Duly audited statement of expenditure, to the effect that the grant has been utilized for the purpose
 for which it has been sanctioned. It should contain the head-wise break up of expenditure made from
 the grant-in-aid provided by the Council.
- · Project Completion Report duly signed & stamped by the PI & Head of the institution.

Any deviation from the above said time schedule will cause serious action against the institute.

- The grantee shall follow the terms and conditions of Research Promotion Scheme (RPS) as laid down by the Council from time to time.
- The Grantee shall fully implement to the Official Language policy of Union Government and comply with the official language Act, 1963 and official language (use of official purposes of the Union Rules, 1976 etc.)
- The funds to the extent are available under the Scheme.
- The sanction issues in exercise of the powers delegated to the Council. It is also certified that grant-inaid is being released in conformity with the rules and principles of the Scheme.
- 17. The budget allowed cannot be utilized for hiring temporary or permanent staff for the Project.
- 18. It should be ensured that no RPS project in favour of the same P.I. has been sanctioned during the last 03 years before utilizing this amount and the matter be brought to the notice of this Council immediately.
- The institute should strictly observe all the terms & conditions contain in the Scheme details under AICTE AQIS 2016-17.

- l

(Dileep N. Malkhede) Advisor (RIFD)

Note: The prescribed formats and Terms & Conditions are available in the application brochure.

Copy forwarded for information and necessary action to:

- 1 Principal/Director/Registrar, AISSMS COLLEGE OF PHARMACY, KENNEDY ROAD, NEAR R.T.O., PUNE, MAHARASHTRA-411001
- 2. Dr. MANGESH BHALEKAR, DEPT. OF PHARMACY, AISSMS COLLEGE OF PHARMACY, KENNEDY ROAD, NEAR R.T.O., PUNE, MAHARASHTRA-411001
- OFFICE OF DIRECTOR GENERAL OF AUDIT GENERAL REVENUES, AGCR BUILDING LP. STATE, NEW DELHI-110002.
- 4. Guard File

ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S

COLLEGE OF PHARMACY (B. PHARM.)

KENNEDY ROAD, NEAR R. T.O, PUNE -411 001.

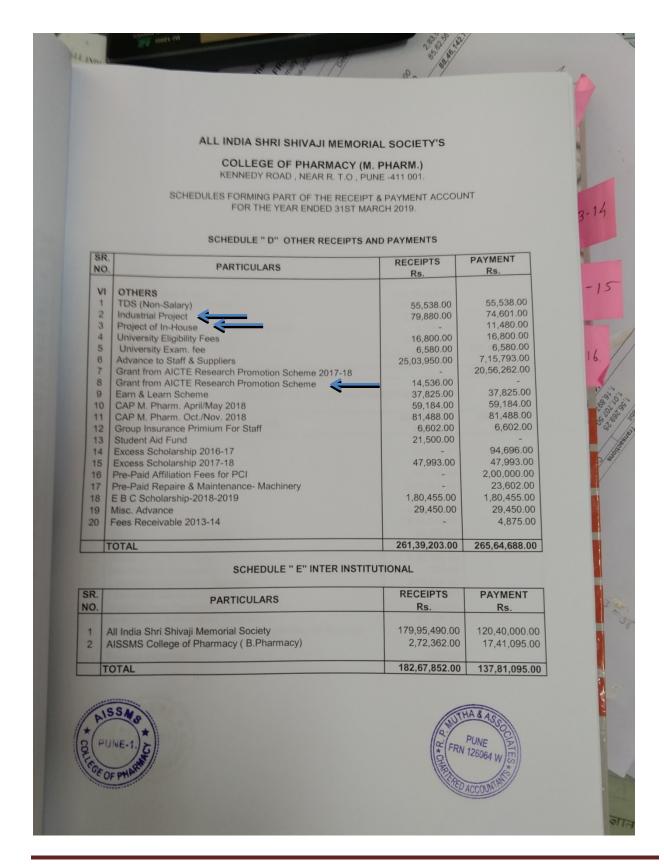
SCHEDULE FORMING PART OF THE RECEIPT & PAYMENT ACCOUNT FOR THE YEAR ENDED OF 31ST MARCH 2019.

SCHEDULE "D" OTHER RECEIPTS AND PAYMENTS

SR.		RECEIPTS Rs.	PAYMENT Rs.
110.	- Transcond		
C	FOR 2018-2019		. 70 700 50
1	O B C Freeship 2018-19	4,78,730.50	4,78,730.50
2	O B C Scholarship 2018-2019	3,72,096.50	3,72,096.50
3	S B C Freeship 2018-2019	91,945.50	91,945.50
4	S C Freeship 2018-2019	1,60,027.00	1,60,027.00
5	S C Scholarship 2018-2019	4,70,049.50	4,70,049.50
6	ST Scholarship 2018-2019	46,425.00	46,425.00
7	V J N T Freeship 2018-2019	3,32,826.50	3,32,826.50
8	V J N T Scholarship 2018-2019	5,63,349.00	5,63,349.00
VII	UNIVERSITY RESEARCH PROJECT	0.000,000,000	5.30,107.77
1	Dr. Monica R.P. Rao	-	32,583.00
2	Dr. Mrinalini Chintamani Damle	31,057.00	48,622.00
3	Dr. Santosh V. Gandhi		10,000.00
4	Dr. Shashikant V. Bhandari	-	21,801.00
5	Dr. Trupti Sameer Chitre	57,997.00	92,016.00
6	Prof.Amruta Nikhil Avalaskar	62,163.00	91,129.00
7	Prof. Kalyani Dhirendra Asgaonkar	58,144.00	
8	Prof. Padmanabh B. Deshpande	_	7,485.00
9	Prof. Reshma Nilesh Mirajkar	58,568.00	
	Prof. Shital Manoj Patil	_	5,000.00
STATE OF THE PARTY OF	Prof. Swati Govardhan Narkhede	52,574.00	
/111	OTHERS		
	TDS (Non-Salary)	1 04 244 00	1.00.400.00
	In-House Project	1,94,314.00	
	Education Bank Loan	85,420.00	
	A I S H E Remuneration	36,254.00	
	Avishkar Competition 2017-18	3,500.00	
		10,000.0	0 10,000.00
	Excess Fee Received From SWDSO 2017-2018	4,664.0	0 -
7 0	CAP For Admission- 2017-18		20,050.00
100			







AISSMS

College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.:	159 A.C. No.	Date: 0 4 5 1 0 2 0	000088
Amount cre	dited on A/C No		
BANK	OF BARODA, S	Shivaiinagar, P	une - 5

BANK OF BARODA, Silivajillagai, i ulic o					
Received from Mr./Miss_	Ind	Lucs	Bioto	ch	
Performance	Sci	P 57	6+1	,	
Class				- 2019	
Particulars			Amoui	nt Rs.	

1 Interim Fee	
2) Application Form Fees	
3) Development Fees	
5) Development 1 ded	न गार्ग

- 6) Caution Money Deposit......2.7. SEP. 2018
- 9) Other Fee
- 10) Student Activity Fee.....
- 11) Insurance Fee.....
- 13)
- 14)
- 16)

Total in words Rupees Fifteen Thousand

Accept the amount as above

Deposited By

AISSMS College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

2272 792	TOTAL
Challan	No.:

BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./N	Miss Inch	ubjetuh	Perromani
Sacrus	Privade	limited	
Class	•	Vear 201 0	- 2010

Particulars	Amount Rs.
1) Interim Fee	Arma
2) Application Form Fees	
J Development Fees	-
4) Tuition Fees	
5) Misc. & University Charges	
6) Caution Money Deposit	
7) Journal Fees	
8) University / Board Eligibility Fee	
9) Other Fee Project fee	12740
10) Student Activity Fee	
11) Insurance Fee	AVI.
11) Insurance Fee	तिनगर शाखा उ v.Ciearing तो हेर हो चुकी है.
1) 2.7. AUG	2018
15)	
16) समाशाध्य	LEARING
TOTAL Rs.	127401
Total in words Rupees Tue la	hary and

Checked By

Accept the amount as above

		AISSMS	
College	of	Pharmacy	(M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 223	Date: 24 / 65 / 6 No. 0451020000000000000000000000000000000000
Amount credited on A/O BANK OF BAROL	C No.: (215 102050000000000000000000000000000000
Received from Mr./Miss_	Inchestidech Performe

_ Year 2018 - 2019

Particulars	Amount Rs.
1) Interim Fee	
2) Application Form Fees	a-1799s
3) Development Fees	
4) Tuition Fees	
5) Misc. & University Charges	
6) Caution Money Deposit	1
	1
7) Journal Fees	and the same of th
8) University / Board Eligibility Fee	1
9) Other Fee Rojed fee	
10) Student Activity Fee	<i>f</i>
11) Insurance Fee	
12) विस्त क्रिके विस्ता, शिवार	तिनगर शाखा पुणे
Late For Today आज के समारोधम केलि	Clearing\ के केर को चंकी है.
14)	1
15)	1 1
	19
16) समाशो धन/ टी	EARING
TOTAL	Rs. 12740 -
	1

Accept the amount as above

Total in words Rupees

Deposited By

AISSMS College of Pharmacy COPIPN/2018-19/55-1 Date: To. PUNE-5 Hon. Secretary All India Shri Shivaji Memorial Society, Inward No." Shivaji Nagar Pune- 411005. Subject: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, "Development of moisture protective coating for herbal tablet" under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

Thanking you

(Principal)

(Project Co-Ordinator)

(Chief Investigator)

Dr. M. R. Bhalekal

Principal ALSSMS College of Pharmacy

Pune-1

To.

The Principal,

AISSMS College of Pharmacy,

Kennedy Road, Near R.T.O.,

Pune-411001

Subject: Permission for Industry sponsored short term research project.

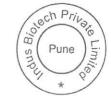
Respected Madam,

1 / We the undersigned would like to undertake a short-term self-supported research project under the guidance of Dr. Mangesh Bhalekar, Department of Pharmaceutics. The duly filled format has been enclosed for your kind information and approval.

1/ We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

urs sincerely Dr. Amit D. Kandhare Indus Biotech Pvt. Ltd.



PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A)

Name of the Industry: Indus biotech, Pirangut, Pune

Complete postal address: Indus biotech, Pirangut, Pune - 412111, Ghotawade Phata

Village Bhare Taluka Mulshi Pune

Title of Project: Development of moisture protective coating for herbal tablet

Proposed duration of Project: 03 Months

Ref. No. and date of letter through proper channel:

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Total cost of actuals.(Details are mentioned below)	11000
2	Infrastructure utility fees.(50% of actuals)	5500
3	Society processing fees. (50% of actuals)	5500
4	Staff remuneration .(same as actuals)	11000
	Grand Total	33000

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
1.	Eudragit EPO	1 Kg	2000=00
2.	Acetone	5 Lit	2000=00
3.	Isopropanol	5 Lit	1400=00
4.	PEG 6000	500g	500=00
5.	Tale	500 g	100=00
6.	Machine utilization charges		5000=00
	Grand total		11000=0

(Name and Signature of Chief Investigator)

Dr Mangesh Bhalekar

^{*} Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, **Development of moisture** protective coating for herbal tablet.

to be conducted between 10 July – 10 Oct 2018.

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)

Dr Mangesh Bhalekar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Development of moisture motechive coaring for herbal tablet!"

(Hon. Secretary, AISSMS Pune)

Hon. Secretary All India Shri Shivaji Memorial Society Pune-411 005.

POST APPROVAL DETAILS

Details of Payment: Cheque No 000011, Kotesk Mahindra Bank

Challan No. with Date:

Amount: 6370/-(50% Advance) +

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

McDambiName and signature of Project -Coordinator)

8

AISSMS College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 180	A/c.	No. 04	5 Pot 2	000	00881
------------------	------	--------	---------	-----	-------

Amount credited on A/C No.: Common in the BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss	Changadhar	B.
Gundlewad		

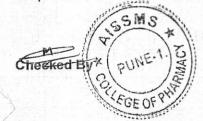
Class ______ Year 201 \$ - 2019

Particulars	Amount Rs.
1) Interim Fee	ded tolor fine bout
2) Application Form Fees	
Development Fees	
4) Tuition Fees	
5) Misc. & University Charges.	
6) Caution Money Deposit	
7) Journal Fees	
8) University / Board Eligibility Fee	
9) Other Fee	
10) Student Activity Fee	
11) Insurance Fee	
12) Project Fire	16800/
13)	
14)	
15)	
16)	romos on and ap
TOTAL Rs.	16,800/

Total in words Rupees sixteen thousand

eight hundred enly-

Accept the amount as above 16800



Deposited By

AISSMS College of Pharmacy (M.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 130c. No. 045 7020000881

Amount credited on A/C No.: One-win the BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Cangadhar B.
Gundlewad

Class _____ Year 201 & - 201 9

Particulars	Amount Rs
1) Interim Fee	a
2) Application Form Fees	
3) Development Fees	
4) Tuition Fees	
5) Misc. & University Charges	
6) Caution Money Deposit	
7) Journal Fees	
8) University / Board Eligibility Fee	
9) Other Fee	
10) Student Activity Fee	
11) Insurance Fee	
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13)	
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TOTAL Rs.	16,80
Total in words Rupees らった	thousan
Bynt hundred	

Checked By PUNE 1. CF OF PHILE

Deposited By

College of Pharmacy Inward No.

COPIPAL 2013-19/64-(4)

To,

Hon. Secretary

All India Shri Shivaji Memorial Society,

Shivaji Nagar, Pune-411005

Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, "Pharmacological Screening of 2-Amino-4-Aryl Thiazole and 2-Phenyl-7-substituted Phenyl Quinoxaline Derivatives for Possible Anti-Inflammatory Properties" under Category outside Research Project (Format B) for your approval. You are requested to do the needful at the earliest.

Inward No.

Thanking You.

(Chief Investigator)

Dr. Ashwini R. Madgulkar

(Principal) Principal AISSMS College of Pharmacy Pune-1

To, The Principal, AISSMS College of Pharmacy, Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

We the undersigned would like to undertake a short term self supported research project under the guidance of Dr. S. V. Tembhurne from Pharmacology Department. The duly filled format has been enclosed for your kind information and approval.

We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

ours sincerely

(Name and signature of Students)

Mrs. Gangaehar Gund I wad

2

PROTOCOL FOR OUT SIDE INSTITUTE RESEARCH PROJECT (Format-B)

Name of Applicant: Mr. Gangadhar B. Gundlewad

Complete postal address: Sharda Mahavidyalaya (Art & Science) Parbhani

Title of Project: Pharmacological screening of 2-Amino-4-Aryl Thiazole and 2-Phenyl-7-substituted Phenyl Quinoxaline Derivatives for Possible Anti-Inflammatory Properties.

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel: SMP/230/2017-1821/06/2018

Proposed Expenditure: Sixteen Thousand Eight Hundred

Sr. No.	Parameter	Amount	
1.	Infrastructure utility fees. (10% of actuals)	1200/-	
2.	Society processing fees. (10% of actuals)	1200/-	
3.	Staff remuneration (20% of actuals)	2400/-	
4.	Total cost of actuals.	12000/-	
	Grand Total	16,800/-	

DETAILS OF ACTUALS

Details of consumables required for the project:

Sr. No.	Item(Consumables)	Cost
	Chemicals: Diethyl Ether, Carrageenan	1000/-
	Stationary, Sanitizers and Disposables e.g. Syringes, tubes, mask, gloves and wide moth bottles	3000/-
	Animals and Histopathology	8000/-
	Grand Total	12000/-

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

(Accountant sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Pharmacological screening of 2-Amino-4-Aryl Thiazole and 2-Phenyl-7-substituted Phenyl Quinoxaline Derivatives for Possible Anti-Inflammatory Properties." to be conducted between

20 July 2018 to 19 Oct 2018

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

Dr. S.V. Tembhurne, Department of Pharmacology, AISSMS COP Pune (Name and signature of Chief Investigators)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Pharmacological screening of 2-Amino-4-Aryl Thiazole and 2-Phenyl-7-substituted Phenyl Quinoxaline Derivatives for Possible Anti-Inflammatory Properties."

(Hon. Secretary, AISSMS Pune)
Hon. Secretary

POST APPROVAL DETAILS Shivaji nagar, PUNE 411 005.

Details of Payment:

Challan No. with Date: 130

Amount: 16800/-

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project -Coordinator)

Model English Education Society's

SHARDA WAHAVIDYALAYA (Arts & Science) PARBHANI.

iated to Swami Ramanand Teerth Marathwada University, Nanded) Near Govt. Hospital, Subhash Road, Parbhani-431 401, (Maharashtra) India.

Ph. (02452) 227550 Fax: (02452)227558 Website- www.shardacollege.co.in E-mail-shardacollege 230@yahoo.co.in NAAC 'B' Grade

Anil Hemrai Jain Secretary

Dr. Wamanrao Jadhay Principal AISSMS

O.W. SMP/230/2017-18/

To,

The Principal,

AISSMS College of Pharmacy,

Pune, Maharashtra - 411 001.

College of Pharmacy Inward No.

Date. 25.04.2018

Date:-21/6/2018

Subject: - Enquiry regarding *In Vivo* anti-inflammatory studies on mice./ Rat

Respected sir/ Madam,

With reference to subject cited above, I am to state for your kind consideration that, "Mr. Gundlewad G. B. is doing research under my guidance for Ph. D. degree in chemistry. He is needful about the in vivo anti-inflammatory studies of some compounds on mice." He is interested to outsource these studies. The animal study is exclusively for the academic purpose. He has earlier communicated with your faculty (Dr. S. V. Tembhurne) in this regard.

Kindly assists him by performing the mentioned studies at your college, and do the needful.

I request to analyze the samples for biological assay.

Thanking you.

Yours faithfully

Dr. B. R. Patil,

Research Guide

Encl. List of samples with data.

AISSMS College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.:

Checked B

0308

Date: 08 /03 / 2019

Amount credited on A/C No.: 04510200000882 in the BANK OF BARODA, Shivajinagar, Pune - 5

Class Year 201 8	
Particulars	Amount Rs.
) Interim Fee	
2) Application Form Fees	
3) Development Fees	
4) Tuition Fees	
5) Misc. & University Charges	
6) Caution Money Deposit	\\
7) Journal Fees	
8) University / Board Eligibility Fe	
9) EVS Fee	
10) Student Activity Fee	
11) Insurance Fee	
3)2) Eligibility Fee	
13) Other Fee	
14) Project Fee	40,000/-
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16) 0 t 0 8 /03 / 20 19)
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Total in words Rupees fan	y thousand

AISSMS College of Pharmacy (B.Pharm)

Kennedy-Road, Near R.T.O., Pune - 411 001.

Challan No.: 952

To

Acc

Ch

Date: 28/12/2017

Amount credited on A/C No.: 04510200000882 in the BANK OF BARODA, Shivajinagar, Pune - 5

Particulars	Amount Rs.
) Interim Fee	<u> </u>
Application Form Fees	
) Development Fees	
Tuition Fees	
s) Misc. & University Charges	
6) Caution Money Deposit	
7) Journal Fees	
3) University / Board Eligibility Fee	S
9) EVS Fee	
10) Student Activity Fee	
11) Insurance Fee	
12) Other Fee Prajectf	ed 65,100
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Total in words Rupees	1 1 1 1 1 1
Total in words Rupees	five pour

AISSMS College of Pharmacy Pune-1

WP1PN/2017-18/52 (4

To,

Hon. Secretary

All India Shri Shivaji Memorial Society, Shivaji Nagar, Pune-411005

1.1.S.S.M. SOCIETY Date: 08/07/2017 Inward No

JUL 2017

Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

Please find enclosed research proposal titled, "Pharmacokinetic, Biodistribution and Toxicity Studies of Nanoparticulate Containing Anticancer Formulations." under Category outside Research Project (Format B) for your approval. You are requested to do the needful at the earliest.

Thanking You.

Tembhurne & Dr. Mrs. M.C. Damle

(Chief Investigator)

(Project Co-ordinator) DIM R Bhaleka

Dr. Ashwini R. Madgulkar

(Principal)

Principal

AISSMS College of Pharmacy

Pune-1

To, The Principal, AISSMS College of Pharmacy, Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

We the undersigned would like to undertake a short term self supported research project under the guidance of Dr. S. V. Tembhurne from Pharmacology Department and Dr. Mrs. M.C. Damle from Quality Assurance Department. The duly filled format has been enclosed for your kind information and approval.

We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely (Name and signature of Students)

Dharyashil Gadge

BUT MARBIMIAL

2

PROTOCOL FOR OUT SIDE INSTITUTE RESEARCH PROJECT (Format-B)

Name of Applicant: Mr. Dharyashil Gadge

Complete postal address: Bharati Vidyapeeth's College Pharmacy Kolhapur

Title of Project: Pharmacokinetic, Biodistribution and Toxicity Studies of Nanoparticulate

Containing Anticancer Formulations.

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure: 65,100/- (Sixty Five Thousand and Hundred Only)

Sr. No.	Parameter	Amount
1.	Infrastructure utility fees. (10% of actuals)	4650/-
2.	Society processing fees. (10% of actuals)	4650/-
3.	Staff remuneration (20% of actuals)	9300/-
4.	Total cost of actuals.	46500/-
	Grand Total	65,100/-

DETAILS OF ACTUALS

Details of consumables required for the project:

Sr. No.	Item(Consumables)	Cost
	Chemicals: (12500 + 5000)	17500/-
u .	Stationary, Sanitizers and Disposables e.g. Syringes, tubes, mask, gloves and wide moth bottles	5000/-
	Animals (35 Rats)	10000/-
•	HPLC charges (Rs. 100 per inj. *120 Injections)	12000/-
	Other (Unknowing expenses)	2000/-
	Grand Total	46500/-

Drisvigembhume (Mc Damle)

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

(Accountant sign)

Principal
AISSMS College of Pharmacy
Pune-4

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Pharmacokinetic, Biodistribution and Toxicity Studies of Nanoparticulate Containing Anticancer Formulations." to be conducted between

15 July 2017 to 14 Sept 2017

We will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

Dr. S.V. Tembhurne, Department of Pharmacology, AISSMS COP Pune Dr. Mrs. M.C. Damle, Department of Quality Assurance, AISSMS COP Pune (Name and signature of Chief Investigators)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Pharmacokinetic, and Toxicity Studies of Nanoparticulate Containing Anticancer Biodistribution Formulations."

> (Hon. Secretary, AISSMS Pune) Hon. Secretary

All India Shri Shivaji Memorial Society une 11 005.

POST APPROVAL DETAILS

Details of Payment:

Challan No. with Date: 962, 28-12-17

Amount: 65 100 - 40,000/- 08-03-2019

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project -Coordinator)

AISSMS All India Shri Shivaji Memorial Society's College of PharmaCyllege of PharmaCy Kennedy Road, Near RTO, Pune-411001

COPIPNI2019-20127-(2

Date:

To.

The Hon. Secretary

All India Shri Shivaji Memorial Society,

Shivaji Nagar Pune- 411005.

Submission of summary report for disbursement of remuneration to the staff. Sub:

Respected Sir,

Please find enclosed summary report of project titled, "Preparation of mouth dissolve tablet of BCS II drug" sanctioned under category of inhouse project (Format C)

You are requested to kindly sanction the disbursement of remuneration of Rs.2000/- to the staff at earliest. (Maddly Manual

Thanking you.

Prepared by

Checked by

Accountant

Dr M R Bhalekar

Dr M C Damle

Mr. M.M.Chopane

(Dr Ashwini R Madgulkar)

Principal

AISSMS College of Pharmacy

Pune-1

TREASURER HONORARY SECRETARY The All India Shri Shivaji Memorial Society

Enclosed: Summary report / Xerox of receipt of payment / Xerox set of sanctioned proposal.



AISSMS College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 1494

Date: 318118

Amount credited on A/C No.: 04510200000882 in the BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Mjés UH	PKUS
- Paringy	
Class 7. Y. Bphaxm Y	ear 201 🖇 - 2019
Particulars	Amount Rs.
, Interim Fee	
2) Application Form Fees	
3) Development Fees	
4) Tuition Fees	
5) Misc. & University Charges	
6) Caution Money Deposit	
7) Journal Fees.	
8) University / Board Eligibility Fee	
9) EVS Fee	
10) Student Activity Fee	
11) Insurance Fee	
Other Fee	
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TOTAL Rs.	5100/-
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Accept the amount as above 50	001-
Q + L RUNE 1 DE	P.
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AISSMS COPIPN/2018-19/47 College of Pharmacy Pune 1 Date: JUN 2018 5 To, 41-14 mward No. Hon. Secretary 12.212016 All India Shri Shivaji Memorial Society, Shivaji Nagar, Pune-411005. Sub: Submission of proposal of sponsored research project for appropriate No. Respected Sir, Please find enclosed research proposal titled, "Development & vals dation HPTLC method for estimation of Etravirine "Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest. Thanking you. Macule
(Chief Investigator)
(Dr. M. C. Damle) (Project Co-ordinator) (Principal) (M. R. Bhalelear) Principal AISSMS College of Pharmacy Pune-1 To. The Principal, AISSMS College of Pharmacy, Kennedy Road, Near R.T.O., Pune-411001. Subject: Permission for self supported short term research project. Respected Madam, I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. The duly filled format has been enclosed for your kind information and approval I / We will be obliged, if you consider my /our request and permit us for the same. Thanking you. Yours sincerely (Name and signature of Students) submitted to Utlekas Pranav. LUCD MIN

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development and validation of HPTIC method for estimation of Etravirine" Aug to Oct 2018 to be conducted between

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

Mamle

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. "Development and validation of HPTLC method for estimation of Etravinne"

> (Hon. Secretary, AISSMS Pune) Hon. Secretary All India Shri Shivaji Memorial Society Pune-411 005.

POST APPROVAL DETAILS

Details of Payment:

Challan No. with Date: 1494 dt 3/8/18

Amount: 5,1001-

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

MCDamb) (Dr. MR Bhaletar) (Name and signature of Project -Coordinator)





AISSMS College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 1435 Amount credited on A/C No.: 04510	ate: 161 7 118			
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Received from Mr./Miss Dhyanada				
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Particulars	Amount Rs.			
1) Interim Fee				
2) Application Form Fees				
3) Development Fees	(
4) Tuition Fees	\\			
5) Misc. & University Charges				
6) Caution Money Deposit	<u> </u>			
7) Journal Fees				
8) University / Board Eligibility Fee				
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10) Student Activity Fee				
11) Insurance Fee				
12) Other Fee				
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16) Dt - 1017 12018	<u>/</u>			
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Checked By PUNE-1.	Daniel .			
Ollectred Po	nebozited RA			

Transaction Details

Account Number	0103104000316538
Transaction Date	16/07/18
Transaction Amount	INR 4,500.00 -
Transaction Type	DR
Transaction Description	IPAY/INST/NEFT/174598585/04510200000882

To, Hon. Secretary All India Shri Shivaji Memorial Society, Inward No. 40-5 Pune-411005. Sub: Submission of proposal of sponsored research project for approval. Respected Sir, Please find enclosed research proposal titled, "Preparation of mouth dissolving the twolet of Bass all drug" "" AlssMs College of Pharmacy: 1(18) Alss.M. SOCIETY PUNE-5 Pune-411005. Sub: Submission of proposal of sponsored research project for approval. Date: 5(6)116 Nouth dissolving the twolet of Bass all drug!" ""
under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest. Thanking you. (Principal) (Project Co-ordinator) (Chief Investigator) D. M. R. Rhuleken Pune-1
To, The Principal, AISSMS College of Pharmacy, Kennedy Road, Near R.T.O., <u>Pune-411001.</u>
Subject: Permission for self supported short term research project.
Respected Madam,
I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Mangesh Bhalekar The duly filled format has been enclosed for your kind information and approval
I / We will be obliged, if you consider my /our request and permit us for the same.
Thanking you.
Yours sincerely (Name and signature of Students) 1) Sidchart Bhalarca 11) Dhyarada Bathe Rother TREASURER HONORARY SECRETARY THE ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY PUNE - 411 005

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: Dr. Margesh Bhalekas.
Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune-411001

Title of Project: Preparation of Mouth dissolving trablet of BCS classII. drug, Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

Sr.	Parameter	Amount (Rs)
No.		
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	500/-
	Grand Total	45001-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1	Ethyl Alcohol	1 lit	500=00
2			
3			
		7	
	Grand total		500:00

(Name and Signature of Chief Investigator)

^{*} Cost of consumables shall be calculated using standard catalogue. Dr. M.R. Bhalekar

UNDERTAKING

I undersigned hereby take responsibility of the project titled, Preparation of mouth dissolving tablet of BCS class II drug." to be conducted between 15June 2018-15 Sep 2018

I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)

Da M R Bhalekou

SANCTION CERTIFICATE

Thereby grant permission for undertaking the project titled. Preparation of mouth dissolving tablet of BCS Class II drug.

(Hon. Secretary, AISSMS Pune)

POST APPROVAL DETAILS

Details of Payment:

Challan No. with Date: 1435 dr 11-7-18

Amount: 4500/

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project - Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

- 1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
- 2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in store s to be procured by the students.
- 3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
- 4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
- 5. The actual experimental work shall be started only after approval from the society.
- 6. The student investigator/s shall be appointed by the Chief Investigator.
- 7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
- 8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
- 9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

AISSMS

College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Date:07 /08/2018

Amount credited on A/C No.: 04510200000882 in the BANK OF BARODA, Shiyajinagar Pune - 5

Received from Mr./Miss Nisho	
Class T. Y. B. Pham Y	'ear 201 8 - 201 9
Particulars	Amount Rs.
1) Interim Fee	
Application Form Fees	
3) Development Fees	
4) Tuition Fees	<u></u>
5) Misc. & University Charges	
6) Caution Money Deposit	
7) Journal Fees	
8) University / Board Eligibility Fee	\-
9) EVS Fee	
10) Student Activity Fee	
11) Insurance Fee	
12) Other Fee	
In House Project	
14) ID No-821923574	854
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4) Bhagyas mectotal Rs.	6.0007-
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2cf. N	10. CP/PN/18-19/65-0	AISSMS
) 3	College of Pharmacy
	To, Date: 23)07	12018 Fine 1
	To, Hon. Secretary A.1.S.5 at CIETY Port 5-6	Date. 01/08/2018
	All India Shri Shivaji Memorial Society. Shivaji Nagar	9/
	Pune- 411005. Date: 24/3/1018	119
*	Sub: Submission of proposal of sponsored research project for approval.	
	Respected Sir,	
	Please find enclosed research proposal titled, "Development and	Validation of
	Spectrophotometric method for Determination of Pharmaceuticals" under Ca	tegory In house
	Research Project (Format C) for your approval. You are requested to do the	needful at the
	earliest. Total Project cost Rs 6,000 I	
7		
(Thanking you.	
	manuel (Dame, Dande)	Lander.
	Principal) / (Project Co-ordinator) (Chief I)	nvestigator)
AISSMS	College of Pharmacy (Dr. M. R. Bhalekar) (Dr. S.	v. Gandli)
riiodillo	-Pung-1	
	To, The Principal, AISSMS College of Pharmacy, Kennedy Road, Near R.T.O., <u>Pune-411001.</u>	
	Subject: Permission for self supported short term research project.	
	Respected Madam,	
	I/We the undersigned would like to undertake a short term self supported research the guidance of Mr. / Mrs. / Prof. /Dr. Sastosh V. Gameller The duly fill been enclosed for your kind information and approval	h project under lled format has
	I / We will be obliged, if you consider my /our request and permit us for the same.	
	Thanking you.	
	Yours sincerely	
	Name and signature of St	rudents) Sign
	Bhagyashree S. Patil	Bepatil
	Bhagyashree. S. Patil Shruti. R. Khandave	Zenandae
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	W Nishant S Rome	INAM
	Mayum. M. Pansare W. Nishant. S. Koihe (T. Y. B. Pharm)	2 57/6

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: Dr. Sombosh V. Gandhi

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: "Development and Validation of Spectrophotometric method for Determination of Pharmaceuticals"

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

Sr.	Parameter	Amount (Rs)	
Sr. No.			
1	Infrastructure utility fees.	1000/-	
2	Society processing fees.	1000/-	
3	Staff remuneration	2000/-	
4	Total cost of actuals.(Details are mentioned below)	2000/-	
	Grand Total	6,000/-	

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
01	Methanol (AR Grade)	2.5 lit * 4	2,000/-
	1		
###			
	Grand total		2,000/-

(Dr. Somtosh V. Ganelle)
(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

C

(Accountant Sign)

(Mr. M.M. Chopane)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development and Validation of Spectrophotometric method for Determination of Pharmaceuticals" to be conducted between 01/08/2018 to 31/10/2018

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)
(Br Somrosh V- Gandw)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. " Development and varidation of spectrophotometric metuod for Determination of Pharmaceuticals!

(Hon. Secretary, AISSMS Pune) Hon. Secretary All India Shri Shivaji Memorial Society, Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

online payment to A1c .0451020000882

Details of Payment: or Bornk or Barrada on 07108/18

(Transaction Id - 821923574854)

Challan No. with Date: 1508 dated 07108118

Amount: 60001 -

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project –Coordinator)

(Br. M. R. Bhallean)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

- 1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
- 2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
- 3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
- 4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
- 5. The actual experimental work shall be started only after approval from the society.
- 6. The student investigator/s shall be appointed by the Chief Investigator.
- 7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
- 8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
- Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

INHOUSE PROJECT 2018-19

Project No. COP/PN/18-19/65-1

Title: Development and Validation of Spectrophotometric Method for Determination of Pharmaceuticals

Author: Mayuri Pansare, Nishant Kolhe, Bhagyashree Patil, Shruti Khandve, Santosh Gandhi

AISSMS College of Pharmacy, Kennedy Road, Near RTO, Pune - 411 001

Summary:

A simple, accurate and precise spectrophotometric method has been developed for simultaneous determination of Terbutaline sulphate and Bromhexine HCl in bulk and in combined pharmaceutical dosage form. The methods developed were area under curve method and first derivative spectroscopy method using methanol as solvent. Regression analysis of beers plot showed good correlation range of 5-30 μ g/ml for Terbutaline sulphate as well as for Bromhexine HCl. Proposed methods have been extensively validated as per ICH guidelines. There was no significant difference between the performance of the proposed methods regarding the mean values and standard deviations. Methods can be used for routine determination of these two drugs in combined dosage form.

(Dr. Santosh V. Gandhi)

AISSMS College of Pharmacy

Kennedy Road, Near RTO, Pune - 411 001

INHOUSE PROJECT SUMMARY REPORT 2018-19

Project No. COP/PN/18-19/65-1

Title: Development and Validation of Spectrophotometric Method for Determination of Pharmaceuticals

Mayuri Pansare, Nishant Kolhe, Bhagyashree Patil, Shruti Khandve, Santosh Gandhi

A simple, accurate and precise spectrophotometric method has been developed for simultaneous determination of Terbutaline sulphate and Bromhexine HCl in bulk and in combined pharmaceutical dosage form. The methods developed were area under curve method and first derivative spectroscopy method using methanol as solvent. Regression analysis of beers plot showed good correlation range of 5-30 μ g/ml for Terbutaline sulphate as well as for Bromhexine HCl. Proposed methods have been extensively validated as per ICH guidelines. There was no significant difference between the performance of the proposed methods regarding the mean values and standard deviations. Methods can be used for routine determination of these two drugs in combined dosage form.

Outcomes:

- 1. Poster presentation of research work entitled "Development and validation of UV spectrophotometric method for estimation of Terbuataline sulphate and Bromhexine HCl in combined dosage form" by Mayuri Pansare, Nishant Kolhe, Bhagyashree Patil, Shruti Khandve, Mohitosh Mahajan, Dr. Santosh Gandhi at one day state level poster presentation competition "SYNAPSE 2018" organized by AISSMS College of Pharmacy on 16th October 2018. (UG-14, Page 21)
- 2. Poster presentation of research work entitled "Development and Validation of UV Spectrophotometric Method for Estimation of Terbuataline Sulphate and Bromhexine HCl in Combined Dosage Form" by Mayuri Pansare, Nishant Kolhe, Bhagyashree Patil, Shruti Khandve, **Santosh Gandhi** at 4th METR_XPLORE 2019 (UG Research Conference) held at Bhujbal Knowledge City, MET's Institute of Pharmacy, Nashik on 9th February 2019.

(Dr. Santosh V. Gandhi)

Grandia

(Chief Investigator)

Ref No. COP/PN/18-19/65-8

(4)

		Date: 231	0712018
	To, Hon. Secretary All India Shri Shivaji Memorial Shivaji Nagar Pune- 411005. A.I.S.S.M PUNE Society, Inward No. Date: 24/	SOCIETY	AISSMS College of Pharma
	Sub: Submission of proposal of sponsored research	project for approval.	mward No. 57 6
*	Respected Sir,		Date. 01.08.2018
je:	Please find enclosed research proposal titled, "Spe	ectrophotometric Method I	Development and
	Validation for Estimation of Pharmaceuticals"		
	(Format C) for your approval. You are requested	to do the needful at the earli	iest. Total Project
	cost Rs. 6,0001—		
AISSMS ((Principal) (Project Co-ordinate College of Pharmacy (Dr. N. R. Bha	Lekar) (Br's	Econolio Investigator) annosh V. Gamelr
	To, The Principal, AISSMS College of Pharmacy, Kennedy Road, Near R.T.O., <u>Pune-411001.</u>		
	Subject: Permission for self supported short term res	earch project.	
	Respected Madam,		
	I/We the undersigned would like to undertake a shothe guidance of Mr. / Mrs. / Prof. /Dr. Sombosh been enclosed for your kind information and approve	V. Grandly The duly f	ch project under illed format has
	I / We will be obliged, if you consider my /our reque	st and permit us for the same	
	Thanking you.		
1) Ne	ha R. Sali ivam s. Jaiswal. W M. fegade. od V. Gaikwad.	Yours sincerel (Name and signature of S	2
of Shi	van s. Jaiswal.	Sainus.	
3> vipi	w M. fegade.		
a) vind	od V. Gaikwad. 1	Vall	

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: Dr. Som tosh V. Gandhi

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: "Spectrophotometric Method Development and Validation for Estimation of Pharmaceuticals"

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

Sr.	Parameter	Amount (Rs)
Sr. No.		
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	2000/-
	Grand Total	6,000/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
01	Methanol (AR Grade)	2.5 lit * 4	2,000/-
	\		
	Grand total		2,000/-

(or somtosh V- Gandu)

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

(Accountant Sign)

(MM. M. M. Chopeme)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development and Validation of Spectrophotometric method for Determination of Pharmaceuticals" to be conducted between 01/08/2018 to 31/10/2018

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)

(Dr. Somrosh V- Gamelly)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. "Spectro photometric metural Development and varidation for Estimation or pharmaceurcals"

(Hon. Secretary, AISSMS Pune)

Hon. Secretary

Ali India Shri Shivaji Memorial Society,

Shivajinagar, PUNE 411 005.

POST APPROVAL DETAILS

online payment.

Details of Payment: Bank of Baroda Alc No - 04510200000882 (Transaction FD - UA87007132) on 14108118

Challan No. with Date: 1523 dated 14108/18

Amount: 60001-

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project –Coordinator)

(Dr. M. R. Bhalekar)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

- 1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
- 2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in stores to be procured by the students.
- 3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
- 4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
- 5. The actual experimental work shall be started only after approval from the society.
- 6. The student investigator/s shall be appointed by the Chief Investigator.
- 7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
- 8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
- 9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

AISSMS

College of Pharmacy (B.Pharm) Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No523

Date: | 4 / 8 / 18

Amount credited on A/C No.: 04510200000882 in the BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Shivan				
Santarh Jaiswal.				
Class Year 2018 - 2019				
Particulars	Amount Rs.			
1) Interim Fee				
^\ Application Form Fees				
3) Development Fees				
4) Tuition Fees				
5) Misc. & University Charges	1 /			
6) Caution Money Deposit				
7) Journal Fees	1			
8) University / Board Eligibility Fee				
9) EVS Fee	1			
10) Student Activity Fee				
11) Insurance Fee				
12) Other Fee				
3) In Howe Project	6,000			
14) ID - UAS 70071	32_/			
15)1) Shram Jaiswal	4			
16, 11) Vinod Gaikwad				
") Vipul Fegade.)			
	6,0001-			
Total in words Rupees Six Hhorus	and only			
Accept the amount as above 6, 06	01-			



Ver 5.3.14

Enter OTP

Please enter OTP to proceed with transaction:

Enter OTP:



Quick transfer for Rs.6000.00 on 14-Aug-2018 is successfully transferred. Please note this transaction number for future reference: UA87007132

OK

To Add this account in Beneficiary list,
Please Click here

Shiram Jassoal. - 9404470908. T.Y Bphamm. In House Project

AISSMS College of Pharmacy, Kennedy Road, Near RTO, Pune - 411 001

INHOUSE PROJECT 2018-19

Project No. COP/PN/18-19/65-2

Title: "Spectrophotometric Method Development and Validation for Estimation of Pharmaceuticals"

Research Students: Neha Sali, Shivam Jaiswal, Vipul Fegade, Vinod Gaikgwad

Summary:

The present work deals with simple spectrophotometric method development for simultaneous estimation of Cefuroxime and Linezolid in bulk and in two component tablet formulation. The methods developed were first derivative spectroscopy method and area under curve method. Methanol was used as solvent throughout the analysis. Regression analysis of beers plot showed good correlation range of 5-30 µg/ml for Cefuroxime as well as for Linezolid. The recovery studies confirmed accuracy of proposed method and low values of standard deviation confirmed precision of method. The method is validated as per ICH guidelines. The proposed method was successfully applied to determination of these drugs in formulation.

(Dr. Santosh V. Gandhi) (Chief Investigator)

Beardin

AISSMS College of Pharmacy, Kennedy Road, Near RTO, Pune - 411 001

INHOUSE PROJECT SUMMARY REPORT 2018-19

Project No. COP/PN/18-19/65-2

Title: "Spectrophotometric Method Development and Validation for Estimation of

Pharmaceuticals"

Research Students: Neha Sali, Shivam Jaiswal, Vipul Fegade, Vinod Gaikgwad

Summary:

The present work deals with simple spectrophotometric method development for simultaneous

estimation of Cefuroxime and Linezolid in bulk and in two component tablet formulation. The

methods developed were first derivative spectroscopy method and area under curve method.

Methanol was used as solvent throughout the analysis. Regression analysis of beers plot showed

good correlation range of 5-30 µg/ml for Cefuroxime as well as for Linezolid. The recovery

studies confirmed accuracy of proposed method and low values of standard deviation confirmed

precision of method. The method is validated as per ICH guidelines. The proposed method was

successfully applied to determination of these drugs in formulation.

Outcomes:

Poster presentation of research work entitled "Development and Validation of UV

Spectrophotometric Method for Estimation of Cefuroxime and Linezolid in Combined Dosage

Form" by Neha Sali, Shivam Jaiswal, Vipul Fegade, Vinod Gaikgwad, Santosh Gandhi at 4th

METR_xPLORE 2019 (UG Research Conference) held at Bhujbal Knowledge City, MET's

Institute of Pharmacy, Nashik on 9th February 2019.

(Dr. Santosh V. Gandhi)

Brandes

(Chief Investigator)

AISSMS College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan Nog: 677	Date: 08/02/19
Amount credited on A/C No.: 0451 BANK OF BARODA, Shivajin	
Received from Mr./Miss Gaun	ray Aryn
Mahajan	
Class S. Y. B Phonon	. Year 2018 - 2019
Particulars	Amount Rs.
1) Interim Fee	
2) Application Form Fees	1
J Development Fees	
4) Tuition Fees	
5) Misc. & University Charges	
6) Caution Money Deposit	1
7) Journal Fees	_
8) University / Board Eligibility Fee	
9) EVS Fee	
10) Student Activity Fee	
11) Insurance Fee	
12) Other Fee	
13) Inhayse Project	1
14) TR. ID	
15) 903909942801	
16)	
TOTAL Rs	· G2001-
Total in words Rupees <u>Four</u> +	housand the
hyndred only1-	
Accept the amount as above	301-
Alsono	@AMake for
A IOT DING 4 IS	

Deposited By

COPIPN/2018-19/206 (5 To, Hon. Secretary College " All India Shri Shivaji Memorial Society, Shivaji Nagar Pune- 411005. Sub: Submission of proposal of sponsored research project for approval. Respected Sir, Please find enclosed research proposal titled, " formulation and Evaluation
Herbal Hand Candy for Anhitustive "a
under Category In house Research Project (Formulation) under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest. Total Project cost Rs. ---Thanking you. (Project Co-ordinator) (Chief Investigator) A. N. Avalaskal AISSMS College of Pharmacy Pune-1

To,
The Principal,
AISSMS College of Pharmacy,
Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

F/ We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Amuta V. Avadaska. The duly filled format has been enclosed for your kind information and approval

If We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely (Name and signature of Students)

Abhishek-Mahesh Joshi Ashisher Maheshkuman Sayaji Aher Auston Avhad Utkarsha Nikas Alod. Gayson Asun Mahagan Qualign

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: America N. Avalaskar

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: Formulation and Evaluations of Herbal Hayd Candy for Anti-tusting Proposed duration of Project: 03 Months - 15 Jan 2019 - 15 April 2019 for activity?

Ref. No. and date of application through proper channel: cop/pn/2018-19/206 5 08:01:19

Proposed Expenditure:

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
1.	Alcohol	500 ml	2001-
			1
	200=00		

Sr.	Parameter	Amount (Rs)	
No.			
1	Infrastructure utility fees.	1000/-	
2	Society processing fees.	1000/-	
3	Staff remuneration	2000/-	
4	Total cost of actuals.(Details are mentioned below)	200/-	
	Grand Total	4200 -	

(Name and Signature of Chief Investigator)

^{*} Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING
I undersigned hereby take responsibility of the project titled, Formulation and Evaluation of Herbal Hard Candy for Anti-Turnium activity." to be conducted between 15 Jan 2019 - 15 April 2019
I also assure you that the project will be carried out after regular academic schedule
and I will remain present during the project work.
thealastar
Amuta N. Avalaskan
(Name and signature of Chief Investigator)
SANCTION CERTIFICATE
I hereby grant permission for undertaking the project titled. Formulation and Evaluation of Herbal Hard Candy for Anti-tustive activity! (Hon. Secretary, AISSMS Pune) Hon. Secretary All India Shri Shivaji Memorial Society Pune-411 005.
POST APPROVAL DETAILS Details of Payment: Online
Challan No. with Date: 1677
Challan No. with Date: 1677 Amount: 4200
(Kindly enclose Xerox copies of Application and Challan)
The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned. The requisite formalities have been completed and verified by the undersigned.

AISSMS

College of Pharmacy (B.Pharm)

Kennedy	Ro	ad,	Near F	R.T.O., Pune - 411 001.	
Challan No.:	4	13	74	Date: 28 / 8 /	18

Amount credited on A/C No.: 04510200000882 in the BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss Dinga Mehta				
V				
Class S. Y. B. Pharm Y	'ear 201 <i>8</i> - 201 ⁰ /			
Particulars	Amount Rs.			
1) Interim Fee				
Application Form Fees				
3) Development Fees				
4) Tuition Fees	p			
5) Misc. & University Charges	ļ			
6) Caution Money Deposit				
7) Journal Fees				
8) University / Board Eligibility Fee				
9) EVS Fee				
10) Student Activity Fee				
11) Insurance Fee				
12) Other Fee				
s) In house project	7500/-			
14) Ref no-105-80223				
15) 28/8/18	\\			
16)				
TOTAL Rs.	1500/-			
Total in words Rupees <u>Seven 7</u>	horsand			
Fire Mundred or	nly			
Accept the amount as above 7, 500/				
100 * 100 m				
OTT SIME SIME	prehta			
Checked By	Denosited By			



Dr. Mrinalini C. Damle Dept. of Pharm. Chemistry 5th March 2019

To,
The Principal,
AISSMS College of Pharmacy, Pune -1.

Sub.: Request to permit change in API for Inhouse project of SY B.Pharm students

Respected madam,

With your due permission, from you and Hon. Secretary sir, an Inhouse project for SY B Pharm students (Neha Raka, Aishwarya Pawar, Pratiksha Undre, Akanksha Markad and Divya Mehta) was undertaken in Sept. 2018. But the API chosen for work Canagliflozin, was found to be unstable and insufficient to complete the work. The students had worked for few weeks on the project. I personally tried to request for more quantity of Canagliflozin from Industry source but it was not feasible. Since the students have paid the project fees to learn newer analytical techniques, I request your permission to allow project work using another API, Hisperidine. The project outline remains the same.

Kindly permit the work with Hisperidine. The title of the work will be "Development and validation of HPTLC method for Hisperidine" and project duration will be Feb to Apr 2019.

Thanking you,

Sincerely,

(Dr. M.C. Damle)

Encl.: 1. Copy of approved project.

COPIPN 12018-19/46-(4)
To, Hon. Secretary All India Shri Shivaji Memorial Society, 10 No. 3831 Shivaji Nagar, Pune- 411005. Date: 88208
Sub: Submission of proposal of sponsored research project for approval. J' S Inward No.: 66 42
Respected Sir, Date. 22.08.2018
Please find enclosed research proposal titled, "Development and validation of HPTLC method for simultaneous determination of Metformin Canagliflozin" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.
Thanking you.
Mccurle (Chief Investigator) (Project Co-ordinator) (Principal)
CDr - M-C. Damle) Da M.L. Brodekas Principal AISSMS College of Pharmacy Pune-1
To, The Principal, AISSMS College of Pharmacy, Kennedy Road, Near R.T.O., Pune-411001.
Subject: Permission for self supported short term research project.
Respected Madam,
I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. The duly filled format has been enclosed for your kind information and approval
I / We will be obliged, if you consider my /our request and permit us for the same.
Thanking you.
Yours sincerely (Name and signature of Students) 1) NEHA RAKA 2) Aishwanya Pawar Zur. 3) Rahksha Undre 4) Akanksha Markad Alcarksha 5) Dirya Mehda grehan

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: Dy. M. C. Damle

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Development & validation of HPTLC method for simultaneous Title of Project: determination of Methormin & Canagliflozin.

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

Sr.	Parameter	Amount (Rs)
No.		1000/
1	Infrastructure utility fees.	1000/-
2.	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	3500/-
11.5	Grand Total	75001-

DETAILS OF ACTUALS

Sr. No.	Nem(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	Methanol (HPLC)	4 x 2.5 Lts.	2500 -
2.	HPTLC plates	5 Nos.	10001-
	5.		
F =			
			N
	Grand total		3,500]-

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

(Accountant Sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development & Valsdation of HPTIC method for simultaneous determination of Methornin & to be conducted between Sept. to NOV. 2018 canagliflozin"

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. Development - & Validation of HPTLC method for simultaneous determination of Methornin & Canagliflozin"

(Hon. Secretary, AISSMS Pune)
Hon. Secretary
All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment:

Challan No. with Date: 1374 dt 28/8/18

Amount: 75001-

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project –Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

- 1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
- 2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in store s to be procured by the students.
- 3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
- 4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
- 5. The actual experimental work shall be started only after approval from the society.
- 6. The student investigator/s shall be appointed by the Chief Investigator.
- 7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
- 8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
- 9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.



International Journal of Pharmacy and Biological Sciences-IJPBS™ (2019) 9 (3): 832-837
Online ISSN: 2230-7605, Print ISSN: 2321-3272

Research Article | Pharmaceutical Sciences | Open Access | MCI Approved

UGC Approved Journal

Stability Indicating HPTLC Method for Hesperidin

Rasika A. Bhalerao, Divya R. Mehta, Neha K. Raka, Akansha M. Markad, Aishwarya R. Pawar, Pratiksha S. Undre, Mrinalini C. Damle*.

All India ShriShivaji Memorial Society's College of Pharmacy, (Affiliated to Savitribai Phule Pune University) Kennedy Road, Near RTO, Pune-411001.

Received: 12 Mar 2019 / Accepted: 14 Apr 2019 / Published online: 1 Jul 2019 Corresponding Author Email: mcdamle@rediffmail.com

Abstract

A stability indicating assay method was developed and validated according to the ICH guidelines for estimation of Hesperidin using HPTLC. **Objective**-Hesperidin is flavonoid with anti-inflammatory, anti-oxidant properties. The objective was stability-indicating method development and validation for Hesperidin by HPTLC. **Method** – HPTLC method was developed and validated using Mobile phase consisting of Ethyl acetate: Methanol: Water (7:2:2 v/v/v) and detected at wavelength 283 nm. Various forced degradation conditions were used to check degradation of drug. **Results** - The method showed a good linear relationship (r ²= 0.9855) in the concentration range 200-1000 ng/band. It was found to be linear, accurate, precise and specific. **Conclusion**-The proposed HPTLC method for Hesperidin can be applied for quality control as well as for stability testing of Hesperidin. The developed method was validated as per ICH guideline Q2(R1).

Keywords

Hesperidin, HPTLC, Stability indicating. ICH guidelines.

INTRODUCTION

Chemically, Hesperidin is (2S)-5-hydroxy-2-(3hydroxy-4-methoxyphenyl)-7-[(2S,3R,4S,5S,6R)-3,4,5trihydroxy-6-{[(2R,3R,4R,5R,6S)-3,4,5-trihydroxy-6methyloxan-2-yl]oxymethyl}oxan-2-yl]oxy-2,3dihydrochromen-4-one[1]. Hesperidin is a flavonoid. Highest concentrations are found in citrus fruit peels. For instance, peels from tangerines contain hesperidin the equivalent of 5-10 % of their dry mass [2]. Hesperidin plays a protective role against fungal and other microbial infections in plants. These flavonoids have been detected in human plasma after orange and grapefruit diets. Decades of research revealed its many therapeutic applications in prevention and

treatment of many human disorders. Hesperidin shows different activities such anti-inflammatory, anti-oxidant, anti-carcinogenic, cardiovascular, anti-diabetic, anti-allergic, etc. It is used clinically for the treatment of Rheumatoid Arthritis [3]. The objective was development of stability indicating method for Hesperidin by HPTLC. The method was validated as per ICH Q2(R1) guidelines. The stability indicating assays are important to determine the shelf life of the products. It also helps to determine the storage conditions by knowing the process of degradation. Literature survey reveals that, there are some reported quantitative estimation methods [4-8] and stability indicating methods reported for Hesperidin

AISSMS College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.:	1603	Date : 20	111	1	2018
	7 111181				

Amount credited on A/C No.: 04510200000882 in the BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss DeoKar	· Ashwini.		
Suresh.			
Class T. Y. B. pharm Yo	ear 2018 - 2019		
Particulars	Amount Rs.		
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plication Form Fees			
velopment Fees			
4) Tuition Fees			
5) Misc. & University Charges			
6) Caution Money Deposit			
7) Journal Fees			
8) University / Board Eligibility Fee			
9) EVS Fee			
10) Student Activity Fee			
11) Insurance Fee			
Other Fee			
13) Inhouse project	4620/-		
14) 832315911938			
15) Transaction ID			
16) 19/11/2018 .			
TOTAL Rs.	4620/-		
Total in words Rupees four th	busand		
six hundred twenty			

Accept the amount as above 35 4 6 20

COPIPNI 2018-19/106-(1)	AISSMS
To, Hon. Secretary All India Shri Shivaji Memorial Society and No. 5906 Shivaji Nagar Pune- 411005. Sub: Submission of proposal of sponsored research project for approval.	Inward No. 92 (4) Date. 17.10.2018
Respected Sir,	
Please find enclosed research proposal titled, "Evaluation of difficulty with respect to Donnan Membrane Effect!" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.	esent polymers
Thanking you. (Principal) (Project Co-ordinator) (Chic Principal Dam, R, Bladekas (McDamle) AISSMS College of Pharmacy Pune-1	Mulelaur ef Investigator) D. M. R. Bhalekan

To,

The Principal,

AISSMS College of Pharmacy,

Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Mangesh Bhalekar The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely (Name and signature of Students)

Roham Sauralah

Ashwini S. DeoKar Riddhi Atul wavhal

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: Ashwini. Susesh. DeoKar

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: Evaluation of different polymers with hespect to Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/
2	Society processing fees.	1000/-
3	Staff remuneration	1000/-
4		2000/-
	Total cost of actuals.(Details are mentioned below) Grand Total	620/-
	Orand Total	4620 =00

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1	Sodium di hydrogen Phosp	hate soon	390=00
2	Sodium Hydroxide	5009	230=00
\$3.	Chick intestine	Procured by	sterdents
		C	(
×			
	Grand total		6 20 = 00

D. M. R. Bhalekan (Name and Signature of Chief Investigator)

^{*} Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Effect of polymer on Donnan Membrane effect", to be conducted between "October 201∑-Dec 201Z"

I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.

(Name and signature of Chief Investigator) DAMR. Rhalekas

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. Evaluation of different

polymers with respect to Donnan membrane effect.

(Hon. Secretary, AISSMS Pune) Hon. Secretary

All India Shri Shivaji Memorial Society, Shivajinagar PUNE 411 005.

POST APPROVAL DETAILS

Details of Payment:

Challan No. with Date: 1603 20,11-18

Amount: 4620

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Name and signature of Project -Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

- 1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
- 2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in store s to be procured by the students.
- 3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
- 4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
- 5. The actual experimental work shall be started only after approval from the society.
- 6. The student investigator/s shall be appointed by the Chief Investigator.
- 7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
- 8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
- 9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

All India Shri Shivaji Memorial Society's College of Pharmacy, llege of Pharmac Kennedy Road, Near RTO, Pune-411001

AISSMS

Date:

COPIPA/2019-20/27-3

To,

The Hon. Secretary

All India Shri Shivaji Memorial Society, Shivaji Nagar

Pune-411005.

JUN

Submission of summary report for disbursement of remuneration to the staff. Sub:

Respected Sir,

Please find enclosed summary report of project titled, "Evaluation of different polymers with respect to Donnan Membrane Effect" sanctioned under category of inhouse project (Format C)

You are requested to kindly sanction the disbursement of remuneration of Rs.2000/- to the staff at earliest.

Thanking you.

. Prepared by

Checked by '

Accountant

Dr M R Bhalekar

Dr M C Damle

Mr. M.M.Chopane

(Dr Ashwini R Madgulkar)

Principal

AISSMS College of Pharmacy Pune-1

TREASURER HONORARY SECRETARY The All India Shri Shivaji Memorial Society

Pune /411005

Enclosed: Summary report / Xerox of receipt of payment / Xerox set of sanctioned proposal.

All India Shri Shivaji Memorial Society's College of Pharmacy, llege of Pharmac Kennedy Road, Near RTO, Pune-411001

AISSMS

Date:

JUN

COPIPA/2019-20/27-3

To.

The Hon. Secretary

All India Shri Shivaji Memorial Society, Shivaji Nagar

Pune- 411005.

Submission of summary report for disbursement of remuneration to the staff. Sub:

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You are requested to kindly sanction the disbursement of remuneration of Rs.2000/- to the staff at earliest.

Thanking you.

. Prepared by

Checked by '

Accountant

Dr M R Bhalekar

Dr M C Damle

Mr. M.M.Chopane

(Dr Ashwini R Madgulkar)

Principal AISSMS College of Pharmacy

Pune-1

TREASURER HONORARY SECRETARY The All India Shri Shivaji Memorial Society

Pune /4 11005

Enclosed: Summary report / Xerox of receipt of payment / Xerox set of sanctioned proposal.

AISSMS College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: U1U/	ate: 04/03/2
Amount credited on A/C No.: 04510: BANK OF BARODA, Shivajina	
Received from Mr./Miss Popa	Trinibak
Auto	
Class TY (cemVI)	′ear 201 δ - 201 $^{\prime}$
Particulars	Amount Rs.
Onterim Fee	
2) Application Form Fees	
3) Development Fees	
4) Tuition Fees	
5) Misc. & University Charges	
6) Caution Money Deposit	
7) Journal Fees	
8) University / Board Eligibility Fee	
9) EVS Fee	
10) Student Activity Fee	
11) Insurance Fee	
- Eligibility Fee (NEFT No)	
13) Other Fee (NEFT No))
14) In house project	7500/-
15) IY B prayer	
16) 2018-2019	
Total No of Students-05	0
TOTAL Rs.	7500/-
Total in words Rupees Alle t	rousand
10.111	

Accept the amount as above

Transfer Details

< ↓

Reference No. (UTR No./RRN)

906319151733

Date & Time

4 Mar 2019-07:53 PM

Transfer Amount

₹7,500.00

Beneficiary name

AISSMS COLLEGE OF PHARMACY PUNE 411001

Bank name

BANK OF BARODA

Account number

04510200000882

IFSC

BARBOSHIPOO

Ref NO. COPIPH/2018-19/229-0

To,

Hon. Secretary

Shivaji Nagar Pune- 411005.

Respected Sir,

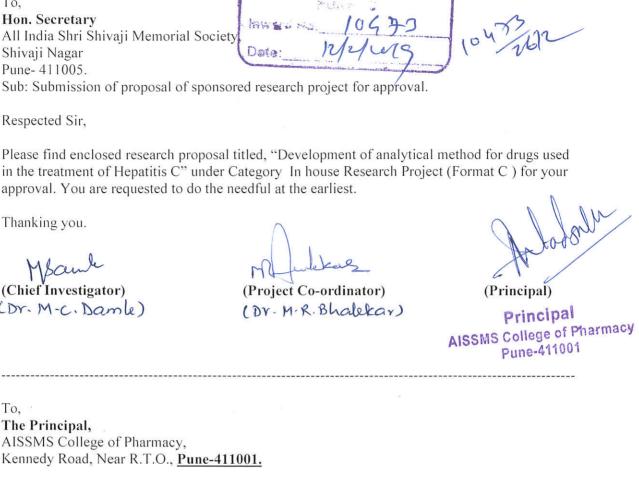
Thanking you.

To,

(Dr. M-c. Damle)

AISSMS College of Pharmacy,

The will be obliged, if yo
Thanking you.
AISSMS
College of Pharmacy Pune 1
Inward No. 154 -3
Date.27-02-2019



Date: 6th Feb 2019

Subject: Permission for self supported short term research project.

Respected Madam,

The Principal,

±/ We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Mrinalini C. Damle The duly filled format has been enclosed for your kind information and approval

±/ We will be obliged, if you consider my /our request and permit us for the same.

Yours sincerely (Name and signature of Students) Harshada R. Vanare. a) Projon to Auti 3) Worhow Ashluha M. 4) Ankity Bulani 5) Vrushali Dhengale

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: Dr. Mrinalini C. Damle

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: Development of analytical method for drugs used in the treatment of Hepatitis C.

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
1	Methanol HPLC grade	4 x 2.5 lts	2500/-
2	HPTLC plates	5 Nos.	1000/-
	Grand tota	1	3500/-

Sr.	Parameter	Amount (Rs)
No.		
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	3500/-
	Grand Total	7500/-

(Dr. M-C. Damle)

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

(Accountant sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development of analytical method for drugs used in the treatment of Hepatitis C" to be conducted between March to June 2019 (No work during exams in Apr-May)

I also assure you that the project will be carried out after regular academic schedule.

and I will remain present during the project work.

(Name and signature of Chief Investigator)
(Dr. M-C Damk)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled "Development of analytical method for drugs used in the treatment of Hepatitis C"

(Hon. Secretary, AISSMS Pune)

Hon. Secretary All India Shri Shivaji Memorial Society Pune-411 005.

POST APPROVAL DETAILS

Details of Payment:

Challan No. with Date: 107 dt 4/3/2019

Amount: 7500) -

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

D. M.R. Bhalekal) (Dr M-CI Damle)

(Name and signature of Project –Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

- 1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
- 2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in store s to be procured by the students.
- 3. To the above figure following charges shall be charged extra to the student:
 - a. Rs.1000/-: As infrastructure utility fees.
 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
- 4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
- 5. The actual experimental work shall be started only after approval from the society.
- 6. The student investigator/s shall be appointed by the Chief Investigator.
- 7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
- 8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
- 9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

Challan No.:

AISSMS College of Pharmacy (B.Pharm)

Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 0288	ate: 11 10412019				
Amount credited on A/C No.: 045102					
BANK OF BARODA, Shivajinagar, Pune - 5					
Received from Mr./Miss_Akshoy	Punniya,				
Aishwanga Mate, Pra	men Uttekan				
Class Ty Dharm y	ear 201 8 - 201 9				
Particulars	Amount Rs.				
nterim Fee	\$				
2) Application Form Fees					
3) Development Fees	<u> </u>				
4) Tuition Fees					
5) Misc. & University Charges					
6) Caution Money Deposit					
7) Journal Fees	\				
8) University / Board Eligibility Fee	<u> </u>				
9) EVS Fee					
10) Student Activity Fee					
11) Insurance Fee					
Eligibility Fee					
13) Other Fee Inhave Project	6500/_				
14) NGT SAA 1 68430442					
15/17003 Dt = 11/04/19					
16))				
	1				
TOTAL Rs.					
Total in words Rupees Six two	buten				
five hundred	only/-				

Accept the amount as above

To. Hon. Secretary All India Shri Shivaji Memorial Society, Shivaji Nagar

Pune- 411005. Sub: Submission of proposal of sponsored research project

Respected Sir,

Please find enclosed research proposal titled, "Development of analytical method for combination of drugs for Hepatitis treatment" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

(Dr. M-C-Damle)

D. M. R Rhalokar

(Principal) Principal

AISSMS College of Pharmacy

To,

The Principal,

AISSMS College of Pharmacy.

Kennedy Road, Near R.T.O., Pune-411001.

Subject: Permission for self supported short term research project.

Respected Madam,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Mrinalini C. Damle The duly filled format has been enclosed for your kind information and approval

I / We will be obliged, if you consider my /our request and permit us for the same.

Thanking you.

Yours sincerely (Name and signature of Students)

Hekur Pranal Pranal

AKShay. H. Punmiya

1

PROTOCOL FOR INHOUSE STUDENT'S RESEARCH PROJECT (Format-C)

Name of Applicant: Dr. Mrinalini C. Damle

Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: "Development of analytical method for combination of drugs for Hepatitis

treatment

Proposed duration of Project: 03 Months

Ref. No. and date of application through proper channel:

Proposed Expenditure:

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
1	Methanol HPLC grade	4 x 2.5 lts	2500/-
			2500/-
	Grand tota		

Sr. No.	Parameter	Amount (Rs)	
No.			
1	Infrastructure utility fees.	1000/-	
2	Society processing fees.	1000/-	
3	Staff remuneration	2000/-	
4	Total cost of actuals.(Details are mentioned below)	2500/-	
	Grand Total	6500/-	

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

(Accountant sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development of analytical method for combination of drugs for Hepatitis treatment" to be conducted between March to June 2019 (No work during exams in Apr-May)

I also assure you that the project will be carried out after regular academic schedule.

and I will remain present during the project work.

Msceule

(Name and signature of Chief Investigator)

(Dr. M.C. Damle)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled "Development of analytical method for drugs used in the treatment of Hepatitis C"

(Hon. Secretary, AISSMS Pune)

Hon. Secretary

All India Shri Shivaji Memorial Society

Pune-411 005.

POST APPROVAL DETAILS

Details of Payment:

Challan No. with Date: 0288 dt 11/4/2019

Amount: 6500] -

(Kindly enclose Xerox copies of Application and Challan)

The requisite formalities have been completed and verified by the undersigned.

(Dr. M-c Damle) (Dr MR Bhalekar) (Name and signature of Project -Coordinator)

GUIDELINES FOR INHOUSE STUDENT RESEARCH PROJECTS (Format-C)

- 1. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
- 2. Chemicals available in college store shall be issued upon approval. The catalogue price to be included in actuals. Chemicals not available in store s to be procured by the students.
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 - b. Rs.1000/-: As processing charges to the society.
 - c. Rs.2000/-: As staff remuneration
- 4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-C) to the society through principal for approval.
- 5. The actual experimental work shall be started only after approval from the society.
- 6. The student investigator/s shall be appointed by the Chief Investigator.
- 7. After completion of the approved research project, Chief Investigator will put forward the summary report to the society for the disbursement of remuneration to the staff.
- 8. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
- 9. Chief Investigator shall be solely responsible for the maintenance of discipline and completion of other formalities like CPCSEA and Ethical committee approval etc and the project completion in due course of time.

Note: Chief Investigator shall ensure that 100% amount as an advance from the students after it is deposited in the college bank account.

ALL INDIA COUNCIL FOR TECHNICAL EDUCATION

Nelson Mandela Marg, Vasant Kunj, New Delhi-110067,

Ref. No.: File No. 8-84/RIFD/RPS/POLICY-1/2016-17

Date: 4 August 2017

The Drawing and Disbursing Officer All India Council for Technical Education Nelson Mandela Marg, Vasant Kunj, New Delhi-110067,

Sub: Release of a sum of Rs.2317647/- being the 1st installment of the total grant of Rs.2352941/for conduct of Project under Research Promotion Scheme (RPS) during the financial year 201718.

Sir,

With reference to the Proposal submitted by the institute, this is to convey the sanction of the Council for payment of Rs.2317647/-(Rupees Twenty Three Lakh Seventeen Thousand Six Hundred Forty Seven) as 1st installment out of a total approved grant-in-aid of Rs.2352941/- for conduct of a Project under the Research Promotion Scheme (RPS), as per details given below:-

& :

I. Name of the Beneficiary Institution (University / College / Institution)

AISSMS COLLEGE OF PHARMACY KENNEDY ROAD, NEAR R.T.O., PUNE, MAHARASHTRA-411001

II. Principal Investigator's Name Dept./Course

Dr. MANGESH BHALEKAR PHARMACY

III. Grant-in-aid Sanctioned

Rs.2352941/- (Rs. 2000000/- for non-recurring and

Rs.352941/- for recurring expenditure)

IV. Amount to be Released during the year 2017-18

Rs.2317647/- (Full amount of non recurring & 90 % of

recurring sanctioned)

V. Duration

: 3 Years

VI. Title of the Project

LIPID NANOPARTICLES FOR ORAL TARGETED DRUG DELIVERY OF DISEASE MODIFYING ANTI RHEUMATOID PHYTOPHARMACEUTICALS

- 1. The sanctioned grant-in-aid is debitable to the major "601.1(a) (RPS)" Gen. and is valid for Payment during the financial year 2017-18.
- The grant-in-aid of the grant shall be drawn by the Drawing and Disbursing Officer (DDO), All India Council
 for Technical Education, New Delhi on the Grants-in-aid bill and shall be disbursed to and credited to the
 account of AISSMS COLLEGE OF PHARMACY, KENNEDY ROAD, NEAR R.T.O., PUNE, MAHARASHTRA411001 through RTGS.
- 3. The date of release of the grant by AICTE shall be taken as the date of commencement of the project. The Principal/Director/Registrar shall intimate about the receipt of the grant to AICTE. Any Expenditure, incurred prior to issuance of this Sanction Order, is not allowed to be adjusted in the grant and if the University/Institution do not take the project work within 6 months of the receipt of the grant, approval shall ipso facto lapse.

Contd...2/-

Documents to be submitted within two month of completion of the Project.

- The consolidated Utilization Certificate (UC), duly audited.
- Duly audited statement of expenditure, to the effect that the grant has been utilized for the purpose for which it has been sanctioned. It should contain the head-wise break up of expenditure made from the grant-in-aid provided by the Council.
- Project Completion Report duly signed & stamped by the PI & Head of the institution.

Any deviation from the above said time schedule will cause serious action against the institute.

- 13. The grantee shall follow the terms and conditions of Research Promotion Scheme (RPS) as laid down by the Council from time to time.
- 14. The Grantee shall fully implement to the Official Language policy of Union Government and comply with the official language Act, 1963 and official language (use of official purposes of the Union Rules, 1976 etc.)
- 15. The funds to the extent are available under the Scheme.
- The sanction issues in exercise of the powers delegated to the Council. It is also certified that grant-in-aid is being released in conformity with the rules and principles of the Scheme.
- 17. The budget allowed cannot be utilized for hiring temporary or permanent staff for the Project.
- 18. It should be ensured that no RPS project in favour of the same P.I. has been sanctioned during the last 03 years before utilizing this amount and the matter be brought to the notice of this Council immediately.
- 19. The institute should strictly observe all the terms & conditions contain in the Scheme details under AICTE AOIS 2016-17.

(Dileep N. Malkhede) Advisor (RIFD)

Yours sincerely.

Note: The prescribed formats and Terms & Conditions are available in the application brochure.

Copy forwarded for information and necessary action to:

- Principal/Director/Registrar, AISSMS COLLEGE OF PHARMACY, KENNEDY ROAD, NEAR R.T.O., PUNE, MAHARASHTRA-411001
- 2. Dr. MANGESH BHALEKAR,
 DEPT. OF PHARMACY,
 AISSMS COLLEGE OF PHARMACY,
 KENNEDY ROAD, NEAR R.T.O., PUNE,
 MAHARASHTRA-411001
- 3. OFFICE OF DIRECTOR GENERAL OF AUDIT GENERAL REVENUES, AGCR BUILDING I.P. STATE, NEW DELHI-110002.
- 4. Guard File

ALL INDIA COUNCIL FOR TECHNICAL EDUCATION Nelson Mandela Marg, Vasant Kunj New Delhi-110067

Ref. No.: 8-84/RIFD/RPS/POLICY-1/2016-17

Name of the

Dr. MANGESH BHALEKAR 1

Principal

PHARMACY <

Investigator & Dept./Course

Name of the Institution

: AISSMS COLLEGE OF PHARMACY

KENNEDY ROAD, NEAR R.T.O., PUNE,

MAHARASHTRA-411001

Title of the Project

LIPID NANOPARTICLES FOR ORAL TARGETED

DRUG DELIVERY OF DISEASE MODIFYING

ANTI RHEUMATOID

PHYTOPHARMACEUTICALS

Approved Items of Expenditure (Non-Recurring)

SI.	Approved Items (As per proposal)	No. of	Amt.
No.		Units	Recommended
1	High pressure homogenizer	01	2000000
		Total	2000000

0 8 SEP 2017

(Dileep N Malkhede) Advisor (RIFD)





अखिल भारतीय तकनीकी शिक्षा परिषद

(भारत सरकार का एक सांविधिक निकाय) मानव संसाधन विकास मंत्रालय, भारत सरकार नेल्सन मंडेला मार्ग, नई दिल्ली-110067

ALL INDIA COUNCIL FOR TECHNICAL EDUCATION

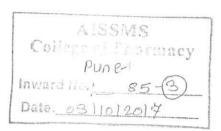
(A Statutory Body of the Govt. of India)
Ministry of Human Resource Development, Govt. of India
Nelson Mandela Marg, New Delhi-110067

F. No. 8-84/RIFD/RPS(Policy-1)/2016-17 Dt.22.09.2017

Dr. Neetu Bhagat Deputy Director (RIFD)

To

The Principal/Director,
AISSMS College Of Pharmacy,
Kennedy Road, Near R.T.O., Pune,
Maharashtra-411001



Subject- Failed Transaction - Issue of Demand Draft- RPS Scheme-Reg.

Sir,

The State Bank of India, Shastri Bhawan, New Delhi has informed that the Grants-In-Aid of Rs. 23,17,647/-, related to Research Promotion Scheme, could not be transferred in the account of your institution due to problem in your bank account number.

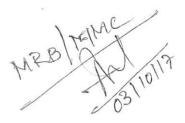
A demand Draft No. 207785 dated 07.09.2017 drawn on State Bank of India, Pune main, in favour of your institute is enclosed in lieu of non-transfer of funds.

Kindly acknowledge the receipt of the above said Demand Draft.

Yours sincerely,

(Negtu Bhagat)

Encl: As above.





Key: SUBDIQ जानी करने वाली शास्त्रा HINGILIC Issuing Branch: SHASTRI BHAWAN NEW DELHI क्यूंड क्र /CODE No: 50203 Sr. No: 41698 D М M 8 **DEMAND DRAFT** Tế No. 0-011-230737 7 रुप्य RUPEES ON DEMAND PAY______ या उनके आदेश पर 6 OR ORDER Twenty Three Lakh Seventeen Thousand Six Hundred and Forty अंदर्गकारे 5 2317647.00 4 3 Sr. No: 41698 AMOUNT BELOW 2317648(2/7) मृत्य प्राप्तः / 2 Key: SUBDIQ 101 000468207785 प्राधिकत हस्ताक्षरकर्ता शाखा प्रशंसका गुण्या AUTHORISED SIGNATORY १ 1,50,000/- एवं आंग्रेक के लिखत दो ऑधकारियों द्वारा हस्ताक्षरित होनेच्छी विधे हैं। INSTRUMENTS FOR र 1,50,000/- & ABOVE ARE NOT VALID UNLESS SIGNED BY TWO OFFICERS 1 भारतीय स्टेट बैंक कम्प्यूटर द्वारा मुद्रित होने पर ही वैध केवल 3 महीने के लिए वेध STATE BANK OF INDIA VALID ONLY IF COMPUTER PRINTED VALID FOR 3 MONTHS ONLY সত্ৰকৰ্ন হাৰে / DRAWEE BRANCH: PUNE MAIN জাহু জ . /CODE No: 00454

207785# 000002000# 000468# 16

RECEIPT & PAYMENT ACCOUNT (For Year 2017-18)

(For Year 2017-18)

Sl.No.	Receipt	Amount (Rs.)	Sr. No.	5	Amoun t (Rs.)
1.	To Opening Balance	00	1	By Nonrecurring Expenses	1941879.00
2.	To Grants Received by AICTE	2317647.00	2	By Recurring Expenses	
3.	To Interest Income (if any)	39114.00	i)	By Chemicals	59331.00
			ii)	By Contingency	103.00
-0/				By Refund – DD NO.208011	58121.00
				By Refund- DD NO. 208012	3506.00
				By Net Balance With College	293821.00
	GrandTotal	2356761.00		Grand Total	2356761.00

(Signature of Chartered Accountant)

FOR R. P. MUTHA & ASSOCIATES CHARTERED ACCOUNTANTS

RAKESH P. MUTHA PARTNER M. NO. 118465

1 0 JAN 2023

Q Hutha & 4 countains

(Signature of Head of the Institute)

Name: Dr. Ashwini Madgulkar

Designation: Principal, AISSMS College

Full Address: All India Shri

ShivajiMemorialSociety's CollegePharmacy,

Kennedy Road,

Near RTO, Pune-411001

UPIN:-23118465BGXJZQ5898.

AUDITED UTILISATION CERTIFICATE (FY 2017-18)

Certified that out of Rs. 2000000/-of grant- in- aid sanctioned during the year 2017-18 letter 8-84/RIFD/RPS/POLICY-1/2016-17. Rs. 1941879/- has been utilized on account of non recurring expenses and further Certified that out of Rs. 317647/- of grant- in- aid received during the year 2017-18 Letter no-8-84/RIFD/RPS/POLICY-1/2016-17 Rs 59434/- has been utilized on account of recurring expenses, for purpose of project title "lipid nanopartieles for oral targeteddrug delivery of disease modifying antirheumatoid phytopharmaceuticals" for which it was sanctioned.

The unspent balance lying in account for non recurring is Rs 58121 /- and for recurring Rs, 258213/- Further college has also earned interest on savings account up to 31" March 2018 Rs 39114/- Therefore Total Unspent balance with college is Rs (58121 +258213+39114) = 355448/ Out of above the college has refunded unspent amount of Rs. 58121/- from nonrecurring vide (DD No.208011) dated 13-11-18 drawn on Bank of Baroda, Pune in favor of member secretary AICTE and Rs. 3506/- from recurring vide (DD no. 208012) dated 13-11-18 drawn on Bank Of Baroda, Pune in favor of member secretary AICTE.

With the refund of all above amount the final unspent balance lying with College on account of recurring expenses is (258213+39114-3506) = 293821/-

It is also Certified that the grant has been utilized as per laid down terms and conditions for which it was sanctioned.

Chartered Accountant (Signature and Seal)

FOR R. P. MUTHA & ASSOCIATES CHARTERED ACCOUNTANTS

RAKESH P. MUTHA PARTNER M. NO. 118465

10 JAN 2023

Pune FRN-128064W SO STEPPEN ACCOUNTS TO

Dr. Ashwini Madgulkar

Principal

AISSM3 College of Pharmacy

Pune-1

UDIN:-23118465BGXJZQ5898

Research Promotion Scheme

FORMAT FOR STATEMENT OF EXPENDITURE

AICTE File No. :F No. 8-84/RIFD/RPS/POLICY-1/2016-17

Title of the RPS Project: Lipid Nanoparticles for Oral Targeted Drug Delivery of Disease

Modifying Anti rheumatoid phytopharmaceuticals

Name of the PI: Dr. Mangesh Bhalekar

Sanction Order No. & Date	Grant Sanctioned	Details of expenditure Incurred Item wise	Amount Rs. (In each head)
4/08/2017	2317647=00	Equipment's	1941879=00
		Chemicals and Consumables	59331=00
		Contingency	103=00

(1)

Signature of PI

(Dr. Mangesh Bhalekar)

(2)Dr. Ashwini Madgulkar

Head of Institution

(3) Signature of Chartered Accountant:

FOR R. P. MUTHA & ASSOCIATES CHARTERED ACCOUNTANTS

RAKESH P. MUTHA PARTNER M. NO. 118465

0 JAN 2023

Pune FRN-128064W S

UDIN: 23118465 BGXJZQ5898

RECEIPT & PAYMENT ACCOUNT (FY 2018-19)

Sl.No.	Receipt	Amount	Sr.No.	Payments	Amount
		(Rs.)			(Rs.)
1.	To Opening Balance	293821.00	1	By Nonrecurring	00
				Expenses	
2.	To Grants Received by	00.00	2	By Recurring Expenses	
	AICTE				
3.	To Interest Income(if	10284.00	i)	By chemicals	4700.00
	any)			500	
			ii)	By Contingency (Glass	550.00
	¥			Syringe)	
				By Net Balance With	298855.00
				College	
	Grand Total	304105.00		Grand Total	304105.00

(Signature of Chartered Accountant)

FOR R. P. MUTHA & ASSOCIATES CHARTERED ACCOUNTANTS

RAKESH P. MUTHA PARTNER M. NO. 118465

10 JAN 2023

(Signature of Head of theInstitute)
Name: Dr. Ashwini Madgulkar
Designation: Principal

Full address: All India Shri Shivaji Memorial Society's College of Pharmacy, Kennedy Road.

Near RTO, Pune-411001





AUDITED UTILISATION CERTIFICATE (FY 2018-19)

Certified that out of grant-in-aid for recurring expenses disbursed during the year 2017-18 F No. 8-84/RIFD/RPS/POLICY-1/2016-17, Rs.293821 =00 has remain unspent. from this Grant-in – aid during the year 2018-19 Rs. 5250=00 has been utilized for the purpose of project title lipid nanoparticles for oral targeted drug delivery of disease modifying antirheumatoid phytopharmaceuticals for which it was sanctioned

The unspent balance lying in account for recurring is Rs 288571=00. Further collage has also earned interest on savings accounts from 1 April 2018 to 31 March 2019 Rs 10284/- therefor total unspent balance with collage is Rs 298855=00.

The final unspent balance lying with collage on account of recurring expenses is 298855=00. It is also certified that the grant has been utilized as per laid down terms and conditions for which it was sanctioned.

Dated:

Chartered Accountant (signature and Seal)

FOR R. P. MUTHA & ASSOCIATES CHARTERED ACCOUNTANTS

RAKESH P. MUTHA PARTNER M. NO. 118465

10 JAN 2023

Pune FRN-128064W & Accountents

UDIN: 23118465BGXJZP9497

Principal

(Dr. Ashwini Madgulkar) (signature and Seal)

Principal
AISSMS College of Pharmacy

Pune-1

Research Promotion Scheme

FORMAT FOR STATEMENT OF EXPENDITURE

AICTE File No. :F No. 8-84/RIFD/RPS/POLICY-1/2016-17

Title of the RPS Project: Lipid Nanoparticles for Oral Targeted Drug Delivery of Disease

Modifying Anti rheumatoid phytopharmaceuticals

Name of the PI: Dr Mangesh Bhalekar

Sanction Order No. & Date	Grant Sanctioned	Details of expenditure Incurred Item wise	Amount Rs. (In each head)
4/08/2017	293821.0	0Equipment's Chemicals and consumables	00
		contingency	5250.00

(1)

Signature of PI

(Dr. Mangesh Bhalekar)

(2) Dr. Ashwini Madgulkar

Head of Institution

Principal

AISSMS College of Pharmacy

Pune-1

(3) Signature of CharteredAccountant:

FOR R. P. MUTHA & ASSOCIATES CHARTERED ACCOUNTANTS

RAKESH P. MUTHA PARTNER M. NO. 118465

11 0 JAN 2023

Pune FRN-128084M

UDJN1-23118465 BGXJZP9497