



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH



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

Index

S. No.	Name of the Project/ Endowments, Chairs	Name of the Principal Investigator/Co- investigator	Year of Award	Amount Sanctioned (Rs.)	Name of the Funding Agency	Type (Government/non- Government)	Proof
1.	Design and Development of potential anticancer agents using molecular modeling and docking studies	Dr. S.V. Bhandari	2022-23	14750=00 Extra work done so paid Rs. 25000.00	Dr. Rajendra Dighe, KBHSS Trust's Institute of Pharmacy, Malegaon Nashik	Non-Government	View
2.	Design and Development of potential Antiviral agents using molecular modeling and docking studies	Dr. S.V. Bhandari	2022-23	14750=00 Paid 12500.00 + GST Extra	Rajnikant Ghotane, RBCOP, Pethwadgaon Kolhapur	Non-Government	View
3.	Pharmacokinetic Evaluation of Dexamethasone in presence of herbal drug	Dr. S.V. Tembhurne	2022-23	21146.00 Paid 17919.00 + GST Extra	Mr. Praful Mazi, SOS University, Bhubaneswar, Odisha	Non-Government	View
4.	Formulation of grapeseed extract mousse	Dr. M.R. Bhalekar	2022-23	3601=00 Paid 3052.00 +GST Extra	Dr. Akansha Gujrati D Y Patil Dental College Pune	Non-Government	View

5.	Development of slow release pheromone tablet for integrated pest management of agricultural pest	Dr. M.R. Bhalekar	2022-23	5900.00 Paid 5000.00 +GST Extra	Suvarna Jarande Pherotrap Solution LLP, Pune	Non-Government	View
6.	Characterization of sunscreen formulation	Dr. MRP Rao	2022-23	5900.00 Paid 5000.00 +GST Extra	Pristina Pharma Ltd, Pune	Non-Government	View
7.	Estimating Anthelmintic activity of Brassica olerica	Mr. Omkar Devade	2022-23	4956.00 Paid 4200.00 +GST Extra	Shrunalini Jadhav, Advait Jahagirdar	Non-Government	View
8.	Drug repurposing on different drug targets using insilico techniques	Mrs.Kalyani Asgaonkar, Mrs. Shital Patil	2022-23	4720.00 Paid 4000.00 +GST Extra	YashDaga, Manjish Gupta	Non-Government	View
9.	Formulation and Evaluation of Gummies for Uterine health	Mrs. Amruta Avalaskar	2022-23	5900.00 Paid 5000.00 +GST Extra	Kalyani Dhengale, Rutuja Gaikwad, Snehal Gadhare	Non-Government	View
10.	Formulation and Evaluation of Gummies for Uterine	Mrs.Amruta Avalaskar	2022-23	5900.00 Paid 5000.00 +GST Extra	Samarth Dhanwat, Omkar Mohekar, Saurabh Shendkar,	Non-Government	View

	health				Vaishnavi Vibhute		
11.	Design and Evaluation of a topical formulation	Dr. Monica Rao	2022-23	4720.00 Paid 4000.00 +GST Extra	Divya Kanade, Priyanka Khanvilkar, Akanksha Mahadik, Isha Mahamunkar	Non-Government	View
12.	Quantitation of active marker from Herbal formulation by HPTLC	Dr. MC Damle	2022-23	5782.00 Paid 4900.00 +GST Extra	Vaishnavi Shitole, Sweta Singh	Non-Government	View
13.	Formulation of Grapeseed extract	Dr. MR Bhalekar	2022-23	5664.00 Paid Rs. 9970.00 due to extra work done	Rutuja Londhe, Shrunalini Jadhav, Mayur Kulkarni	Non-Government	View
14.	Antimicrobial preparation of a herbal gel	Mr. Jitendra Gajbe, Mrs. Shivani Rao	2022-23	5546.00 Paid 4700.00 +GST Extra	Isha Kalbhor, Jeevan Bagul,	Non-Government	View
15.	Antimicrobial preparation of a herbal gel	Mr. Jitendra Gajbe, Mrs. Shivani Rao	2022-23	5530.00 Paid 4486.00 +GST Extra	Snehal Dombe, Mansi Gaikwad	Non-Government	View
16.	Herbal Anti-spasmodic Gel for relief of menstrual cramps	Dr. Reshma Mirajkar	2022-23	7000.00 Paid 8260.00 due to extra work done	Girya Kulkarni, Sakshi Bagal, Jyoti Kupate, Tanmay Kulkarni	Non-Government	View

					Nirmala Rajpurohit		
17.	Formulation of Fexofenadine co-crystals for improved dissolution	Dr Mangesh Bhalekar	2022-23	5546.00 Paid 4700.00 +GST Extra	VidhiDayade, Vishwajit Lad, SarveshChourange, Neha Bamane	Non-Government	View
18.	Solid state studies of an active pharma ingredient	Dr. Monica Rao	2022-23	4720.00 Paid 4000.00 +GST Extra	Isha Gadge, Saloni J, Gargi Nikam, Saurav Kulkarni	Non-Government	View
19.	To formulate and evaluate Carimor tablets for management of Dengue	A N Avlaskar	2022-23	5900.00 Paid 5000.00 +GST Extra	Vaishnavi Nikam, R Shingavi, Divyesh Jain	Non-Government	View
20.	Development of HPTLC method for estimation of Lupeol from Kanchan Bark extract and marketed product	Dr M C Damle	2022-23	6101.00 Paid 9970.00 due to extra work done	Rutuja Londhe, Uttekar Pranav, AwadJayesh	Non-Government	View
21.	Development and validation of spectrophotometric method for determination of drugs	Dr S V Gandhi	2022-23	5200.00	Pratiksha Waghmare, IshwariSapkal, Sakshi Wable	Non-Government	View
22.	Formulation and evaluation of Liposome for cancer targeting	Dr. Mangesh Bhalekar	2022-23	12555.00 Paid 10640.00 +GST Extra	Manju Choudhary Ashokrao Mane college of Pharmacy Petwadgaon, pune	Non-Government	View

23.	Formulation of solid dispersion	Dr. Mangesh Bhalekar	2022-23	5251.00 4450.00 +GST Extra	Jagtap Punjiram	Non-Government	View
24.	Formulation Filling, Sealing and Evaluation of gel	Dr. Mangesh Bhalekar	2022-23	30000.00 Paid 62000.00 due to extra work done	Indus Biotech Private Ltd.	Non-Government	View
25.	Development and validation of UV spectrophotometric method for estimation of Ritonavir in bulk, tablet dosage form and dissolution medium	Dr. S.V. Gandhi	2022-23	7080.00 Paid 23700.00 due to extra work done	Shi-Etsu Chemicals, Tylose India Pvt. Ltd, Thane	Non-Government	View

Dr. Rajendra Dighe

AISSMS
College of Pharmacy
Pune-1
Inward No. 128-②
Date: 19.01.2023



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Ref NO:- COP/PN/2022-23/115 -①

Date: 05/12/2022

To,

Hon. Secretary

All India Shri Shivaji Memorial Society,
Shivajinagar,
Pune- 411005.

9/12
Date: 28/12/2022

9/12
19/1/23

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

Respected Sir,

Please find enclosed research proposal titled, "DESIGN AND DEVELOPMENT OF POTENTIAL ANTIVIRAL AGENTS USING MOLECULAR MODELLING STUDIES" under Category outside Research Project (Format B) for your approval.
You are requested to do the needful at the earliest.

Thanking you.

Dr. S. V. Bhandari
(Chief Investigator)

Dr. M. C. Damle
(Project Co-ordinator)

Dr. M. R. Bhalekar

Dr. Ashwini R.
(Principal) madgulkar
Principal

AISSMS College of Pharmacy
Pune-1

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

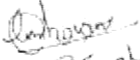

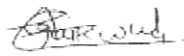

Subject: Permission for self supported short term research project.

Respected Madam,

I the undersigned would like to undertake a short term self supported research project under the guidance of Dr. S.V. BHANDARI.

The duly filled format has been enclosed for your kind information and approval

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

- ✓ 1. Chavan Lalit Manoj 
2. Jopale Bhushan Manohar 
3. Gaikwad Gaurav Vasant 
4. Bharambe Mayur Sanjay 



shashikant bhandari <shashikantbhandari2011@gmail.com>

Request to Permit us to carry out self supported short term research project at your institute..

2 messages

Rajendra dighe <digherd@gmail.com>
To: shashikantbhandari2011@gmail.com

Mon, Dec 12, 2022 at 1:49 PM

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

Respected Madam,

I the undersigned would like to undertake a short term self supported research project under the guidance of **Dr. S.V Bhandari**, duly filled format has been enclosed for your kind information and approval . I will complete all the required office formalities as per the guidelines/protocol for Out side Research Institute's project of your college.

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

Thanking you.

Yours sincerely

Dr. Dighe Rajendra Dnyandeo
Associate Professor
Pharmaceutical Department
K.B.H.S.S Trust's Institute of Pharmacy, Nashik

shashikant bhandari <shashikantbhandari2011@gmail.com>
To: Rajendra dighe <digherd@gmail.com>

Mon, Dec 12, 2022 at 2:00 PM

THANKS DEAR DR RAJENDRA SIR

[Quoted text hidden]

--
"Be nice to people on your way up
because you might meet 'em
on your way down."

Thought for the Day

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

Name of Applicant : Dr. Rajendra D.Dighe (through Dr.S.V Bhandari)
Complete postal address : K.B.H.S.S. Trust's Institute of Pharmacy, Malegaon Nashik

Title of Project : DESIGN AND DEVELOPMENT OF POTENTIAL ANTIVIRAL
AGENTS USING MOLECULAR MODELING AND DOCKING STUDIES .

Proposed duration of Project : 03 months
Ref. No. and date of application through proper channel :
Proposed Expenditure :

Sr. No.	Parameter	Amount (INR)
1	Infrastructure utility fees. (25 % of total charges)	3125/-
2	Society processing fees. (25% of total charges)	3125/-
3	Staff remuneration (50 % of total charges)	6250/-
4	Total cost of actuals.	NIL*
	Grand Total (50 hours * 250)	12,500
	GST @18%	2250
	Net Payable	14750

(Name and Signature of Chief Investigator)

-NOTE Since this project do not require any consumables, the cost of actuals is NIL
However the use of software is involved and hence as per above. Following are the basic
charges we have finalised based on no. of hours of use (Rs. 250/Hr of molecular
modelling software and involvement of our staff expertise, the entire cost is divided as
above.

DETAILS OF ACTUALS

Details of consumables required for the project:

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
	2D QSAR	10	2500
	3D QSAR	20	5000
	Docking , ADMET, DFT Studies.	20	5000

In this case total charges are Rs 12,500/-. The break up is as mentioned above.

DR. SHASHIKANT V BHANDARI
(Name and Signature of Chief Investigator)

(Accountant sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled- "Design and development of Potential Antiviral agents using Molecular Modeling Studies".

to be conducted between 10 Jan 2023 to 13 April 2023

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.

Bhander
Dr. S. V. Bhander

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Design and Development of potential Antiviral Agents using Molecular modeling studies"

A.I.

(Hon. Secretary, AISSMS Pune)

Hon. Secretary

All India Shri Shivaji Memorial Society
Pune-411 005.

POST APPROVAL DETAILS

Details of Payment : 14,750/- from Dr. Rajendra Dighe

Challan No. with Date : 1565 dated.

Amount : Rs. 14750/-

(Kindly enclose Xerox copies of Application and Challan)

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

M. Samle
M. Samle
M. R. Shalekar
M. R. Shalekar

(Name and signature of Project -Coordinator)

GUIDELINES FOR OUTSIDE STUDENT RESEARCH PROJECTS (Format B)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor.
4. To the above figure following charges shall be charged extra to the student:
 - a. 10% of the Actuals: As infrastructure utility fees
 - b. 10% of the Actuals: As processing charges to the society.
 - c. 20% of the Actuals: As staff remuneration
 - d. **GST @18% on the total amount is to be charged.**
5. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-B) to the society thru principal for approval.
6. The actual experimental work shall be started only after approval from the society.
7. The student investigator/s shall be appointed by the Chief Investigator.
8. The outside student can utilise the facilities until the duration of the project provided under the supervision of the Chief Investigator.
9. After completion of the approved research project, Chief Investigator shall put forward the summary report to the society for the disbursement of remuneration to the staff.
10. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
11. 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 collect 100% amount as an advance from the sponsor after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsor then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the College account (contact Accounts Officer for A/c number) against which the official receipt shall be issued to the sponsor.

Used with Application)

C

AISSMS

College of Pharmacy (M.Pharm)

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

Challan No.: 1565 Date: 19/01/23

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5Received from Mr./Miss Dr. Rajendra Dighe
(Student - Lalit M. Chavan) Malegaon

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Protect fees	12,500/-
GST	2250
14) Dated - 19/01/23	
15) (UTR NO-30195337	
16) 2822)	
TOTAL Rs.	14750/-

Total in words Rupees Fourteen thousand
Seven hundred fifty

Accept the amount as above _____

Checked By

Deposited By

(For Candidates)

D

AISSMS

College of Pharmacy (M.Pharm)

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

Challan No.: 1565 Date: 19/01/23

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5Received from Mr./Miss Dr. Rajendra Dighe
(Student - Lalit M. Chavan) Malegaon

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) Interim Fee.....	
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3) Development Fees.....	
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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) Protect fees	12,500
GST	2250
14) Dated - 19/01/23	
15) (UTR NO-30195337	
16) 2822)	
TOTAL Rs.	14,750/-

Total in words Rupees Fourteen thousand
Seven hundred fifty

Accept the amount as above _____

Checked By

Deposited By



Transaction Successful
03:34 pm on 19 Jan 2023

Paid to



XXXXXXXXXX0881

Bank Of Baroda

₹14,750



Transfer Details



Transaction ID

T2301191534188100353769

Debited from

*****0039

₹14,750

UTR: 301953371122

Powered by

UPI



AISSMS
COLLEGE OF PHARMACY
IMPARTING EXCELLENCE IN EDUCATION & RESEARCH



OUTSIDE RESEARCH PROJECT COMPLETION REPORT

13/04/2023

Title of Project: 'DESIGN AND DEVELOPMENT OF POTENTIAL ANTIVIRAL AGENTS USING MOLECULAR MODELLING AND DOCKING STUDIES'

Name of Research Scholar: Dr. Rajendra D. Dighe

Name of Principal Investigator: Dr. Shashikant V. Bhandari

Duration of Project: 10 Jan 2023 to 13 April 2023 (03 months)

Sr. No.	Studies Planned and Status	Status
01	Guidance for referencing, Literature Study, Reading of Scientific Research Papers and Thesis for the studies required .- 2D QSAR studies	Completed
02	Guidance for Reading of SOPs, Mol Modeling software Manuals etc-3D QSAR studies	Completed
03	Demo and 2D QSAR studies	Completed
04	Demo and 3D QSAR studies	Completed
05	Demo and Molecular Docking and Molecular Modelling Studies determination of ADMET parameters	Completed

Record of Study Plan :

Sr. No.	Day and Date	Type of Work	Signature of Chief Investigator
01	Monday 27/03/2023 (Virtual)	Referencing, Literature Study, Reading of Scientific Research Papers and Thesis	
02	Tuesday 28/03/2023 (Virtual)	Reading of SOPs, Manuals etc	
03	Tuesday 11/04/2023	Training of software for 2D QSAR, 3D QSAR work	
03	Wednesday 12/04/2023	Molecular Docking and Molecular Modelling Studies determination of ADMET parameters	
04	Thursday 13/04/2023	Molecular Docking and Molecular Modelling Studies determination of ADMET parameters	

Sign-

Dr. Shashikant V Bhandari

(Name and signature of Chief Investigator)

Acknowledgement- Received all the project related data, results and discussion, conclusion

Sign-

Dr. Rajendra D. Dighe

Research Scholar

Date- 13/04/2023

Place-PUNE

BACK TO INDEX

Rajnikant Ghotane



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COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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2F, 12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade



AISSMS
College of Pharmacy
Pune-01
Inward No. 128-1
Date: 19.01.2023

Ref NO:- COP/PN/2022-23/115-(2)

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivajinagar,
Pune- 411005.

AISSMS
9/13
Date: 28/12/2022

Date: 06/12/2022


9/13
14/1/23


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


Respected Sir,

Please find enclosed research proposal titled, "DESIGN AND DEVELOPMENT OF POTENTIAL ANTICANCER AGENTS USING MOLECULAR MODELLING AND DOCKING STUDIES" under Category outside Research Project (Format B) for your approval.
You are requested to do the needful at the earliest.

Thanking you.


Dr. S. V. Bhandari
(Chief Investigator)


Dr. M. C. Damle, Dr. M. R. Bhalekar
(Project Co-ordinator)


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,

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

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

Thanking you.

Yours sincerely



(Mr. R. B. Ghotane)

shashikant bhandari <shashikantbhandari2011@gmail.com>

mail
n for the project

otane <rajanikantghotane@gmail.com>
handari <Shashikantbhandari2011@gmail.com>

Fri, Dec 9, 2022 at 11:09 PM

ge of Pharmacy,
d,

est to Permit us to carry out self supported short term research project at your institute..

dam,
ned would like to undertake a short term self supported research project under the guidance of Dr.
ari, duly filled format has been enclosed for your kind information and approval .

all the required office formalities as per the guidelines/protocol for Out side Research Institute's
college.

d, if you consider my request and permit us for the same.

Yours sincerely

ane)
ssistant Professor

Chrmistry
e College of Pharmacy, Peth Vadgaon, Kolhapur

e

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

Name of Applicant : Mr. Rajanikant B. Ghotane Through Dr. S.V Bhandari
Complete postal address : Parvati, 102 A. Shivajinagar. A/P: Peth Vadgaon
Tal: Hatkanangale, Dist: Kolhapur 416 112
Title of Project : DESIGN AND DEVELOPMENT OF POTENTIAL ANTICANCER
AGENTS USING MOLECULAR MODELING AND DOCKING STUDIES .

Proposed duration of Project : 03 months
Ref. No. and date of application through proper channel :
Proposed Expenditure :

Parameter	Amount (INR)
Infrastructure utility fees. (25 % of total charges)	3125/-
Society processing fees. (25% of total charges)	3125/-
Staff remuneration (50 % of total charges)	6250/-
Total cost of actuals.	NIL*
Grand Total (50 hours * 250)	12,500
GST @18%	2250
Net Payable	14750

Name and Signature of Chief Investigator)

NOTE Since this project do not require any consumables, the cost of actuals is NIL
However the use of software is involved and hence as per above. Following are the basic
charges we have finalised based on no. of hours of use (Rs. 250/Hr of molecular
modelling software and involvement of our staff expertise, the entire cost is divided as
above.

DETAILS OF ACTUALS

Details of consumables required for the project:

No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
	2D QSAR	10	2500
	3D QSAR	20	5000
	Docking , ADMET, DFT Studies.	20	5000

In this case total charges are Rs 12,500/-. The break up is as mentioned above.

Bhandari

P

UNDERTAKING


I undersigned hereby take responsibility of the project titled, 'DESIGN AND DEVELOPMENT OF POTENTIAL ANTICANCER AGENTS USING MOLECULAR MODELLING AND DOCKING STUDIES' to be conducted between 10 Jan 2023 to 13 April 2023

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, 'DESIGN AND DEVELOPMENT OF POTENTIAL ANTICANCER AGENTS USING MOLECULAR MODELLING AND DOCKING STUDIES'


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

POST APPROVAL DETAILS

Details of Payment Rs. 14750/- from Mr. Rajanikant B. Ghotane

Challan No. with Date : 1564 dated 10/01/2023

Amount: Rs. 14750/-

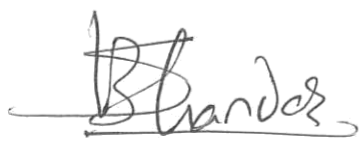
(Kindly enclose Xerox copies of Application and Challan)

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


(Name and signature of Project -Coordinator)


(Dr. M.R. Bhalekar)

Mr. R.B. Ghotane has attended demo. & mol. modeling studies sessions on the above project on 11th April to 13th April 2023.


Dr. S.V. Bhandari

GUIDELINES FOR OUTSIDE STUDENT RESEARCH PROJECTS (Format B)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
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sed with Application)

C

AISSMS
College of Pharmacy (M.Pharm)

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

Challan No.: **1564** Date: **10/01/2023**

Amount credited on A/C No.: **04510200000881** in the

BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss **Rajnikant Ghotane**

RBCOP, Peth Wadgaon Kolhapur

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Protect Fees	12,500/-
13) GST	2250
14) Dated - 10/01/23	
15) UTR-AXMB23010324	
16) 3420	

Payment Complete

SENT TO

AC AISSMS
XXXX-0881

AMOUNT
₹ 14,750.00

BRANCH:

SHIVAJI NAGR BRANCH

IFSC:

BARB0SHIPOO

REMARKS:

SENT FROM

 XXXX-6278
SA

Payment Details

MODE:

Standard Pay

RECEIPT NO:

JGE6PJLI0248

UTR:

AXMB230103243420

DATE:

10/01/2023



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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



OUTSIDE RESEARCH PROJECT COMPLETION REPORT

Title of Project: 'DESIGN AND DEVELOPMENT OF POTENTIAL ANTICANCER AGENTS USING MOLECULAR MODELLING AND DOCKING STUDIES'

Name of Research Scholar: Mr. Rajanikant B. Ghotane

Name of Principal Investigator: Dr. Shashikant V. Bhandari

Name of Ph.D. Research Guide- Dr. Manoj S. Charde

Duration of Project: 10 Jan 2023 to 13 April 2023 (03 months)

Sr. No.	Studies Planned and Status	Status
01	Guidance for Referencing, Literature Study, Reading of Scientific Research Papers and Thesis for the studies required .- 2D QSAR studies	Completed
02	Guidance for Reading of SOPs, Mol Modeling software Manuals etc-3D QSAR studies	Completed
03	Demo and 2D QSAR studies	Completed
04	Demo and 3D QSAR studies	Completed
05	Demo and Molecular Docking and Molecular Modelling Studies determination of ADMET parameters	Completed

Record of Study Plan :

Sr. No.	Day and Date	Type of Work	Signature of Chief Investigator
01	Monday 27/03/2023 (Virtual)	Referencing, Literature Study, Reading of Scientific Research Papers and Thesis	
02	Tuesday 28/03/2023 (Virtual)	Reading of SOPs, Manuals etc	
03	Tuesday 11/04/2023	Training of software for 2D QSAR, 3D QSAR work	
03	Wednesday 12/04/2023	Molecular Docking and Molecular Modelling Studies determination of ADMET parameters	
04	Thursday 13/04/2023	Molecular Docking and Molecular Modelling Studies determination of ADMET parameters	

Sign-

Dr. Shashikant V Bhandari

(Name and signature of Chief Investigator)

Dr. Shashikant V. Bhandari
Professor and Head of Department
Pharmaceutical Chemistry

Acknowledgement-

Received all the project related data, results and discussion, conclusion

Sign-

Mr. Rajanikant B. Ghotane

Principal Investigator

Date- 13/04/2023

Place- Pune

[BACK TO INDEX](#)



(Enclosed with Application)

Asha Suryawanshi

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.:

2814

Date: 12/4/23

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

Received from Mr./Miss Asha suryawanshi

Class

Year 2023 - 2024

Particulars	Amount Rs.
1) Interim Fee.....	-
2) Education 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.....	-
12) Eligibility Fee.....	-
13) Other Fee.....	-
14) Outside student project	3540/-
15).....	-
16) UTR: 310 210 106874	-
TOTAL Rs.	3540/-

Total in words Rupees Three thousand five hundred & forty only

Accept the amount as above



Checked By

K. K. D. Asguntan

Deposited By

AISSMS
College of Pharmacy
Pune-1

Inward No. 154/92
Date. 31.03.2023



AISSMS

COLLEGE OF PHARMACY

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2F,12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade



COP/PN/2022-23/1724-10
To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

Date: 16/3/2023

Date: 5 MAR 2023

Sub: Submission of proposal of sponsored research project (Outside research project) for approval.

Respected Sir,

Please find enclosed research proposapl titled, "Docking studies of Pyrazine Oxadiazole derivatives for Antitubercular activity" under Category Outside Research Project (Format B) for your approval. You are requested to do the needful at the earliest.

Thanking you.

(Principal)

Dr. Ashwini R Madgulkar

Principal

AISSMS College of Pharmacy

Pune-1

(Project Co-ordinator)

Dr M C Damle, Dr M R Bhalekar

(Chief Investigator)

Mrs K D Asgaonkar,
Mrs S M Patil

To,

The Principal,

AISSMS College of Pharmacy,

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

Subject: Permission for sponsored research project (Outside research project).

Respected Madam,

I the undersigned would like to undertake a sponsored research project (Outside research project) research project under the guidance of Mrs. K D Asgaonkar and Mrs S M Patil .The duly filled format has been enclosed for your kind information and approval

I will be obliged, if you consider my request and permit me for the same.

Thanking you.

for for Yours sincerely
(Name and signature of Students)

Mrs Asha Suryawanshi

SMR/KD/MSB/MCD
31/03/2023

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

Name of Applicant: Mrs Asha Suryawanshi

Complete postal address: Dept of Pharmaceutical Chemistry Shri D.D. Vispute College of Pharmacy, New Panvel

Title of Project: Docking studies of Pyrazine Oxadiazole derivatives for Antitubercular activity

Proposed duration of Project: 1 month

Ref. No. and date of application through proper channel: 03/03/2023

Proposed Expenditure:


Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees. (25% of Total charges)	750/-
2	Society processing fees. (25% of Total charges)	750/-
3	Staff remuneration (50% of Total charges)	1500/-
4	Total cost of actuals.	Nil
5.	Total charges	3000
	Grand Total including GST 18%	3540

DETAILS OF ACTUALS

Details of consumables required for the project: Nil

DETAILS OF TOTAL CHARGES



Sr. No.	Item	Charges	Total Cost (Rs)
1	Schrodinger software -Docking studies	12 hours(12x 250)	3000
Grand total			3000


(Name and Signature of Chief Investigator)
Mrs K D Asgaonkar, Mrs S M Patil


(Accountant sign)
Mr M M Chopane


UNDERTAKING

I undersigned hereby take responsibility of the project titled," Docking studies of Pyrazine Oxadiazole derivatives for Antitubercular activity" 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.

 
Mrs K D Asgaonkar, Mrs S M Patil
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Docking studies of Pyrazine Oxadiazole derivatives for Antitubercular activity".


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

POST APPROVAL DETAILS


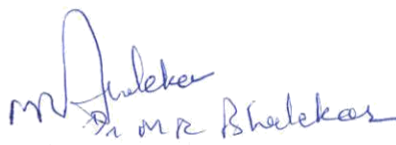
Details of Payment : *UTR-310210106874*

Challan No. with Date : *2814, 1214123*

Amount : *Rs.3540/-*

(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)



kalyani asgaonkar <kalyani_a@aissmscop.com>

Application for molecular docking studies

2 messages

Asha Dharme <ashbdharme@gmail.com>

3 March 2023 at 18:58

To: "kalyani_a@aissmscop.com" <kalyani_a@aissmscop.com>

Dear Ma'am,

I am Asha Dharme(Mrs.Asha suryawanshi) PhD Scholar.I am applying for molecular docking studies of my designed compounds.

With the Herewith list of structures,I also attached the target protein in gz format.

I want molecular docking studies for these molecules.I want result analysis with binding receptors.

.All images related to docking studies.Energy ,Hydrogen bonding, Van Der waal force .mostly binding amino acids.

Kindly find the attachment.

Thank You & Regards**Mrs. Asha G. Suryawanshi****Assistant Professor****Pharmaceutical Chemistry****Shri D.D. Vispute College of Pharmacy, New Panvel**

2 attachments **3qxi.cif.gz**
275K **10 structures ASHA SURYAWANSHI.docx**
44K

kalyani asgaonkar <kalyani_a@aissmscop.com>

3 March 2023 at 20:01

To: Ashwini sagar <ashwinisagar97@gmail.com>

[Quoted text hidden]

2 attachments **3qxi.cif.gz**
275K

Yash Joshi

(Enclosed with Application)

C

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.:

3457

Date : **08 / 06 / 2023**

Amount credited on A/C No.: **04510200000882** in the

BANK OF BARODA, Shivajinagar, Pune - 5

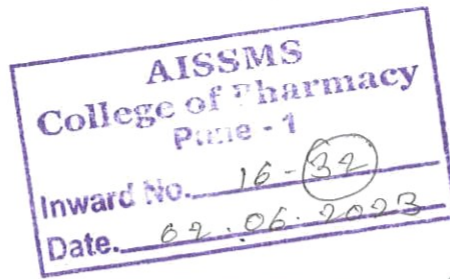
Received from Mr./Miss

Yash Joshi

Outside student project

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) Interim Fee.....	
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.....	
12) Eligibility Fee	
Other Fee	
14) outside student project	2500h
UPI trans. ID.	
15)	



AISSMS
COLLEGE OF PHARMACY



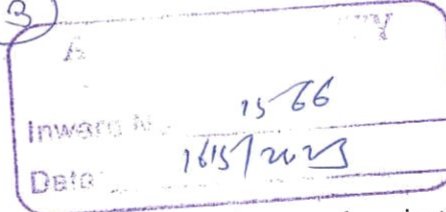
Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,
2F,12B recognition by UGC, Affiliated to Savitribai Phule Pune University
Accredited by NAAC with A Grade

COP/PM/2023-24/25-3

Date:

15 MAY 2023

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.



1566
31/05/23

Sub: Submission of proposal of sponsored research project (Outside research project) for approval.

Respected Sir,

Please find enclosed research proposal titled, "Docking studies of drug with different polymers" under Category Outside Research Project (Format B) for your approval. You are requested to do the needful at the earliest.

Thanking you.

(Principal)
Dr. Ashwini R Madgulkar

(Project Co-ordinator)
Dr M C Damle, Dr M R Bhalekar

(Chief Investigator)
Mrs K D Asgaonkar,
Dr T S Chitre

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 sponsored research project (Outside research project).

Respected Madam,
I the undersigned would like to undertake a sponsored research project (Outside research project) research project under the guidance of Mrs. K D Asgaonkar and Dr T S Chitre. The duly filled format has been enclosed for your kind information and approval .
I will be obliged, if you consider my request and permit me for the same.

Thanking you.

Yours sincerely
(Name and signature of Students)
Mr Yash Joshi

KA/psc/MRB/MCD

05/06/2023

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

Name of Applicant: Mr Yash Joshi

Complete postal address: Ramanbhai Patel College of Pharmacy, Gujarat

Title of Project: Docking studies of drug with different polymers

Proposed duration of Project: 1 week

Ref. No. and date of application through proper channel: 10/05/2023

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees. (25% of Total charges)	625/-
2	Society processing fees. (25% of Total charges)	625/-
3	Staff remuneration (50% of Total charges)	1250/-
4	Total cost of actuals	Nil
5.	Total charges	2500/-
	Grand Total including GST 18%	2950/-

DETAILS OF ACTUALS

Details of consumables required for the project: Nil

DETAILS OF TOTAL CHARGES

Sr. No.	Item	Charges	Total Cost (Rs)
1	Schrodinger software -Docking studies	10 hours(10x 250)	2500
Grand total			2500

(Name and Signature of Chief Investigator)


Mrs K D Asgaonkar, Dr T S Chitre

(Accountant sign)

Mr M M Chopane


UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Docking studies of drug with different polymers" 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.


Mrs K D Asgaonkar, Dr T S Chitre
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Docking studies of drug with different polymers".


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

POST APPROVAL DETAILS

Details of Payment : UPI trans. ID 315992532160

Challan No. with Date : 3457, dated : 8/6/23

Amount Rs 2950/-

(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)



kalyani asgaonkar <kalyani_a@aissmscop.com>

Regarding Molecular docking study of Drug with polymer

6 messages

10 May 2023 at 15:19

Yash Joshi <yashjoshi9956@gmail.com>
To: "kalyani_a@aissmscop.com" <kalyani_a@aissmscop.com>

Hello Dear, Ma'am
My self Yash Joshi. I am from Ramanbhai Patel College of Pharmacy

I study on drug and some polymer for formulation and development of solid dispersion. I want to do molecular docking between my drug and polymers which are used in my formulation.

to understand the stability of my formulation and drug bind with the polymer so which bonds are formed and their bond strength i have to measure, this can be done by molecular docking.

I am from pharmaceutical department so i doesn't have much knowledge about docking analysis but if you help me out and doing docking analysis it is very appreciable for me and i acknowledge you in my research work.

so Please give a reply regarding this

10 May 2023 at 16:01

kalyani asgaonkar <kalyani_a@aissmscop.com>
To: Yash Joshi <yashjoshi9956@gmail.com>

Dear Sir
We can carry out this study. Let us discuss the details. Kindly call me tomorrow at 9 am.

Regards

K.D Asgaonkar
Asst. Prof
Dept of Pharm. Chemistry
AISSMS College of Pharmacy
Pune
9987013190
[Quoted text hidden]

10 May 2023 at 17:01

Yash Joshi <yashjoshi9956@gmail.com>
To: kalyani asgaonkar <kalyani_a@aissmscop.com>

Ok, will do that.
[Quoted text hidden]

11 May 2023 at 10:33

Yash Joshi <yashjoshi9956@gmail.com>
To: kalyani asgaonkar <kalyani_a@aissmscop.com>

Hello good morning ma'am
here i attached .cdx file of my drug and my 3 polymer structures
Drug: Azathioprine
Polymer 1: HPMC E 50
Polymer 2: poloxamer 188
Polymer 3: soluplus

For molecular docking comparison of drug with different polymers

[Quoted text hidden]

4 attachments

(Enclosed with Application)

C

Praful Mazi

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.:

3154

Date: 12/08/22

Amount credited on A/C No.: 04510200000882 in the

BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss

Praful Mazi

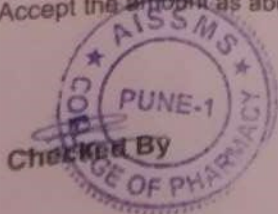
So A Univ. Bhubaneswar, Odisha

Class _____ Year 2022 - 2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee ..Project fees 4620-00 657 (18%) 832-00	
14) 1ms-234216151192	
15) _____	
16) _____	
TOTAL Rs.	5452-00

Total in words Rupees Five thousand four hundred fifty two only -

Accept the amount as above



Deposited By

(Enclosed with Application)

C

Dr. Akansha Gujrati

(For Candidates)

D

AISSMS
College of Pharmacy (M.Pharm)

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

Challan No.: **1690**

Date: 2 / 3 / 23

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

Received from Mr./Miss Dr. Akansha Gujrati

D.Y. Patil Dental College Pune.

Class _____ Year 2012 - 2013

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Project Fee +	8052
Gst @ 18%.	549
13) UTR no 306193195095	
14)	
15)	
16)	
TOTAL Rs.	3601/-

Total in words Rupees three thousand six
hundred one.

Accept the amount as above _____



Checked By

Deposited By

M.R. Bhalekar

AISSMS
College of Pharmacy (M.Pharm)

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

Challan No.: **1690**

Date: 2 / 3 / 23

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

Received from Mr./Miss Dr. Akansha Gujrati

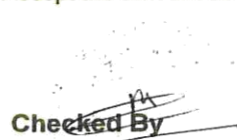
D.Y. Patil Dental College Pune.

Class _____ Year 2012 - 2013

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Project Fee +	3052
Gst @ 18%.	549
13) UTR no 306193195095	
14)	
15)	
16)	
TOTAL Rs.	3601/-

Total in words Rupees three thousand six
hundred one.

Accept the amount as above _____



Checked By

Deposited By

M.R. Bhalekar

COP/IN/2022-23/84-(2)

Date:

7 OCT 2022

To,

Hon. Secretary

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

AISSMS SOCIETY
PUNE
Inward No. 6595
Date: 12/10/2022

AISSMS
College of Pharmacy
Pune-1
Inward No. 98-99
Date: 16-11-2022

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

Respected Sir,

Please find enclosed research proposal titled, " formulation of grape seed extract mousse " under Category Outside Research Project (Format B) for your approval. You are requested to do the needful at the earliest.

Thanking you.

M. Bhalekar
(Chief Investigator)

M. Bhalekar *M. Bawle*
(Project Co-ordinator) (M. Bawle)

(Dr. Mangesh Bhalekar) *(Dr. Mangesh Bhalekar)*

A. G. G. G.
(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,

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.

MARB / MRB / MCB / MNC
A. G. G. G.
10/10/2022

Yours sincerely
(Name and signature of Students)

A. G. G. G.
Dr. Akanksha Gujarathi

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

Name of Applicant : Dr Akanksha

Complete postal address : BV DU Dental College, Katraj, Pune.

Title of Project : , " formulation of grape seed extract mousse "

Proposed duration of Project : 03 months

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

Proposed Expenditure :

Sr. No.	Parameter	Amount (INR)
1	Infrastructure utility fees. (10% of actuals)	218=00
2	Society processing fees. (10% of actuals)	218=00
3	Staff remuneration (20% of actuals)	436=00
4	Total cost of actuals.	2180=00
	Grand Total	3052=00
	GST @18%	549=00
	Net Payable	3601=00

DETAILS OF ACTUALS

Details of consumables required for the project:

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
1.	Sodium carboxy methyl cellulose	500 g	1200=00
2.	Propylene glycol	500 ml	810=00
3.	Talc	100 g	170=00
4.	xylitol		
Grand total			2180=00

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

Dr Mangesh Bhalekar

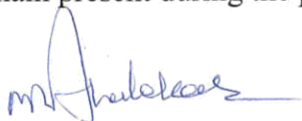
(Accountant sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled," " formulation of grape seed extract mousse "

to be conducted between 15 Oct -15 Dec 2022

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.



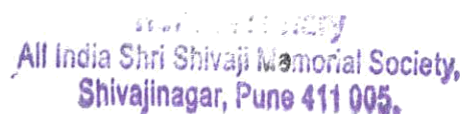
(Name and signature of Chief Investigator)
Dr Mangesh Bhalekar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, " formulation of grape seed extract mousse "



(Hon. Secretary, AISSMS Pune)


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

POST APPROVAL DETAILS

Details of Payment :

Challan No. with Date :

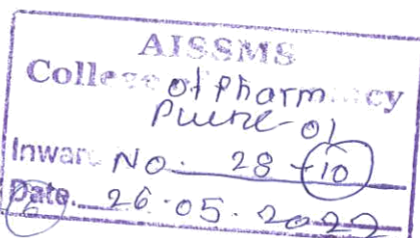
Amount :

(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)

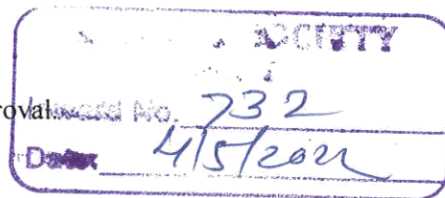
Indus Biotech



Date: 27 APR 2022

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, "Synthesis of chromium amino acid nicotinic acid chelates" under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

Thanking you.

(Principal)

Principal
AISSMS College of Pharmacy
Pune-1

(Project Co-ordinator)

M. S. Samle
Dr M. R. Bhulekar

(Chief Investigator)

K-D. Asgaonkar

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,

I / We the undersigned would like to undertake Industry sponsored short term research project under the guidance of Mrs. K.D Asgaonkar

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.

Yr
Yours sincerely
(Name and signature of Industry Personel)
For Indus Biotech

KA/MCD
MBB
26/05/2022

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A)

Name of the Industry: Indus Biotech

Complete postal address: Plant 1, Gate no. 351, Near Ghotawde Phata, Village Bhare,
Tal. Mulshi, Pirangut, Pune - 412111.

Title of Project: Synthesis of chromium- amino acid nicotinic acid chelates

Proposed duration of Project: 3 months

Ref. No. and date of letter through proper channel: Email dated 2nd march 2022(Copy enclosed)

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Total cost of actuals.(Details are mentioned below)	Chemicals are being provided by Indus Biotech
2	Infrastructure utility fees.(50% of actuals)	1250/-
3	Society processing fees. .(50% of actuals)	1250/-
4	Staff remuneration .(same as actuals)	2500/-
5.	GST 18%	900/-
	Grand Total	5900/-

DETAILS OF ACTUALS- NA

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
Grand total			

K.D. Asgaonkar 
(Name and Signature of Chief Investigator)


(Accountant sign)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

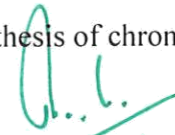
I undersigned hereby take responsibility of the project titled, "Synthesis of chromium amino acid chelates" to be conducted between June-Aug 2022.

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, "Synthesis of chromium amino acid nicotinic acid chelates"


(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 : 1697

Amount : 5900/- Rs

(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)  D. M. R. Bhalekar



kalyani asgaonkar <kalyani_a@aissmscop.com>

Metal Chelate

2 messages

Sunil Ramdasi <sunil.ramdasi@indusbiotech.com>

2 March 2022 at 13:19

To: kalyani asgaonkar <kalyani_a@aissmscop.com>

Cc: Bhushan Bhale <bhushan.bhale@indusbiotech.com>

Dear Madam,

Greetings

As per our previous communication, we will initiate this assignment of Chromium Metal Chelate now. One Mr. Bhushan Bhale, M.Pharm will co-ordinate with you on the same. He will visit you tomorrow at 11 am to discuss and plan further line of action.

Since I am travelling from tomorrow till Sunday, we will discuss further.

Meantime if you could detail him and plan a reaction, will help us to expedite this project.

Scope :

1. Reaction : Chromium-AA-Nicotinate Chelate
2. Structural Elucidation
3. Elemental Analysis
4. Chelate confirmation report

Hope this is fine. If any suggestions or questions , you can speak to me any time to discuss.

C. No. 04510200000881

(For Candidates)

D

AISSMS College of Pharmacy (M.Pharm)

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

Challan No. **1697**

Date : 28 / 12 / 2022

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

Received from Mr./Miss Indus Biotech

Class _____ Year 2022 - 2023

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) <u>Industry project</u>	<u>5000</u>
13) <u>AST 18-1.</u>	<u>900</u>
14)	
15)	
16)	
TOTAL Rs.	5900

Total in words Rupees Five thousand nine
hundred only

Accept the amount as above _____



Checked By _____

16 K.D. Asgarkar
Deposited By

(Enclosed with Application)

C

AISSMS
College of Pharmacy (M.Pharm)

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

Challan No.: **1542**

Date: 19/12/2022

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

Received from Mr./Miss Inclus Bstotech Ltd

Rahul Residency, Bandhura, Pune

Class Industry Project Year 2022 - 2023

Particulars	Amount Rs.
1) * * * * * Fee.....	
2) * * * * * 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.....	
12) Industry Project (KPTLC Project)	15,000/-
13) GST @ 18%	2700/-
14) NEFT NO.	
15) KKBK222948414703	
16) TOTAL Rs.	17,700/-

Total in words Rupees Seventeen Thousand
seven Hundred only

Accept the amount as above

Checked By

Deposited By



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN THE AREA OF PHARMACY EDUCATION

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

AISSMS
College of Pharmacy
Pune - 1

Inward No. 12571
Date: 19-01-2023



COP/PM/2022-23/123-5

Date: 20/12/2022

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, "HPTLC Estimation of Cinnamtannin B1 from Powder Extract and Capsule Blend" under Category Industry Project (Format A1) for your approval. You are requested to do the needful at the earliest.

Thanking you.

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

M. R. Bhalekar *M. C. Damle*
Dr. M. R. Bhalekar Dr. M.C. Damle
(Project Co-ordinators)

Ashwini R. Madgulkar
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 Industry sponsored 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. Santosh V. Gandhi**. 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

Ankit Dugad
Ankit Dugad (Executive-F&D)
(Name and signature of Industry representative)

SVG/MRB/MCD
20/01/2023

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A1)

Name of the Industry: **MS Indus Biotech Ltd**

Complete postal address: **Rahul Residency, Salunkhe Vihar, Kondhwa, Pune**


Title of Project: **HPTLC Estimation of Cinnamtannin B1 from Powder Extract and Capsule Blend**

Proposed duration of Project: **01 Month**

Ref. No. and date of letter through proper channel: **Email dated 24/08/2022**

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Society processing fees. (35% of project amount)	5,250 = 00
2	Staff remuneration.(40% of project amount)	6,000 = 00
3	Administrative Charges	
	The Principal (15% of project amount)	2,250 = 00
	The accountant (10% of project amount)	1,500 = 00
	Grand Total	15000 = 00
	GST @ 18 %	2,700 = 00
	Grand Total	17,700 = 00


Dr. Santosh V. Gandhi

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.


Mr. M. M. Chopane
(Accountant sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled “HPTLC Estimation of Cinnamtannin B1 from Powder Extract and Capsule Blend”

to be conducted between 01/01/2023 to 31/01/2023

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

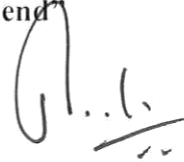


Dr. Santosh V. Gandhi

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, “HPTLC Estimation of Cinnamtannin B1 from Powder Extract and Capsule Blend”



Honorary Secretary
All India Shri Shivaji Memorial Society
55-56, Shivaji Nagar, Pune-411005

POST APPROVAL DETAILS

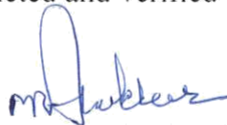
Details of Payment:

Challan No. with Date: 1542 dated 19/12/2022

Amount: RS. 17,700/-

(Kindly enclose Xerox copies of Application and Challan)

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



Dr. M. R. Bhalekar



Dr. M.C. Damle

(Name and signature of Project –Coordinators)

GUIDELINES FOR INDUSTRY SPONSORED PROJECTS (Format-A1)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor. In case, where all the consumables are provided by industry, the project cost will be calculated in terms of Society processing charges, administrative charges and remuneration to Principal investigator + support staff.
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-A1) 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 shall put forward the summary report in the prescribed format to the society through principal 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 collect 100% amount as an advance from the sponsor after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsor then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the college account against which the official receipt shall be issued the sponsor.



Gmail



Ramdasi



Google



Mail

Compose

Inbox

Starred

Snoozed

Important

Sent

Drafts

Categories

More

Labels

Delremo Solar 50 ..

Follow up

Misc

Priority

HPTLC Analysis External



Sumit Ramdasi

sunramdasi@gmail.com

Tue, 12 Aug '22

Dear Sir,

As discussed, we would like to analyse one of our product by HPTLC. COA is attached for your reference.

Product Details

1. IN002 Capsules
2. Net weight (without capsule) : 500 mg
3. Label Claim : Each Capsule contains 500 mg Cinnamomum Zylanicum hydroalcoholic Extract powder.
4. **Markers to be identified** : Cinnamtannin B1 from Powder Extract and capsule Blend
5. HPLC System used for product : Formic Acid (0.1%) : Acetonitrile
6. Req. : Qualitative & Quantitative analysis

We will forward COA shortly.

Today will discuss in detail when we meet in your lab.

Regards,

Sumit Ramdasi

M Pharm, DMM

Consultant-Formulation

Indus Biotech Ltd

R.H. No 1, Rahul Residency,

Off Salunkhe Vihar Road, Konchwa

Katol (M.S.)-411048 India



' सत्याला मरण नाही '

ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S
COLLEGE OF PHARMACY

(Approved by AICTE & PCI, New Delhi, Recognized by Govt. of Maharashtra
and Affiliated to Savitribai Phule Pune University)

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

www.aissmscop.com Email: contact@aissmscop.com College ID No.: PU/PN/Pharm/117/(1996)

26058208
26058204

Ref. No.: COP/PN/2022-23/85-①

Date : 6 OCT 2022

PROFORMA INVOICE

To
MS Indus Biotech Ltd
Rahul Residency, Salunkhe Vihar
Kondhwa, Pune

SN	Particulars	Amount
01	HPTLC Estimation of Cinnamtannin B1 from Powder Extract and Capsule Blend	15,000=00
	GST @ 18 %	2,700=00
		17,700=00

The payment should be made in favor of

Principal,
AISSMS College of Pharmacy, Pune
A/C No 04510200000881,
IFSC Code: BARB0SHIPOO (Fifth Letter is Zero),
GST No: 27AAATA1675TIZD

Dr. Ashwini R. Madgulkar

Principal
AISSMS College of Pharmacy
Pune-1

[BACK TO INDEX](#)

Suvarna Jarande

(Enclosed with Application)

C

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.: 2895

Date: 02/02/2023

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

Received from Mr./Miss Suvarna Jarande
(Phenotrap Solutions LLP.)

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) 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.....	-
12) Eligibility Fee	-
13) Other Fee <u>Tablet Punching Facility</u>	-
14) <u>Transaction ID - 1338714759</u>	-
15) <u>Total</u>	1100
16) <u>GST</u>	198
TOTAL Rs.	1298 /-

Total in words Rupees One Thousand Two
Hundred & Ninety Eight Only

Accept the amount as above _____



Checked By

SS Jarande

Deposited By

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: 2801 Date: 30/01/2023

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

Received from Mr./Miss Suvama Jarande
(Phenotrap Solutions LLP.)

Class _____ Year 201 - 201

Particulars	Amount Rs.
1) Admission 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.....	-
12) Eligibility Fee	-
13) Other Fee	-
14) <u>Total</u>	<u>3900/-</u>
15) <u>GST</u>	<u>702/-</u>
16) <u>Transaction ID</u> <u>1338227972</u>	
TOTAL Rs.	4602/-

Total in words Rupees Four thousand Six
Hundred and Two Rupees Only

Accept the amount as above _____



S. Jarande

Deposited By

AISSMS
College of Pharmacy
Pune - 1

Inward No. 133-8

Date. 02.02.2023



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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



COP/PM/2022-23/139-3

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.

Date:

16 JAN 2023



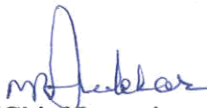
2162
20/1/2023

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

Respected Sir,

Please find enclosed research proposal titled, "Development of slow release pheromone tablets for integrated pest management of agricultural pests" under Category Industry Project (Format A1) for your approval. You are requested to do the needful at the earliest.

Thanking you.


(Chief Investigator)

(Dr. Mangesh Bhalekar)

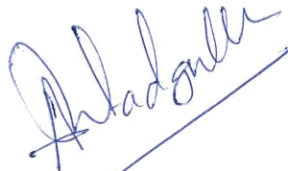


(Project Co-ordinator)

(Dr. M.R. Bhalekar)



(Dr. M.C. Dande)



(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 Industry sponsored 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
(Pherotrap solutions LLP)

MRB/MMC

02/02/2023

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A1)

Name of the Industry: Pherotrap solutions LLP

Complete postal address: Gat No 479, Gunawadi Moibag, Indapur Road, Baramati Dist Pune.

Title of Project: "Development of slow release pheromone tablets for integrated pest management of agricultural pests"

Proposed duration of Project: 03 Months

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

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1.	Society processing fees. (35% of project amount)	1750=00
2.	Staff remuneration.(40% of project amount)	2000=00
3.	Administrative Charges	750=00
	The Principal (15% of project amount)	500=00
	The accountant (10% of project amount)	
	Grand Total	5000=00
	GST @18%	900=00

Total

5900=00

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

Dr. Manjesh Bhalekar,

(Accountant sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development of slow release pheromone tablets for integrated pest management of agricultural pests" to be conducted between 1Feb to 30 April 2023

I 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 slow release pheromone tablets for integrated pest management of agricultural pests"



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

POST APPROVAL DETAILS

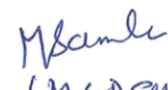
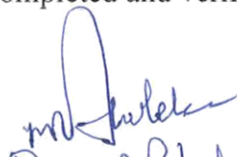
Details of Payment :

Challan No. with Date : 280182895 30/1/23 & 2/2/23

Amount : 5900 = 4602 + 1298

(Kindly enclose Xerox copies of Application and Challan)

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



Dr M R Bhalekar (M R Bhalekar)

(Name and signature of Project -Coordinator)

GUIDELINES FOR INDUSTRY SPONSORED PROJECTS (Format-A1)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor. In case, where all the consumables are provided by industry, the project cost will be calculated in terms of Society processing charges, administrative charges and remuneration to Principal investigator + support staff.
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-A1) 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 shall put forward the summary report in the prescribed format to the society through principal 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 collect 100% amount as an advance from the sponsor after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsor then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the college account against which the official receipt shall be issued the sponsor.



PHEROTRAP SOLUTIONS LLP

Gat No. 479, Gunawadi, Motibag, Indapur Road, Baramati, Dist.Pune.

• Email : info@pherotrap.com • Web : www.pherotrap.com • Mo : +91 9850704243

Ref. No.:PheroTrap/Letter/2022-11/01

Date :- 01/11/2022

To,
The Principal
AISSMS College of Pharmacy
Kennedy Road, Near R.T.O.,
Pune 411 001
Maharashtra, India.

Sub : Permission to use lab infrastructure for Tablet Compression.

Respected Madam,

Let me take this opportunity to introduce PheroTrap Solutions LLP. We are providing various solutions to farmers to grow their produce without using harsh pesticides. We are promoting Integrated Pest Management using various pheromone traps.

We would like use college lab facilities for compression of tablets for the project entitled as "Development of Slow Release Pheromone Tablets for Integrated Pest Management of Agricultural Pests".

The required charges will be paid as per institute's guidelines.

Request you to allow us.

Look forward to your positive reply.

Thanks and Regards,

Ganesh Kadam

Director



[BACK TO INDEX](#)

MRB/mcd
01/11/2022

Industrial Project (Dr. Monica R.P. Rao)
Pristino Pharma

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: 2791

Date: 7/12/2022

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

Received from Mr./Miss Pristino Pharma

Bijwe Plaza, Karve Nagar Pune 411052

Class _____ Year 2012 - 2013

Particulars	Amount Rs.
1) Terim 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.....	
1) Eligibility Fee	
13) Other Fee	
14) Inhouse Project	5000/-
15) GST	900/-
16) 234128443610 (7 Dec 2022)	
TOTAL Rs.	5900/-

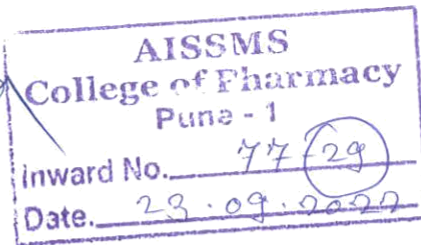
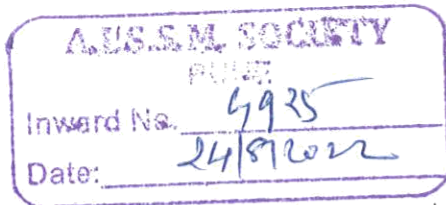
Total in words Rupees Five thousand
nine hundred

Accept the amount as above 5900/-



Checked By

(MRP Rao)
Deposited By



GOP/PM/2022-23/65-3

Date: 24.08.2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.

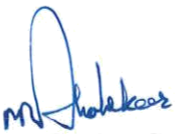
Sub: Submission of proposal of sponsored research project for approval.

Respected Sir,

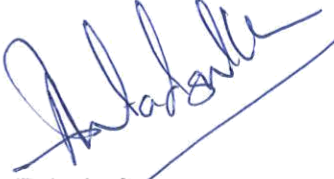
Please find enclosed research proposal titled, "Characterization of sunscreen formulation"
under Category Industry Project (Format A1) for your approval. You are requested to do the
needful at the earliest.

Thanking you.


(Chief Investigator)


(Project Co-ordinator)


(Ms. Samle)


(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 Industry sponsored 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. / Ms. / Prof. / Dr.~~ **Monica R P Rao**
duly filled format has been enclosed for your kind information and approval

The

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 Industry representative)

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A1)

Name of the Industry: **Pristino Pharma Pvt. Ltd.**

Complete postal address: **Survey No. 14, Shop No. 6, Bijwe Plaza,
Kareenagar, Pune 411052**

Title of Project: "Characterization of sunscreen formulation"

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)	Nil
2	Administrative & Infrastructure Charges	
	The Principal	750/-
	The accountant	500/-
3	Society processing fees.	1750/-
4	Staff remuneration (to be proposed and justified by PI)	2000/-
5	Total	5000/-
6	GST@18%	900/-
	Grand Total	5900/-

 [Dr. Monica RP Rao]

(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, "Characterization of sunscreen formulation" to be conducted between September to December 2022.

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



[Dr. Monica RP Rao]

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "

Characterization of sunscreen formulation."



(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 : 2791 - dt 7.12.2022

Amount : Rs 5000 (plus GST Rs 900)

(Kindly enclose Xerox copies of Application and Challan)

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



[Dr. Monica RP Rao]

(Name and signature of Project -Coordinator)



rao_mrp AISSMSCOP <rao_mrp@aissmscop.com>

project

svshinde@pristinopharma.com <svshinde@pristinopharma.com>
To: rao_mrp@aissmscop.com

Wed, Aug 10, 2022 at 10:42 AM

Dear Madam

As discussed about the research proposal PFA copy of research project. Looking forward.
thanks

regards
Dr. Swapnila Shinde

[Quoted text hidden]

[Quoted text hidden]



development of skin formulation.doc
45K

(Enclosed with Application)

C

(For Candidates)

D

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.: 2791 Date: 7/12/2022

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5Received from Mr./Miss Pristino Pharma
Bijwe Plaza, Karve Nagar Pune 411052

Class _____ Year 2012 - 2013

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee.....	
14) Inhouse Project	5000/-
15) GST	900/-
16) 234128443610 (7 Dec 2022)	
TOTAL Rs.	5900/-

Total in words Rupees Five thousand
nine hundredAccept the amount as above 5900/-Deposited By (MRP Rao)[BACK TO INDEX](#)

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.: 2791 Date: 7/12/2022

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5Received from Mr./Miss Pristino Pharma
Bijwe Plaza, Karve Nagar Pune 411052

Class _____ Year 2012 - 2013

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee.....	
14) Inhouse Project	5000/-
15) GST	900/-
16) 234128443610 (7 Dec - 2022)	
TOTAL Rs.	5900/-

Total in words Rupees Five thousand
nine hundredAccept the amount as above 5900/-Deposited By (MRP Rao)

GOP/PW/2022-23/99. (2)

Date: 07/11/2022

To,

Shin-Etsu

Hon. Secretary

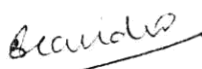
All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.


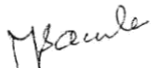
Sub: Submission of proposal of sponsored research project for approval.


Respected Sir,

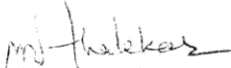
Please find enclosed research proposal titled, "**Development and Validation of UV-Spectrophotometric Method for Estimation of Ritonavir in Bulk, Tablet Dosage Form and Dissolution Medium**" under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

Thanking you.


Dr. Santosh V. Gandhi
(Chief Investigator)

 
(Dr. M. R. Bhalekar) (Dr. M.C. Damle)
(Project Co-ordinators)


Dr. Ashwini R. Madgulkar
(Principal)


Dr. M. R. Bhalekar
(Co- Investigator)

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 Industry sponsored short term research project.


Respected Madam,

I / We the undersigned would like to undertake a short term sponsored research project under the guidance of Mr. / Mrs. / Prof. / **Dr. Santosh V. Gandhi**. 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


Sonam Singh (Assistant Lab Manager)
(Name and signature of Industry representative)

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-A)

Name of the Industry: **Shin-Etsu Chemical Tylose India Pvt. Ltd**

Complete postal address: **Office No. 08, 7th Floor, D Building, MBC Park,
Kasarwadavali, Thane (W) – 400615, India**

Title of Project: **“Development and Validation of UV-Spectrophotometric Method for
Estimation of Ritonavir in Bulk, Tablet Dosage Form and Dissolution Medium”**

Proposed duration of Project: 01 Month




Ref. No. and date of letter through proper channel: Email dated 19/10/2022

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Total cost of actuals.(Details are mentioned below)	2000/-
2	Infrastructure utility fees.(50% of actuals)	1000/-
3	Society processing fees. .(50% of actuals)	1000/-
4	Staff remuneration (same as actuals)	2000/-
	Total	6000/-
	GST @ 18 %	1080/-
	Grand Total	7080/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
01	Hydrochloric Acid	01 Lit	200/-
02	Methanol (AR Grade)	2.5 Lit * 2	1800/-
Grand total			2000/-

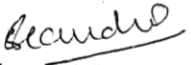
  
Dr. Santosh V. Gandhi Dr. M. R. Bhalekar Mr. M. M. Chopane
(Name and signature of Chief Investigator and Co-Investigator) (Accountant Sign)

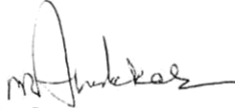
* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development and Validation of UV-Spectrophotometric Method for Estimation of Ritonavir in Bulk, Tablet Dosage Form and Dissolution Medium" to be conducted between 10/11/2022 to 09/12/2022.

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. Santosh V. Gandhi


Dr. M. R. Bhalekar

(Name and signature of Chief Investigator and Co-Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, "Development and Validation of UV-Spectrophotometric Method for Estimation of Ritonavir in Bulk, Tablet Dosage Form and Dissolution Medium"

(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: 1543 dated 19/12/2022

Amount: 6480 = 00 [Rs. 7080 - Rs. 600 (TDS)]

(Kindly enclose Xerox copies of Application and Challan)

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

Dr. M. R. Bhalekar

Dr. M.C. Damle

(Name and signature of Project -Coordinators)

GUIDELINES FOR INDUSTRY SPONSORED PROJECTS (Format-A)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor.
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-A) 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 shall put forward the summary report in the prescribed format to the society through principal 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 collect 100% amount as an advance from the sponsorer after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsorer then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the college account against which the official receipt shall be issued the sponsor.

AISSMS
College of Pharmacy (M.Pharm)

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

Challan No.: **1543**

Date: 19/12/2022

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

Received from Mr./Miss Shin-Etsu Chemical

Tylose India Pvt Ltd, Thane

Class Industry project Year 2022 - 2023

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) <u>Industry Project</u>	<u>5491=00</u>
<u>SV method for</u>	
<u>Ritonavir</u>	
14)	
15) <u>+ GST @ 18%</u>	<u>989=00</u>
16)	
TOTAL Rs.	6480=00

Total in words Rupees Six thousand four
hundred and eighty only

Accept the amount as above _____



Blamdo
Deposited By
Cdr. S.V. Gaudhar

TO WHOM SO EVER IT MAY CONCERN

This is to appreciate work done on the Shin-Etsu Chemical Tylose India Pvt. Ltd, Thane project entitled "Development and Validation of UV-Spectrophotometric Method for Estimation of Ritonavir in Bulk, Tablet Dosage Form and Dissolution Medium" by **Ms. Aditi Pande** under the guidance of **Dr. Santosh V. Gandhi** and **Dr. Mangesh R. Bhalekar** at AISSMS College of Pharmacy, Pune

We wish best luck to her future endeavors.

Sonam Singh
Sonam Singh
Assistant Lab Manager



[BACK TO INDEX](#)

SHIN-ETSU CHEMICAL TYLOSE INDIA PRIVATE LIMITED

Regd. Office: Office No. B, 7th Floor, D Building, MBC Park, Ghodbunder Road,
Kasarwadavali, Thane (West) - 400615, Maharashtra, India.
Tel.: +91-22-62833000 CIN: U74999MH2016FTC282531

Yash Daga

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.:

Date : 27/05/2022

2523

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

Received from Mr./Miss

Yash Nandkishor

Daga

Class

T.Y. B.Pharm

Year 2022 - 2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee Project fee	4000/-
14) 18% GST	720/-
15) UTR no. SBIN2214764	
5402	
16) Date:- 27/05/22	
TOTAL Rs.	4720/-

Total in words Rupees

Four Thousand Seven

Hundred And Twenty only

Accept the amount as above

4,720/-

Checked By

Deposited By



Yash

COP/PN/2022-23/03-2

AISSMS
College of Pharmacy
Inward No. 28-9
Date 26-05-2022

22-23

2

To,

Hon. Secretary

All India Shri Shivaji Memorial Society

Shivaji Nagar

Pune- 411005.

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

Date:

4 MAY 2022

AISSMS
College of Pharmacy
Inward No. 725
Date 4/5/22

725
25/5/22

Respected Sir,

Please find enclosed research proposal titled, "Drug repurposing on different drug targets using Insilico techniques" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

(Chief Investigator)

K.D Asgaonkar, S.M Patil

(Project Co-ordinator)

Dr M R Bhalekar, Dr M C Damle

(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 Mr. / Mrs. / Prof. /Dr. K.D Asgaonkar, S.M Patil

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)

Mr Manjish Gupta (T Y B.Pharm)

Mr Yash Daga (TY B.Pharm)

SMP/KD/AMC
26/05/2022

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

Name of Applicant: K.D Asgaonkar, S.M Patil

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

Title of Project: *Drug repurposing on different drug targets using In silico Techniques*

Proposed duration of Project: June-Aug 2022

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	2000/-
4	Total cost of actuals.(Details are mentioned below)	NA- Free online softwares will be utilised
	Grand Total	4000/-

K.D Asgaonkar
S.M Patil

(Name and Signature of Chief Investigator)

K.D Asgaonkar, S.M Patil

K.D Asgaonkar
(Accountant Sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, Drug repurposing on different drug targets using Insilico techniques" to be conducted between June- Aug 2022

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)
K.D Asgaonkar, S.M Patil

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.



(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 : 2523 , 27/5/22

Amount : 4720/-

(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)

Report of In house project: Drug repurposing on different targets using Insilico techniques

Introduction: Past few decades have witnessed co existence of Diabetes and hypertension leading to other health disorders. Hence it is imperative to search for new therapies for the treatment hypertension as well as diabetes simultaneously which will eventually reduce the pill burden and subsequent side effects.

Aim: Current study was undertaken to develop molecules with dual activity as anti diabetic and antihypertensive employing different in- silico tools.

Material and Method: Structure activity relationship was drawn from the literature considering Thiazolidinones (anti diabetes), Indole (Antihypertensive) and naturally occurring polyphenols (dual activity) for simultaneous to management of hypertension and diabetes. Fifty six new chemical entities were designed and subjected to ADME and docking studies. Based on the Lipinski filter, bioavailability and leadlikeness nineteen molecules were further docked in to three PDB's (5Y2T, 4BVN, 108A).

Result and Discussion: Most of the compounds showed better binding affinity of than the standards .Two compounds have shown favourable hydrogen bonding, hydrophobic and electrostatic interactions required for dual activity.

Conclusion: The results obtained are encouraging to further explore the hit molecules for simultaneously treating the two diseases



K.D. Asgaonkar, S.M. Patil, Yash. Daga, Manjish .Gupta

Kalyani Dhegale

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: 2744

Date: 04/11/22

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

Received from Mr./Miss Dhengale Kalyani Sunil

Add: Kaustubh Vihar, Dhayesi - Pune-41

Class T.Y. Bpharmacy Year 2022 - 2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee	
14) <u>Inhouse project</u>	<u>5000</u>
15) <u>GST @ 18%</u>	<u>900</u>
16)	
TOTAL Rs.	5900/-

Total in words Rupees Five thousand
nine hundred only

Accept the amount as above 5900/-



Checked By

Dhengale
Deposited By

Guide: Mrs. Anurita
Avalaskar

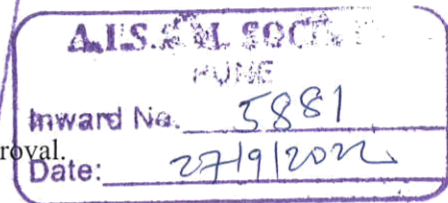
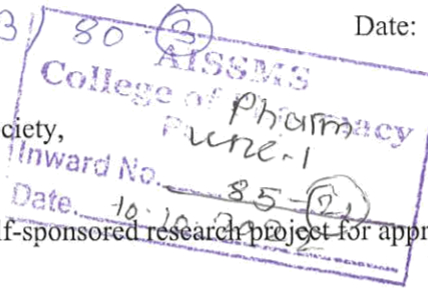
AISSMS COLLEGE OF PHARMACY, PUNE 411001

COP/PM/2022-23/80-2

Date: 19/9/2022

5881/10/10/22

To,
Hon. Secretary
 All India Shri Shivaji Memorial Society,
 Shivaji Nagar, Pune- 411005.



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

Respected Sir,

Please find enclosed research proposal titled, "*Formulation & Evaluation of Gummies for Uterine Health*" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

A. N. Shalaskar
A. N. Shalaskar
 (Chief Investigator)

M. S. D. Shalaskar
M. S. D. Shalaskar
 (Project Co-ordinator)

A. N. Shalaskar
 (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 *Mrs. Anurita N. Shalaskar*. The duly filled format has been enclosed for your kind information and approval.

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

Thanking you.

Yours sincerely

(Name and signature of Students)

Kalyani S. Dhengale *Shengale*
Rutuja S. Gaikwad *Gaikwad*
Snehal D. Gadhave *Snehal*

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

Name of Applicant: Mrs Anurita N. Avalaskar

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

Title of Project: Formulation & Evaluation of Yumminis for uterine health.

Proposed duration of Project: 03 Months Oct 2022 - Jan 2023.

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	2000/-
4	Total cost of actuals.(Details are mentioned below)	1000/-
	Grand Total	5000/-
	GST @18%	900/-
	Total payable amount	5900/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	<u>gelatin</u>	<u>50g</u>	<u>400/-</u>
2.	<u>Alcohol</u>	<u>100ml</u>	<u>200/-</u>
3.	<u>HPMC</u>	<u>50g</u>	<u>400/-</u>
Grand total			<u>1000/-</u>

A. N. Avalaskar
A. N. Avalaskar

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

[Signature]
(Accountant Sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, *Formulation & Evaluation of Gummies for Uterine Health.*

to be conducted between *Oct 2022 - Jan 2023*

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.

A. N. Shalaskar

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.

A. N. Shalaskar

(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 :

Amount :

(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 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
 - d. **GST@18% will be charged on the total amount.**
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 is deposited in the college bank account.

[BACK TO INDEX](#)

Samarth Dhanwat

A/p- Gokhale Nagar

Tal & Dist- Pune

(Enclosed with Application)

C

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.:

2656

Date: 02/11/22

Amount credited on A/C No.: 04510200000882 in the

BANK OF BARODA, Shivajinagar, Pune - 5

Received from Mr./Miss

Samarth Balasahab
Dhanwat

Class

Third year B.

Year 2021 - 2022

Pharmacy

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee	
14) Inhouse project	5000
15) GST 18%	900
16)	
TOTAL Rs.	5900/-

Total in words Rupees

Five thousand

Nine hundred & only/-

Accept the amount as above

AISSMS COLLEGE OF PHARMACY, PUNE 411001

(OP/PN) 2022-23/80-2

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.

AISSMS SOCIETY
PUNE
Inward No. 5882
Date: 27/9/2022

Date: 19/9/2022

AISSMS
College of Pharmacy
Pune-01
Inward No. 85-17
10-10-2022

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

Respected Sir,

Please find enclosed research proposal titled, "Formulation and Evaluation of Oral Films in the management of Palpitation" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

A.N. Chavalkar
(Chief Investigator)

M.R. Bhalekar
(Project Co-ordinator)

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 Mrs. Anurita N. Chavalkar. The duly filled format has been enclosed for your kind information and approval.

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

Thanking you.

Yours sincerely
(Name and signature of Students)

1. Samarth Dhanwat

2. Omkar Moholkar

3. Saurabh Shendkar

4. Vaishnavi Vibhute

Anurita N. Chavalkar
17/10/2022

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

Name of Applicant: Mrs Amruta N. Avalaskar

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

Title of Project: Formulation & evaluation of Oral films in the management of Palpitation

Proposed duration of Project: 03 Months

4 Oct 2022 - Jan 2023

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	2000/-
4	Total cost of actuals.(Details are mentioned below)	1000/-
	Grand Total	5000/-
	GST @18%	900/-
	Total payable amount	5900/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	PEG 400	100ml	200/-
2.	HPMC	50g	600/-
3.	Alcohol 200ml	200ml	200/-
Grand total			1000/-

Avalaskar
A-N. Avalaskar

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

Ma
(Accountant Sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, *Formulation and Evaluation of Oral films in the management of Palpitations* to be conducted between *Oct 2022 - Jan 2023*

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.

A. N. Shvalaska

A. N. Shvalaska

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.

A. N. Shvalaska

(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 :

Amount :

(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 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
 - d. **GST@18% will be charged on the total amount.**
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 is deposited in the college bank account.

Priyanka Khanvilkar

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

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

Challan No.: 2682 Date: 4 / 10 / 22

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

Received from Mr./Miss Khanvilkar Priyanka
Laxman

Class T.Y.B.Pharm Year 2022 - 2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee	
14) <u>Inhouse Project</u>	<u>4000/-</u>
15) <u>GST</u>	<u>720/-</u>
16)	
TOTAL Rs.	4720/-

Total in words Rupees Four Thousand Seven
Hundred Twenty Only

Accept the amount as above 4720/-



Checked By

P. Khanvilkar

Deposited By

22-23
⑤

AISSMS
College of Pharmacy
Pune-01

Inward No. 77-②
Date 23.09.2022



AISSMS

COLLEGE OF PHARMACY

IN HOUSE RESEARCH PROJECTS & RESEARCH

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



Ref. No. COP/PN/2022-23/GG-②

Date: 29.08.2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

AISSMS
Pune-01

Inward No. 5294
Date: 6/9/2022

*any
mg*

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

Respected Sir,

Please find enclosed research proposal titled, “**Design and evaluation of a topical formulation**” under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

Kanade
Principal
(Principal)
AISSMS College of Pharmacy
Pune-1

Madam
(Project Co-ordinator)
Shalekar
(Chief Investigator)

Monica
[Dr. Monica RP Rao]

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. Monica RP Rao**. The duly filled format has been enclosed for your kind information and approval

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

Thanking you.

Yours sincerely

Kanade
Divya Kanade

Khanwilkar
Priyanka Khanwilkar

Akanksha
Akanksha Mahadik

Mahamunkar
Isha Mahamunkar

*MRPR / MRP
Rao*
AKM
23/09/2022

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

Name of Applicant: Dr. Monica RP Rao

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

Title of Project: Design & Evaluation of a topical formulation

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	2000/-
4	Total cost of actuals.(Details are mentioned below)	- /-
	Grand Total	4000/-
	GST @18%	720/-
	Total payable amount	4720/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	Will be procured as gift sample	Gift sample.	
2.			
3.			
Grand total			NA



(Dr. Monica RP Rao)

(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

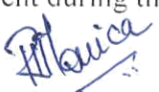


(Accountant Sign)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Design and evaluation of a topical formulation" to be conducted between "September - December 2022"


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. Monica RP Rao

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.


(Hon. Secretary, AISSMS Pune)

Hon. Secretary

*Ali India Shri Shivaji Memorial Society
Pune-411 005.*

POST APPROVAL DETAILS

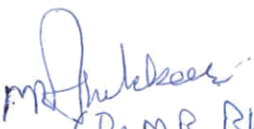
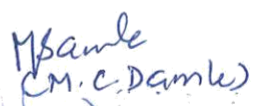
Details of Payment:

Challan No. with Date: 2682 dt 4.10.2022

Amount: Rs 4720/-

(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)

(Enclosed with Application)

C

AISSMS **College of Pharmacy (B.Pharm)**

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

Challan No.: 2652

Date: 07/11/2022

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

Received from Mr./Miss Vaishnavi Mukund Shitole
Add: Flat No. 728, Building A1, Harmony Co-op Housing
Society, Bhosale Nagar, Pune 1CS Colony, Pune-411007

Class IX B.Pharm Year 2012 - 2013

Project under - Dr. M.C. Damle

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee	
14) <u>Project Fee</u>	<u>4900/-</u>
15) <u>GST</u>	<u>882/-</u>
16)	
TOTAL Rs.	5,782/-

Total in words Rupees Five thousand seven
hundred and eighty two

Accept the amount as above 5782/-



Checked By

Platle
Deposited By

AISSMS COLLEGE OF PHARMACY, PUNE-411001

AISSMS
College of Pharmacy
Pune-41
77
Date: 23-09-2022
5 SEP 2022

CCP/PN/2022-23/70-2

Date:

To,

Hon. Secretary

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

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

Respected Sir,

Please find enclosed research proposal titled, "Quantification of active marker from herbal formulation by HPTLC" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

MCDamle
(Chief Investigator)
(Dr. M. C. Damle)

MCDamle
(Dr. M. C. Damle) (Dr. M. B. Shalkekar)
(Project Co-ordinator)

Aradhana
(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. Mrinalini C. Damle.

The duly filled format has been enclosed for your kind information and approval

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

Thanking you.

Yours sincerely

(Name and signature of Students)

1. Vaishnavi Shitole - *Shitole*
2. Sweta Singh - *Sweta*

MCDamle
Aradhana
23/09/2022

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

Name of Applicant:

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

Title of Project: "Quantification of active marker from herbal formulation by HPTLC"

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	2000/-
4	Total cost of actuals.(Details are mentioned below)	900/-
	Grand Total	4900/-
	GST @18%	882/-
	Total payable amount	5782/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	TLC plates	4 No.	800/-
2.	Chloroform	100 ml	50/-
3.	Formic Acid	10 ml	50/-
Grand total			900/-


(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, "Quantification of active marker from herbal formulation by HPTLC" to be conducted between Oct. to Dec 2022

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.

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

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. *as above.*

A. L.
(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 : *2652 dt 1st Nov 2022*

Amount : *5,782/-*

(Kindly enclose Xerox copies of Application and Challan)

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

M. C. Dangle
(M C Dangle)
(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 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
 - d. **GST@18% will be charged on the total amount.**
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 is deposited in the college bank account.

Rutuja Londe

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.:

2773

Date: 23/11/22

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

Received from Mr./Miss Londhe Rutuja
Pravin

Class T. Y. B. Pharm Year 2012 - 2013

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee <u>Inhouse</u>	<u>56641-</u>
14) <u>project + GST</u>	
15) <u>Transaction ID</u>	
<u>T2211231341433860888266</u>	
16) <u>23.11.2022</u>	
TOTAL Rs.	<u>56641-</u>

Total in words Rupees Five thousand
six hundred sixty four.

Accept the amount as above 56641-



Rutuja
Deposited By

AISSMS
College of Pharmacy
Pune-1
Inward No. 77-10
Date 23.09.2022

7



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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



COP/PN/2022-23/42-①

Date: 8-9-22

To,

Hon. Secretary

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

AISSMS SOCIETY
Inward No. 5388
Date: 8/9/2022

5388
mtg

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

Respected Sir,

Please find enclosed research proposal titled, "Formulation of grapeseed extract", under
Category In house Research Project (Format C) for your approval.

You are requested to do the needful at the earliest.

Thanking you.

(Chief Investigator)
Dr M R Bhalekar

(Project Co-ordinator)
Dr M R Bhalekar Dr M C Damle

(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,

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)

MRB/AMC
23/09/2022

1. Londhe Rutuja - @Londhe
2. Jadhav Shrawanlaxmi - Shrawan
3. Kulkarni Mayur - MPKulkarni

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

Name of Applicant: Dr Mangesh Bhalekar
Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

Title of Project: Formulation of grapeseed extract.
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	2000/-
4	Total cost of actuals.(Details are mentioned below)	800/-
	Grand Total	4800/-
	GST @18%	864/-
	Total payable amount	5664/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost (Rs)
1.	chloroform	500 gm	500=00
2	Carbopol	50 gm	300=00
Grand total			800=00


(Name and Signature of Chief Investigator)

Dr Mangesh Bhalekar

* Cost of consumables shall be calculated using standard catalogue.

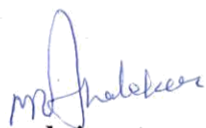

Mr M M Chopane

Accountant

UNDERTAKING

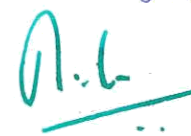
I undersigned hereby take responsibility of the project titled, "Formulation of grapeseed extract" to be conducted between " 15 /9/ 2022 - 15/12/ 2022"

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. Formulation of grapeseed extract".


(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 : 2773 / 23/11/22

Amount : 5664=00

(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 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.

[BACK TO INDEX](#)

AISSMS College of Pharmacy, Kennedy Road Pune-01
File checking format 2019-20

Name of the portfolio: Inhouse Projects

Date of checking: 9-10-20

Members: Dr. Meenakshi Damle & Dr. Mangesh Bhalekar

Sr. No	Items	Remarks
1.	Office order	—
2.	Correct data with relevant proofs *	✓
3.	Job accomplishment (to be checked against office order)**	✓
4.	Updated Summary of data for that year /Table**(If applicable)	✓
5.	Graphs(If applicable) *	—
6.	1-2 representative Photos (If applicable)	—
7.	Expenditure details (If applicable) *	—

Dr. M. R. Bhalekar Dr. Meenakshi Damle
(Name and Sign of all Committee members)

Dr. Meenakshi Damle
(Name and Sign)

Checked By (Name and Sign)

Dr. A R Madgulkar
Dr. A R Madgulkar

Note: * Document should be signed by all portfolio members

**Document should be signed by all portfolio members and Principal
The completed format should be maintained in respective files .



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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



9
J. H. Gajbe

COP/PN/2022-23/123 (7)

20 DEC 2022

To,

The Hon. Secretary

All India Shri Shivaji Memorial Society,

Shivaji Nagar

Pune- 411005.

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

Respected Sir,

As per your approval with reference COP/PN/2022-23/34-5 of Inhouse research Research Project, herewith we are sending a summary report of the project titled, "Antimicrobial Preparation of an herbal product (Gel) and Xerox copy of Receipt of payment amount 5,546/- to college (including GST). You are requested to kindly sanction and draw the Cheque of Rupees 2,000/- disbursement of remuneration to the staff at the earliest.

Thanking you.

Mr. J. W. Gajbe & Mrs. S. H. Rao

Dr. M. C. Damle, Dr. M. R. Bhalekar

Mr. M. M. Chopane

Prepared by

Checked by

Accountant

(Dr. Ashwini R. Madgulkar)

Principal

AISSMS College of Pharmacy
Pune-1

TREASURER HONORARY SECRETARY
The All India Shri Shivaji Memorial Society
Pune - 411005

Encl:

- 1) Summary report.
- 2) Xerox of receipt of payment.
- 3) Xerox set of sanctioned proposal.

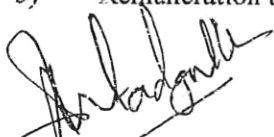
**Summary report of Inhouse Research Project
Antimicrobial Preparation of herbal product (Gel)**

Summary of the Project

Date of sanction: 11/10/2021


Date of completion: 04/02/2022

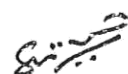
- | | |
|--|--------------------|
| 1) The total cost of project = | Rs. 5546=00 |
| 2) The total cost of Actuals | Rs. 700=00 |
| 3) Charges received as Society processing fees | Rs. 1000=00 |
| 4) Charges received as Society processing fees | Rs. 1000=00 |
| 5) Remuneration to be paid to the staff | Rs. 2000=00 |


(Principal)

Principal

**AISSMS College of Pharmacy
Pune-1**


(Project Co-ordinator)


(Chief Investigator)
(Mrs. S.H.Rao)

Details of Remuneration to be disbursed to the staff

Total amount to be disbursed: Rs. 1000 /-

Disbursement ratio:

Sr. No.	Name of the staff member	Amount
1	Dr. A. R.Madgulkar	400=00
2	Mr. M.M.Chopane	300=00
3	Mr.J.W.Gajbe	650=00
	Mrs.Shivani.R.Rao	650=00
	Total	2000/-

AISSMS
College of Pharmacy
Pune-01
Inward No. 415-4
Date 12.04.2022



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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

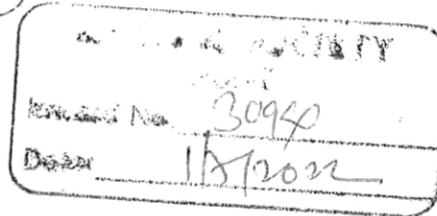


Ref. No. COP/PM/2022-23/34-5

Date:

11 JUL 2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.



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

Respected Sir,

Please find enclosed research proposal titled, "Antimicrobial Preparation of herbal product" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you

(Principal)
Principal

(Dr. M.R. Bhalekar)
(Project Co-ordinator)

(M. B. Dumbre)
(Chief Investigator)

(S.H. Rao)

(J.H. Gajbe)

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,

/ We the undersigned would like to undertake a short term self supported research Project under the guidance of Mr. / Mrs. / Prof. / Mrs. Shivani Rao & Mr. Jitendra. W. Gajbe. 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

Saoni Joshi

Snehal Dumbre

Mansi Gaikwad.

(Signature)

(Signature)

(Signature)

S.H. Rao / J.H. Gajbe
12/07/2022

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

Name of Applicant: Mrs. Shivani Rao & Mr. Jitendra W. Gajbe

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

Title of Project: **Antimicrobial preparation of herbal product.**

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	2000/-
4	Total cost of actuals. (Details are mentioned below)	686/-
	Grand Total	4686/-
	18% GST	844/-
	(Grand Total+18% GST)	5,530/-

*All chemicals are purchased by students among themselves and the herbal product will be obtained as a gift sample.

DETAILS OF ACTUALS

Sr. No.	Item (Consumables)	Qty. Required (min. pack size)	Approx. Cost
1	Muller Hinton Agar	100gm	686/-
			-
			-
Grand total			686/-

Mrs. Shivani Rao

Mr. Jitendra W Gajbe

(Name and Signature of Chief Investigator)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, **Antimicrobial preparation of herbal product(cream)** be conducted between "July 2022 to September 2022"

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)

Mrs. Shivani Rao

Mr. Jitendra W Gajbe

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. **Antimicrobial preparation of herbal product (Cream)**

(Hon. Secretary, AISSMS Pune)

Hon. Secretary

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

POST APPROVAL DETAILS

Details of Payment:

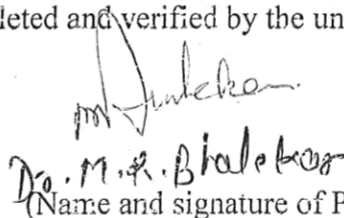
Bank of Baroda college account Bpham,

Challan No. with Date: 2677

Amount: 5530/-

(Kindly enclose Xerox copies of Application and Challan)

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


Dr. M. R. Bhalekar

(Name and signature of Project -Coordinator)

Antimicrobial preparation of Herbal Products.

Report

Method for Antimicrobial Study –

Cup plate method/ Diffusion method –

The Antimicrobial activity of gel was evaluated by using Cup plate method according to the CLSI guidelines against E.coli and S.aureus.

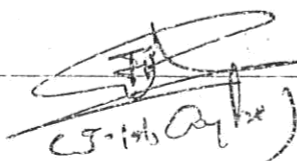
Procedure –

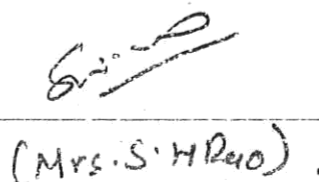
The agar plate surface was inoculated by pouring 100ul of volume of microbial inoculum (e.coli and s.aureus) over entire agar surface. Then, a well with diameter of 6-8mm was made aseptically with sterile T.borer and volume of 25ul of the antimicrobial agent (gel) was introduced into the well. Then, the agar plates were incubated under suitable condition depending upon test organisms.

(The antimicrobial agent that is curcumin – complex gel diffuses in the agar medium and inhibits the growth of microbial strain tested.)

Outcomes –

Formulation and evaluation of Herbal Topical Gel of Curcumin – Polyethylene Complex and Neem Oil for Antibacterial treatment was presented in a State Level Competition, Synapse 2022 in association with IQAC SPPU dated 18th November 2022.


(Mrs. S. H. Rao)


(Mrs. S. H. Rao)

Punjiram Jagtap

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.:

3175

Date 29/03/2023

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

Received from Mr./Miss

Jagtap punjiram

Karbhari

Class

Year 2022 - 2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee	
14) Inhouse project fees	4250/-
15) GST	80/-
16)	
TOTAL Rs.	5251/-

Total in words Rupees

Five thousand

two hundred fifty one only

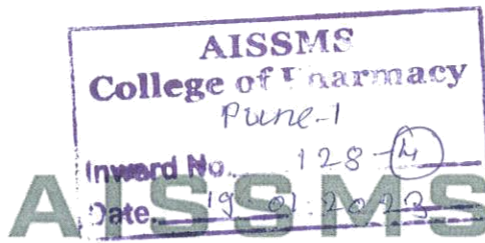
Accept the amount as above

5251/-



Deposited By

13



COLLEGE OF PHARMACY
IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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

COP/PM/2022-23/110-①

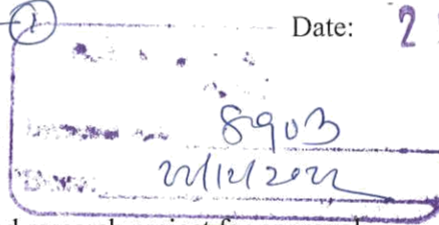
Date: 25 NOV 2022

To,

Hon. Secretary

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

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



8903
19/11/23

Respected Sir,

Please find enclosed research proposal titled, "Formulation of solid dispersion"
under Category In house Research Project (Format C) for your approval.

You are requested to do the needful at the earliest.

Thanking you

(Principal)

(Dr. Ashwini Madgulkar)
Principal

(Project Co-ordinator)

(Dr. M.R. Bhalekar)

(Chief Investigator)

(Dr. M.R. Bhalekar)

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. 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)

Jadhav Babasaheb BS

Kokare Saurabh Sane

1 Jagtap punjavar P. Leptan

Kumbhar Tejas Shankar P. Kumbhar

MRB/MMC
20/10/2023

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

Name of Applicant: Dr Mangesh Bhalekar

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

Title of Project: Formulation of solid dispersion

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.	1000.00
2	Society processing fees.	1000.00
3	Staff remuneration	2000.00
4	Total cost of actuals.(Details are mentioned below)	450.00
	Grand Total	4450.00
	GST @18%	801.00
	Total payable amount	5251.00

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost (Rs)
1.	Potassium hydrogen phosphate dibasic	0.5 Kg	450.00
2			
Grand total			450.00


(Name and Signature of Chief Investigator)


Mr M M Chopane

* Cost of consumables shall be calculated using standard catalogue.

Accountant

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Formulation of solid dispersion " to be conducted between " 30 /11/ 2022 - 28/ 2/ 2022"

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.



(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 : 3175 29/3/23 .

Amount : 5251 /-

(Kindly enclose Xerox copies of Application and Challan)

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

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.

Advait Jahagirdar

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

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

Challan No.: 2683

Date: 4/10/22

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

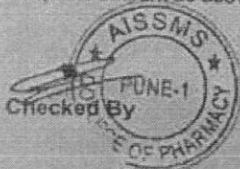
Received from Mr./Miss Advait Rajesh
Jahagirdar

Class T.Y. B-Pharm Year 2022-2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee.....	
14) Inhouse Project Fee	4200/-
15) GST	756/-
16)	
TOTAL Rs.	4956/-

Total in words Rupees four thousand nine
hundred fifty six

Accept the amount as above 4956/-



hi
Deposited By

(Enclosed with Application)

C

AISSMS

College of Pharmacy (B.Pharm)

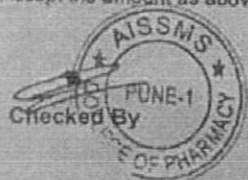
Kennedy Road, Near R.T.O., Pune - 411 001.

Challan No.: 2683

Date: 4/10/22

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5Received from Mr./Miss Advait RajeshJahagirdarClass T.Y. B-pharm Year 2022-2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee.....	
14) Inhouse Project Fee	4200/-
15) GST	756/-
16)	
TOTAL Rs.	4956/-

Total in words Rupees four thousand nine
hundred fifty sixAccept the amount as above 4956/-

hi
Deposited By

10

AISSMS COLLEGE OF PHARMACY, PUNE 411001

COP/PNT/2022-23/123-①

Date: 16/12/22

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar, Pune- 411005.

AISSMS
College of Pharmacy
Pune - 1
Inward No. 128-②②
Date 19.01.2023


AISSMS SOCIETY
PUNE
Inward No. 8848
Date: 21/12/22


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

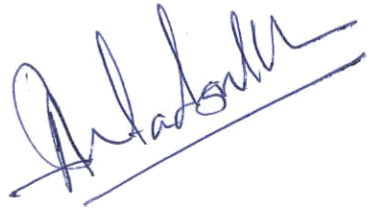
Respected Sir,

Please find enclosed research proposal titled, "Estimation of Anthelmintic activity on Bracica
Olaracia" under Category In house Research Project (Format C) for your approval. You are
requested to do the needful at the earliest.

Thanking you.


Mr. O.A. Devade
(Chief Investigator)


Dr. M.C. Damle / Dr. M.R. Bhalekar
(Project Co-Ordinator)


Dr. Ashwini R. Madgulkar
(Principal)

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 Mr. O.A. Devade from Pharmacology Department.
The duly filled format has been enclosed for your kind information and approval

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

Thanking you.

Yours sincerely
(Name and signature of Students)

1. Ms. Jadhav Shrunalini
2. Mr. Jahagirdar Advait
3. Mr. Kalekar Prasad
4. Mr. Jajurne Omkar

PB/MCP

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

Name of Applicant: Ms.Jadhav Shrinalini, Mr.Jahagirdar Advait, Mr.Kalekar Prasad, Mr.Jajurne Omkar

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

Title of Project: Estimation of Anthelmintic activity on Bracica Olaracia
Proposed duration of Project: 02 Months


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

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
	Infrastructure utility fees.	1000/-
	Society processing fees.	1000/-
	Staff remuneration	2000/-
	Total cost of actuals.(Details are mentioned below)	200/-
	Grand Total	4,200/-
	GST @18%	756/-
	Total payable amount	4,956/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost (rs)
	Methanol	300ml	100/-
	General Chemical for Detection Phytoconstituents	02 ml each	100/-
Grand total			200/-


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, "Estimation of Anthelmintic activity on Bracica Olaracia" to be conducted between 1 Jan 2023 to 28 Feb 2023. 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.


Mr. O.A. Devade

(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

hereby grant permission for undertaking the project titled.



(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: 2683 | 4/10/22

Amount: 4,956/-

(Kindly enclose Xerox copies of Application and Challan)

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

Dr. M.C. Damle Dr. M.R. 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 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
 - d. **GST@18% will be charged on the total amount.**
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 is deposited in the college bank account.

Indus Biotech

(Enclosed with Application)

C

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

Challan No.: **1398**

Date: 3/9/22

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

Received from Mr./Miss Indus Biotech Ltd

Class _____ Year 2012 - 2013

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Industry Project.....	20000.00
13) Less TDS	3000.00
14) Total.....	27000.00
15) Add GST @ 15%	5400.00
16) NEFT/RTGS 2225863596131	
TOTAL Rs.	32400.00

Total in words Rupees Twenty Two Thousand
Four Hundred Only

Accept the amount as above _____



Checked By

Mr. Indus Biotech
Deposited By



' सत्याला मरण नाही '

ALL INDIA SHRI SHIVAJI MEMORIAL SOCIETY'S
COLLEGE OF PHARMACY

(Approved by AICTE & PCI, New Delhi, Recognized by Govt. of Maharashtra
and Affiliated to Savitribai Phule Pune University)

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

www.aissmscop.com Email: contact@aissmscop.com College ID No.: PU/PN/Pharm/117/(1996)

26058208
26058204

Ref. No.: C0P/PN/2022-23/68-①

Date : 14.09.2022

INVOICE

To, Ms Indus Biotech Ltd Rahul Residency, Salunkhe Vihar, Kondwa, Pune.		
sr	Particulars	Amount (Rs)
1.	Formulation filling, sealing and evaluation of gel	30000=00
	GST@18%	5400=00
	Grand Total	35400=00

The payment should be made in favor of Principal, AISSMS College of Pharmacy, Pune.
A/c no 04510200000881, IFSC code BARB0SHIPOO (Fifth letter is zero)
GST no- 27AAATA1675TIZD, A/c no 04510200000881,

Dr Ashwini R Madgulkar
Principal
AISSMS College of Pharmacy
Pune-1



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

Approved by AICTE & PCI New Delhi, Recognized by the Government of Maharashtra,

2F, 12B recognition by UGC, Affiliated to Savitribai Phule Pune University

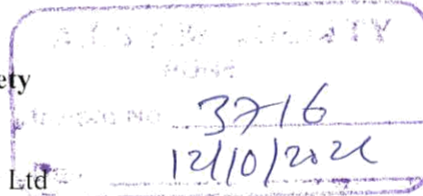
Accredited by NAAC with A Grade



Ref. No. COP/PN/2020-21/69 - ③

Date:- 6-10-21

To,
The Honorary Secretary
All India Shri Shivaji Memorial Society
Pune -411005



3716
21/10

Sub: About projects with Indus Biotech Ltd

Respected sir

In past we have completed industry project with Indus Biotech with your approval. As communicated to you in last week Indus Biotech has approached us for next project and you have permitted us to conduct the project.

In this regards

- 1) we will be entering MoU with the said industry and they will be granting us about **3-4 projects in near future**. We have done project with Indus Biotech in past and have a confidentiality non disclosure agreement for the same. The terms of **MoU** that we have agreed upon are attached as separate sheet for which your approval is needed.
- 2) Before starting of project we need to provide analysis of water at our lab for which about **Rs 7000/-** will be required and is included in project cost. Your approval for this too will be needed.
- 3) The Indus Biotech is ready to provide the two machines for filling and sealing of gel required in this project as **gift by which will be costing 1.25 lakh**
- 4) we need to buy an **air compressor which would cost about 20000/-** required for running the same, which will be useful for other instruments also.

The project proposal in approved format A is enclosed along with for your kind approval.

Prepared by

Dr R R Padalkar

Checked by

Dr M R Bhalekar

Accountant

Mr M M Chopane

Dr Ashwini Madgulkar

Principal

AISSMS College of Pharmacy
Pune-1

MRB/AMC
22/10/2021

GUIDELINES FOR INDUSTRY SPONSORED PROJECTS (Format-A)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor.
4. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-A) 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 shall put forward the summary report in the prescribed format to the society through principal 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 collect 100% amount as an advance from the sponsorer after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsorer then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the college account against which the official receipt shall be issued the sponsor.

COP/1PN/2021-22/69-4

Date:

6 OCT 2021

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, “**Formulation filling, sealing and evaluation of gel**”. under Category Industry Project (Format A) for your approval. You are requested to do the needful at the earliest.

Thanking you.

(Project Co-ordinator)

Dr M C Damle Dr M R Bhalekar

(Chief Investigator)

Dr M R Bhalekar Dr RR Padalkar

(Accountant)

Mr M M Chopane

(Principal)

Dr Ashwini Madgulkar

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 Industry sponsored 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 Dr Mangsh Bhalekar and Mr Rahul Padalkar
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)

Ms Sunil Ramdasi

PROTOCOL FOR INDUSTRY RESEARCH PROJECT (Format-C)

Name of the Industry: M/s Indus Biotech Private Ltd,

Complete postal address: 1 Rahul Residency, Plot No 6 &7, Off Salunke Vihar Road, Kondhwa, Pune 411048

Title of Project: "Formulation filling, sealing and evaluation of gel".

Proposed duration of Project: 6 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)	70800 10000=00
2	Infrastructure utility fees.(50% of actuals)	5000=00
3	Society processing fees. .(50% of actuals)	5000=00
4	Staff remuneration .(same as actual)	
	Dr Ashwini Madgulkar	2000=00
	Dr M R Bhalekar	3000=00
	Mr R R Padalkar	2500=00
	Mr S R Patil	15 00=00
	Mr M M Chopane	1000=00
	Total	30000=00

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (Min. pack size)	Cost
1	All ingredients will be supplied by Industry		
2.	Water analysis	NA	7000=00
3.	Instrument operating cost	NA	3000=00
Grand total			10000=00


Dr. M. R. Bhalekar

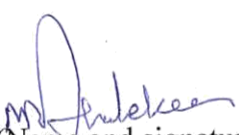
(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING

I undersigned hereby take responsibility of the project titled, “**Formulation filling, sealing and evaluation of gel**”. Will be conducted between 5/10/2021 to 30/4/2022.

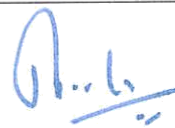
I will ensure that the chemical usage will not exceed the quantity mentioned on page 2. I also assure you that the project will be carried out after regular academic schedule and I will remain present during the project work.


(Name and signature of Chief Investigator)
Dr Mangesh Bhalekar Dr RR Padalkar

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled, “ **Formulation Development and invitro evaluation of Fenugreek oil gel**”.

”



(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 :

Amount :

(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)

Manju Choudhary

C

(Enclosed with Application)

AISSMS
College of Pharmacy (M.Pharm)

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

Challan No.: **1317**

Date: **8/4/22**

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

Received from Mr./Miss Manju Choudhary

Ashtakha Mane College of Pharmacy, Peth Vadga

Class M. Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) 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) Other Fee	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) <u>Outside Student Project</u>	<u>10660 = INR</u>
13) <u>GST @ 18%</u>	<u>1915 = INR</u>
14)	
15)	
16)	
TOTAL Rs.	12555 = INR

Total in words Rupees Twelve Thousand Five
Hundred & Fifty Five only

Accept the amount as above

Checked By

Dr. M. R. Phulekar

Manju
Deposited By

AISSMS
College of Pharmacy
Pune-1

Inward No. 18-39
Date 05.05.2022

COP/PN/2022-23/160

7 APR 2022

To,

Hon. Secretary

All India Shri Shivaji Memorial Society,

Shivaji Nagar

Pune- 411005.

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

AISSMS
College of Pharmacy
Pune-1

Inward No. 165
Date 7/4/2022

Respected Sir,

Please find enclosed research proposal titled, "Formulation and evaluation of liposomes for cancer targeting" under Category Outside Research Project (Format B) for your approval. You are requested to do the needful at the earliest. Total Project cost Rs.10640 /-

Thanking you.

(Principal)

Principal

AISSMS College of Pharmacy
Pune-1

(Project Co-ordinator)

(Chief Investigator)

D. M. R. Bhalekar

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. M. R. 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

M. A. Chaudhary
Manju A. Chaudhary.
Ashokrao Mame college of Pharmacy.
Peth - Vadgaon.

MRB/Mme
06/05/2022

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

Name of Applicant : Mrs Manju Chaudhari

Complete postal address : Ashokrao Mane College of Pharmacy, Peth Vadgao

Title of Project : Formulation and evaluation of liposomes for cancer targeting

Proposed duration of Project : 03 months

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

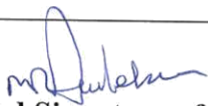
Proposed Expenditure :

Sr. No.	Parameter	Amount
1	Infrastructure utility fees. (10% of actuals)	760=00
2	Society processing fees. (10% of actuals)	760=00
3	Staff remuneration (20% of actuals)	1520=00
4	Total cost of actuals.	7600=00
	Grand Total	10640=00

DETAILS OF ACTUALS

Details of consumables required for the project:

Sr. No.	Item(Consumables)	Qty. Required	Cost
01	Rota		2000=00
02	Particle size		3600=00
04	Viscosity		2000=00
Grand total			7600=00


(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

Dr Mangesh Bhalekar

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Formulation and evaluation of liposomes for cancer targeting" to be conducted between 10 April to 15 June 2022. 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, "Formulation and evaluation of liposomes for cancer targeting

."



(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 : 1817 date 8-4-22

Amount : /- 12555/-

(Kindly enclose Xerox copies of Application and Challan)

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



Dr M R Bhalekar

Dr. M. C. Damle

(Name and signature of Project -Coordinator)

GUIDELINES FOR OUTSIDE STUDENT RESEARCH PROJECTS (Format B)

1. The chief investigator who wishes to carry out any research project shall receive a formal letter from the sponsor.
 2. The total expenditure for consumables and equipments required for the project shall be calculated by the Chief Investigator.
 3. The aforementioned cost shall be prepared by the Chief Investigator as per the requirement of the sponsor.
 4. To the above figure following charges shall be charged extra to the student:
 - a. 10% of the Actuals: As infrastructure utility fees
 - b. 10% of the Actuals: As processing charges to the society.
 - c. 20% of the Actuals: As staff remuneration
 5. Chief Investigator shall then submit the research proposal prepared in the prescribed format (Format-B) to the society thru principal for approval.
 6. The actual experimental work shall be started only after approval from the society.
 7. The student investigator/s shall be appointed by the Chief Investigator.
 8. The outside student can utilise the facilities until the duration of the project provided under the supervision of the Chief Investigator.
 9. After completion of the approved research project, Chief Investigator shall put forward the summary report to the society for the disbursement of remuneration to the staff.
 10. The staff remuneration disbursement ratio shall be prepared by the Chief Investigator.
 11. 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 collect 100% amount as an advance from the sponsor after approval from the society. In case, if the Chief Investigator takes responsibility of the sponsor then 50% amount can be collected as advance. The remaining 50% amount shall be received after completion of the project but before hand over of the result to the sponsor. Total amount received shall be deposited in the College account (A/c No. 421546) against which the official receipt shall be issued to the sponsor.

[BACK TO INDEX](#)

Vaishnavi Nikam

6011P/2021-22/153 - ① Inward No. 18-71 Date: 05-05-2022 9/03/2022

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, "To formulate and Evaluate Calmor table for management of Dengue."

under Category In house Research Project (Format C) for your approval. 5000/-
You are requested to do the needful at the earliest. Total Project cost Rs. 5000/-

Thanking you.

(Principal)

Principal

AISSMS College of Pharmacy
Pune-1

(Project Co-ordinator)

(Chief Investigator)

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) Vaishnavi Sanjay Nikam - B.D.N.
- 2) Riche Sanjosh Shingavi - R.S.
- 3) Divyabh Jain - D.V.J

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

Name of Applicant: A. N. Avalaskar

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

Title of Project: To formulate and evaluate Calimex tablets for
Proposed duration of Project: 03 Months management of Dengue
March 2022 - May 2022

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

Proposed Expenditure:

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
1.	Alcohol	200 ml	200/-
2.	Methanol	100 ml	200/-
3.	Sucrose	10 g	100/-
4.	Solvents for TLC		500/-
Grand total			1000/-

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	1000/-
	Grand Total	5000/-

A. N. Avalaskar
A. N. Avalaskar
(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, *To formulate & evaluate Carimotabales In the management of Dengue.* to be conducted between *15 March 2022 - 31 May 2022.*

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

Avalaskar
A. N. Avalaskar
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.


(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 :

Amount :

(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.

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: **2526**

Date: **30/05/22**

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

Received from Mr./Miss **Nikam Vaishnavi**

Sanjay

Class **T.Y B.Pharm** Year **2021** - **2022**

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee Inhouse	5000/-
14) GST	900/-
15) UPI ID :	
16) 215066936907	
TOTAL Rs.	5900/-

Total in words Rupees **Five thousand**
nine hundred only

Accept the amount as above **5900/-**

Checked By



[BACK TO INDEX](#)

Deposited By

Nikam

Pratiksha Waghmare

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: 2164

Date: 10/06/2022

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

Received from Mr./Miss Pratiksha Waghmare

Class S.Y. B. Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee	
14) <u>Inhouse pjt fee</u>	<u>9361-</u>
15)	
16)	
TOTAL Rs.	9361-

Total in words Rupees Nine Hundred
and Thirty six only

Accept the amount as above 9361-

Checked By



Deposited By

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: 2166

Date: 08/04/2022

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

Received from Mr./Miss Pratiksha Waghmare

Class S.Y. B.Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee <u>Inhouse PFT</u>	<u>42641-</u>
14) <u>GST @ 18%</u>	<u>9361-</u>
15)	
16)	
TOTAL Rs.	5200

Total in words Rupees Five Thousand
Two Hundred only

Accept the amount as above 5200/-



Checked By

Deposited By

13

AISSMS
College of Pharmacy
Pune-01
Forward No. 18 (54)
Date: 25.05.2022
Date: 24 FEB 2022

AISSMS COLLEGE OF PHARMACY
Kennedy Road, Near RTO, Pune

COP/PM/2021-2022/138-1

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

AISSMS
Forward No. 10,010
Date: 25/2/2022

10010
5/5/22

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 Drugs"** 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. **5,200/-**

Thanking you.

Santosh Gandhi
Dr Santosh Gandhi
(Chief Investigator)

M C Damle
Dr M C Damle, Dr M.R Bhalekar
(Project Co-ordinator)

Ashwini Madgulkar
Dr Ashwini 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,

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. / **Dr. Santosh V. Gandhi**. 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)

SUG/MRB/MCD
[Signature]
6/05/2022

1) *Pratiksha Mahadev Waghmare* - *Pratiksha*
2) *WABLE SAKSHI* - *Wable*
3) *Ishwari Sundar Sapkal* - *Ishwari*

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

Name of Applicant: Ms. Pratiksha Waghmare, Ms. Ishwari Sapkal, Ms. Sakshi Wable
Complete postal address: AISSMS college of Pharmacy, Near RTO, Pune- 411001

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


Proposed duration of Project: 03 Months

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	1200/-
	Grand Total	5,200/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required	Approx. Cost
01	Methanol (AR Grade)	2.5 lit * 2	1,200/-
--	--	--	--
Grand total			1,200/-


CDR S.V. Ganesh
(Name and Signature of Chief Investigator)



(Accountant Sign)

* Cost of consumables shall be calculated using standard catalogue.

UNDERTAKING


I undersigned hereby take responsibility of the project titled, "Development and Validation of Spectrophotometric method for Determination of Drugs" to be conducted between 01/03/2022 to 31/05/2022

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. Gandhi)
(Name and signature of Chief Investigator)

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.


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

POST APPROVAL DETAILS

Details of Payment: online payment (Transaction ID - 04510200000882)

Challan No. with Date: 2165 dated 05/05/2022

Amount: 5200/-

(Kindly enclose Xerox copies of Application and Challan)

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

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.



AISSMSCOLLEG

Transaction type
Other bank account using IMPS-IFSC

To
04510200000882-AISSMSCOLLEG

From
SUNDAR MACHHINDRA SAPKAL

Amount
₹ 5,200.00

SAVE

Safe Banking: Never share your User ID, password or any other information with anyone on phone, SMS or Email. ICICI Bank does not call/email customers for such information. Beware of fraudsters asking for such details posing as Bank staff.



Transaction Successful

08:40 PM on 10 Jun 2022

Paid to



AISSMS COLLEGE OF PHARMACY
PUNE

₹936

XXXXXXXXXX0882

Bank Of Baroda



Transfer Details



Transaction ID

T2206102040250998351694



Debited from



*****2928

₹936

UTR: 216139026107



Send Again



View History



Share Receipt



Contact PhonePe Support



Powered by



INHOUSE PROJECT SUMMARY REPORT 2021-22

Project No. COP/PN/2021-22/138-1


Title: Development and Validation of Spectrophotometric method for Determination of Drugs

PRATIKSHA WAGHAMARE, SAKSHI WABLE, ISHWARI SAPKAL, SANTOSH GANDHI

Chemometrics is the (multivariate) discipline that use mathematical and statistical methods, to design or select optimal measurement procedures and experiments; and to provide maximum chemical information by analysing chemical data. Aim was to develop Chemometric - assisted UV-spectrophotometric method for simultaneous determination of Lamivudine and Zidovudine in pharmaceutical formulation. A simple, accurate and precise spectrophotometric method has been developed for simultaneous determination of Lamivudine and Zidovudine in bulk and in combined pharmaceutical dosage form. The methods developed were PLS and PCR models using methanol as solvent. Regression analysis of beers plot showed good correlation range of 2.5- 15 µg/ml for Lamivudine and 5-30 µg/ml for Zidovudine. 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. Presentation of research work entitled “Development and Validation of Chemometric Method for Determination of Drugs” by Pratiksha Waghamare, Sakshi Wable, Ishwari Sapkal at inhouse poster presentation competition organized by AISSMS College of Pharmacy, Pune.
2. Poster presentation of research work entitled “Development and Validation of Chemometric Method for Determination of Drugs” by Pratiksha Waghamare, Sakshi Wable, Ishwari Sapkal, Santosh Gandhi at National Level Scientific Poster Competition organized by P. Wadhwani College of Pharmacy, Yawatmal on 25th September 2022.


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

[BACK TO INDEX](#)

Rutuja Londhe

(Enclosed with Application)

C

13
12

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: 2533 Date: 21/06/22

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

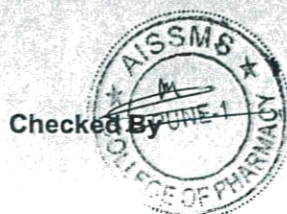
Received from Mr./Miss Rutuja Londhe
Pravin

Class S.Y. B pharmacy Year 2021 - 2022

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee inhouse project 931/-	
14) U.I.R - 217242790314	
15)	
16)	
TOTAL Rs.	931/-

Total in words Rupees Nine hundred and
thirty one

Accept the amount as above 931/-



Checked By

@Londhe
Deposited By

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.:

2178

Date: 12/5/22

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

Received from Mr./Miss

Rutuja Londhe

Peavin

Class B.Y.B pharmacy Year 2021 - 2022

Particulars	Amount Rs.
1) Merit 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.....	
12) Eligibility Fee.....	
13) Other Fee <u>Inhouse</u>	<u>5170/-</u>
14) <u>Project</u>	
15) <u>UTR-213236709270</u>	
16)	
TOTAL Rs.	5,170/-

Total in words Rupees Five thousand
one hundred & seventy

Accept the amount as above 5170/-



Checked By

Rutuja Londhe
Deposited By

AISSMS COLLEGE OF PHARMACY, PUNE 411001

COP/PM/2021-22/132

To,

Hon. Secretary

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

AISSMS Date: 8th Feb. 2022
College of Pharmacy
Pune-01
Inward No. 18-31
Date: 05.05.2022

A.I.S.S.M. SOCIETY
PUNE
Inward No. 9414
Date: 11/2/22

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

Respected Sir,

Please find enclosed research proposal titled, "Development of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed product" under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

(Chief Investigator)

(Dr. M. C. Damle)

(Project Co-ordinator)

(Dr. M. R. Bhalekar)

(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,

✓
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)

1. Londhe Rutuja - @Londhe

2. Utkarsh Princy - @Princy

3. Jayesh Awad - @Jayesh

MCD
26/05/2022

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

Name of Applicant: **Rutuja Londhe**, Pranav Uttekar, Jayesh Avhad
Complete postal address: **AISSMS** college of Pharmacy, Near RTO, Pune- 411001

Title of Project: , " Development of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed product"

Proposed duration of Project: 03 Months

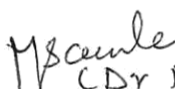
Ref. No. and date of application through proper channel:

Proposed Expenditure:


Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	1170/-
	Grand Total	5170/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	Methanol AR grade	2.5 Lts	670/-
2.	Toluene	500 ml	250/-
3.	Ethyl acetate	500 ml	250/-
Grand total			1170/-


(Name and Signature of Chief Investigator)

* Cost of consumables shall be calculated using standard catalogue.

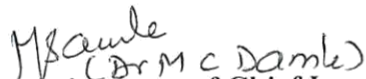

(Accountant Sign)
(Mr. M-M. chopane)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Development of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed products"


to be conducted between Feb. to Apr. 2022

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 of HPTLC method for estimation of Lupeol from Kanchan bark extract and marketed products"


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

POST APPROVAL DETAILS

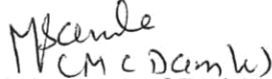
Details of Payment :

Challan No. with Date : 2178 dt 12/5/2022 & 2533 dt 21/06/22

Amount : ₹ 5170/- + ₹ 931 (GST)

(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.

[BACK TO INDEX](#)

Sakshi Bagal

19

AISMS
College of Pharmacy
Pune-1
Inward No. 18-64
Date 05.05.2022

COP/PN/2021-22/148-5

Date: 28 Feb 2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune-411005.

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

1024
5/5/22

ALL INDIA SOCIETY
PUNE
Inward No. 1024
Date: 4/3/2022

Respected Sir,

Please find enclosed research proposal titled, "Herbal Antispasmodic gel for relief of Menstrual cramps." 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. 7000/-

Thanking you.

(Principal)

Principal

AISSMS College of Pharmacy
Pune-1

M. B. D. (M. D. D.)
(Project Co-ordinator)

(Chief Investigator)

(Dr. R. N. Mirajkar)

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.

RNM/MRB/MMD
2/10/2022

Yours sincerely
(Name and signature of Students)

Girija Kulkarni

Sakshi Bagal

Jyoti Kupate

Tanmaya Vyas

Nimale Rajpurushat

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

Name of Applicant:

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

Title of Project:

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.	Cinnamon. oil	50ml	₹ 300
2.	Pluronic-F127	250g	₹ 500
3.	Hydroxypropyl methylcellulose K4M	250g	₹ 750
4.	Methyl Paraben	250g	₹ 400
5.	Propyl Paraben	250g	₹ 450
6.	Vitamin E (Antioxidant)	16 capsules	₹ 200
7.	Container	6	₹ 400
Grand total			3000/-

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	3000/-
	Grand Total	7000/- + 1260 (GST) = 8260


 (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, *Herbal Antispasmodic gel for relief of menstrual cramps*,
to be conducted between *March 22 - May 22*

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. Reshma N. Ningkar
(Name and signature of Chief Investigator) *[Signature]*

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled.

[Signature]
(Hon. Secretary, AISSMS Pune)

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

POST APPROVAL DETAILS

Details of Payment : *UPI Transaction Id :- 213814183792 / 220276206273*

Challan No. with Date : *2182* Date: *18/05/2022 / 2629* *217/2022*

Amount : *7000/- + 1260 = 8260/-*

(Kindly enclose Xerox copies of Application and Challan)

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

[Signature]
(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.

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: **2629**

Date: **21/10/2022**

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

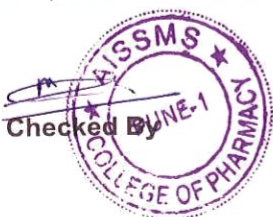
Received from Mr./Miss **Sakshi Subhash Bagal**

Class **Final Year B-Pharm** Year **2021** - **2022**

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee Project fee	₹1260/-
14) UPI Id	
15) 220276206273	
16)	
TOTAL Rs.	₹1260/-

Total in words Rupees **One thousand two**
hundred & sixty

Accept the amount as above **₹1260/-**



T.R. Vyas
Deposited By



A

To AISSMS COLLEGE OF PHARMACY, PUNE

₹1,260.00

In house Project Gst payment

✓ Completed • 21 July 2022 at 11:38



Bank of India
XXXXXXXXXXXX7167



UPI transaction ID
220276206273

To
.... 0882

From: SAKSHI SUBHASH BAGAL (Bank of India)
sakshi.bagal04@okaxis

Google Transaction ID
CICAgJCwsPbVfw

POWERED BY 



(For Candidates)

D

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.: 2182

Date : 18/5/22

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

Received from Mr./Miss Lakshi Subhash

Bagal

Class P. Y. B. Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee <u>Project fee</u>	5932/-
14) <u>GST</u>	1068/-
15) <u>UPI ID</u>	1
16) <u>213814183792</u>	
TOTAL Rs.	7000/-

Total in words Rupees Seven thousand only

Accept the amount as above 7000/-



BACK TO INDEX

Lakshi Bagal

Deposited By

Vishwajit Lad

COP/PM/2021-22/143-4

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.

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

College of Pharmacy
Pune-01
Inward No. 18-69
Date 05-05-22

AISSMS SOCIETY
PUNE
Inward No. 10210
Date: 4/3/2022

MAR 2022

(21)

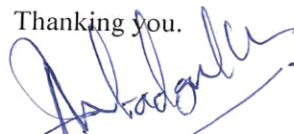
10210
5/5/22

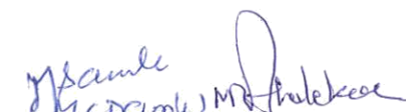
Respected Sir,

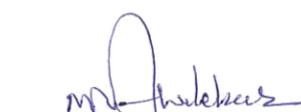
Please find enclosed research proposal titled, "Formulation of fenofibrate cocrystals for improved dissolution".

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)

Principal
AISSMS College of Pharmacy
Pune-1

Dr M C Damle Dr M R Bhalekar

Dr M R Bhalekar

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

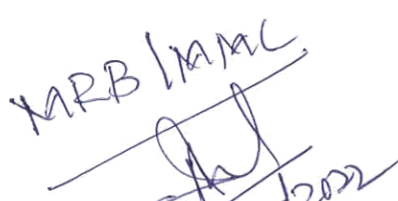
Subject: Permission for self supported short term research project.

Respected Madam,

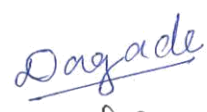
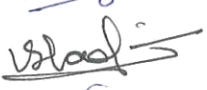

I / We the undersigned would like to undertake a short term self supported research project under the guidance of Mr. / Mrs. / Prof. /Dr. Mangesh Bhalekar
The duly filled format has been enclosed for your kind information and approval

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

Thanking you.


26/05/2022

Yours sincerely
(Name and signature of Students)

Vidhi Anil Dagade 
Vishwajit Lad 
Sarvesh Chourange 
Neha Bamane.

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

Name of Applicant: Dr Mangesh Bhalekar

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

Title of Project: Formulation of fenofibrate cocrystals for improved dissolution.

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	2000/-
4	Total cost of actuals.(Details are mentioned below)	700 /-
	Grand Total	4700/-

DETAILS OF ACTUALS

Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1.	Cinnamic acid	500 gm	375=00
2	Ascorbic acid	500 ml	225=00
Grand total			700=00


Dr. M. R. Bhalekar

(Name and Signature of Chief Investigator)


Mr M M Chopane

* Cost of consumables shall be calculated using standard catalogue.

Accountant

UNDERTAKING

I undersigned hereby take responsibility of the project titled, "Formulation of fenofibrate cocrystals for improved dissolution

to be conducted between " 15/3/2022 to 15/6/2022"

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. Formulation of fenofibrate cocrystals for improved dissolution



(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 :

Amount :

(Kindly enclose Xerox copies of Application and Challan)

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

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.

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.:

1908

Date: 12/7/22

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

Received from Mr./Miss Vishwaji Lad

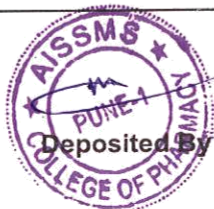
Class T.Y. B. Pharm Year 2022 - 2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee <u>CST on Inhouse project</u>	<u>846=00</u>
14)	
15)	
16)	
TOTAL Rs.	<u>846=00</u>

Total in words Rupees Eight Hundred & Forty
Six only

Accept the amount as above

Mr. Halekar
Checked By



(For Candidates)

D

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No.:

1908

Date: 12/7/22

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

Received from Mr./Miss Vishwaji Lad

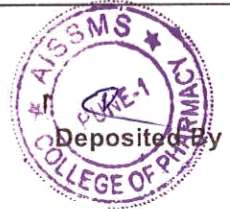
Class T.Y. B. Ph Year 2022 - 2023

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee <u>CST on Inhouse project</u>	<u>846=00</u>
14)	
15)	
16)	
TOTAL Rs.	<u>846=00</u>

Total in words Rupees Eight Hundred & Forty
Six only

Accept the amount as above

Mr. Halekar
Checked By



(For Bank)

A

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.: 2538 Date: 07/06/2022

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5Received from Mr./Miss Vishwajit Shantilal
Lad

Class Ty B. Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee Inhouse Project 4700/-	
14) UTR: 215883043920	
15) 07.06.2022	
16)	
TOTAL Rs. 4700/-	

Total in words Rupees Four thousand seven
hundred rupees only

Accept the amount as above 4700/-

Checked By

Deposited By

(For Office)

B

AISSMS

College of Pharmacy (B.Pharm)

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

Challan No.: 2538 Date: 07/06/2022

Amount credited on A/C No.: 04510200000882 in the
BANK OF BARODA, Shivajinagar, Pune - 5Received from Mr./Miss Vishwajit Shantilal
Lad

Class Ty B. Pharm Year 2021 - 2022

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee.....	
13) Other Fee Inhouse Project 4700/-	
14) UTR: 215883043920	
15) 07.06.2022	
16)	
TOTAL Rs. 4700/-	

Total in words Rupees Four thousand seven
hundred rupees only

Accept the amount as above 4700/-

Checked By

Deposited By



Transaction Successful

01:22 pm on 07 Jun 2022

Paid to

AISSMS College Of
Pharmacy

₹4,700

XXXXXXXXXX0882

Bank Of Baroda



Transfer Details

Transaction ID

T2206071321529420979923



Debited from

paytm 91*****87

₹4,700

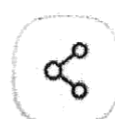
UTR: 215883043920



Send Again



View History



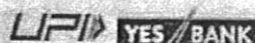
Share Receipt



Contact PhonePe Support



Powered by

[BACK TO INDEX](#)

Isha Ghadge

(Enclosed with Application)

C

**AISSMS
College of Pharmacy (B.Pharm)**

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

Challan No.:

2624

Date:

17/04/2022

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

Received from Mr./Miss

ISHA GHADGE

Class Third Year Year 2021 - 2022
B. Pharm.

Particulars	Amount Rs.
1) 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.....	
12) Eligibility Fee	
13) Other Fee <u>Inhouse</u>	<u>7201/-</u>
14) <u>Project</u>	
15) <u>VPI T. NO.:-</u>	
16) <u>219837543785</u>	
<u>17.04.2022</u>	
TOTAL Rs.	7201/-

Total in words Rupees Seven Hundred

Twenty Rupees only -

Accept the amount as above 7201/-

Checked By



Deposited By

[Signature]

(Enclosed with Application)

C

AISSMS
College of Pharmacy (B.Pharm)

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

Challan No. 21788 Date: 13/05/22

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

Received from Mr./Miss Isha Ahadge

Class Third year, B-pharm Year 2021 - 2022

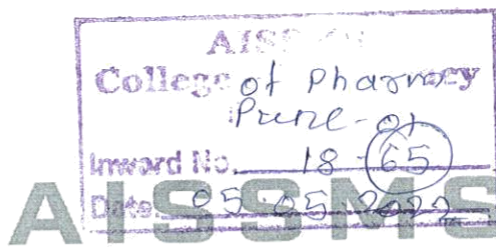
Particulars	Amount Rs.
1) Interim Fee.....	
2) Application Form Fees.....	
3) Development Fees.....	
4) Tuition Fees.....	
5) Misc. & University Charges.....	
6) Caution Money Deposit.....	
7) Journal Fees.....	
8) University / Board Eligibility Fee.....	
9) EVS Fee.....	
10) Student Activity Fee.....	
11) Insurance Fee.....	
12) Eligibility Fee	
13) Other Fee	
14) <u>Project fees</u>	<u>4000/-</u>
15) <u>UPI transaction ID</u>	
16) <u>213391211250</u>	
TOTAL Rs.	4000/-

Total in words Rupees four thousand
rupees only.

Accept the amount as above 4,000/-

Checked By

Deposited By



COLLEGE OF PHARMACY
IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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

Ref. No. COP/PM/2021-22/146-14

Date: 10.03.2022

To,

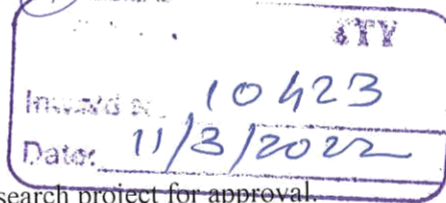
Hon. Secretary

All India Shri Shivaji Memorial Society,

Shivaji Nagar

Pune- 411005.

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



10423
5/5/22

Respected Sir,

Please find enclosed research proposal titled, **“Solid state studies of an active pharmaceutical ingredient”** under Category In house Research Project (Format C) for your approval. You are requested to do the needful at the earliest.

Thanking you.

[Signature]
(Principal)

[Signature]
(Project Co-ordinator)

[Signature]
(Chief Investigator)

AISSMS College of Pharmacy

[Signature]
Dr. M. R. Bhalekar

[Signature]
[Dr. Monica RP Rao]

To, **Pane-1**

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. Monica RP Rao**. The duly filled format has been enclosed for your kind information and approval

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

Thanking you.

Yours sincerely

Isha Ghadge

[Signature]

Saloni Joshi

[Signature]

Gargi Nikam

[Signature]

Saurav Kulkarni

[Signature]

[Signature]
MARPR / MRB / MCD
06/05/2022

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

Name of Applicant: **Dr. Monica RP Rao**

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

Title of Project: **"Solid state studies of an active pharmaceutical ingredient"**

Proposed duration of Project: **04 Months**

Ref. No. and date of application through proper channel: & 10.03.21

Proposed Expenditure:

Sr. No.	Parameter	Amount (Rs)
1	Infrastructure utility fees.	1000/-
2	Society processing fees.	1000/-
3	Staff remuneration	2000/-
4	Total cost of actuals.(Details are mentioned below)	*
	Grand Total	4000/-

* Required chemicals will be obtained as a gift sample.

DETAILS OF ACTUALS


Sr. No.	Item(Consumables)	Qty. Required (min. pack size)	Approx. Cost
1	API will be obtained as a gift sample.	Gift sample	-
Grand total			NA

Dr. Monica RP Rao




(Name and Signature of Chief Investigator)

UNDERTAKING


I undersigned hereby take responsibility of the project titled, "**Solid state studies of an active pharmaceutical ingredient**" to be conducted between "~~April - July 2022~~" *May - Aug 2022* 

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. Monica RP Rao

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. *Solid state studies of an active pharmaceutical ingredient* 

(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: *2179 - 13.05.22*

Amount: *Rs 4000/-*

(Kindly enclose Xerox copies of Application and Challan)

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

 (Dr. MRP Rao)
(Name and signature of Project -Coordinator)

Mansi Gaikwad

⑨
J. H. Gajbe



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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



COP/PN/2022-23/123 (7)

20 DEC 2022

To,

The Hon. Secretary

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

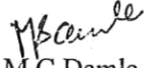
Sub: Submission of the summary report for disbursement of remuneration to the staff.

Respected Sir,

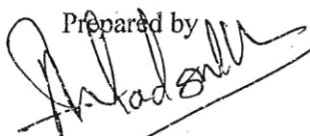
As per your approval with reference COP/PN/2022-23/34-5 of Inhouse research Research Project, herewith we are sending a summary report of the project titled, "Antimicrobial Preparation of an herbal product (Gel) and Xerox copy of Receipt of payment amount 5,546/- to college (including GST). You are requested to kindly sanction and draw the Cheque of Rupees 2,000/- disbursement of remuneration to the staff at the earliest.

Thanking you.


Mr. J. W. Gajbe & Mrs. S. H. Rao


Dr. M. C. Damle, Dr. M. R. Bhalekar


Mr. M. M. Chopane

Prepared by


Checked by

Accountant

(Dr. Ashwini R. Madgulkar)

Principal

AISSMS College of Pharmacy
Pune-1

TREASURER HONORARY SECRETARY
The All India Shri Shivaji Memorial Society
Pune - 411005

Encl:

- 1) Summary report.
- 2) Xerox of receipt of payment.
- 3) Xerox set of sanctioned proposal.

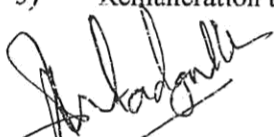
**Summary report of Inhouse Research Project
Antimicrobial Preparation of herbal product (Gel)**


Summary of the Project

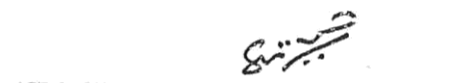
Date of sanction: 11/10/2021

Date of completion: 04/02/2022

- | | |
|--|--------------------|
| 1) The total cost of project = | Rs. 5546=00 |
| 2) The total cost of Actuals | Rs. 700=00 |
| 3) Charges received as Society processing fees | Rs. 1000=00 |
| 4) Charges received as Society processing fees | Rs. 1000=00 |
| 5) Remuneration to be paid to the staff | Rs. 2000=00 |


(Principal)
Principal


(Project Co-ordinator)


(Chief Investigator)
(Mrs. S.H.Rao)

**AISSMS College of Pharmacy
Pune-1**

Details of Remuneration to be disbursed to the staff

Total amount to be disbursed: Rs. 1000 /-

Disbursement ratio:

Sr. No.	Name of the staff member	Amount
1	Dr. A. R.Madgulkar	400=00
2	Mr. M.M.Chopane	300=00
3	Mr.J.W.Gajbe	650=00
	Mrs.Shivani.R.Rao	650=00
	Total	2000/-

AISSMS
College of Pharmacy

Pune-01
Inward No. 415-4
Date 12.07.2022



AISSMS

COLLEGE OF PHARMACY

IMPARTING EXCELLENCE IN EDUCATION & RESEARCH

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

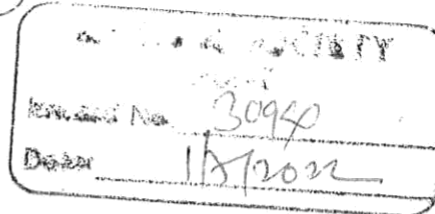


Ref. No. COP/PN/2022-23/34-5

Date:

1 JUL 2022

To,
Hon. Secretary
All India Shri Shivaji Memorial Society,
Shivaji Nagar
Pune- 411005.



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

Respected Sir,

Please find enclosed research proposal titled, "Antimicrobial Preparation of herbal product"
." under Category In house Research Project (Format C) for your approval. You are requested to do
the needful at the earliest.

Thanking you

(Principal)
Principal

(Dr. M.R. Shindekar)
(Project Co-ordinator)

(M. B. Dumbre)
(Chief Investigator)

(S.H. Rao)
(J.H. Gajbe)

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,

/ We the undersigned would like to undertake a short term self supported research
Project under the guidance of Mr. / Mrs. / Prof. / Mrs. Shivani Rao & Mr. Jitendra. W. Gajbe. 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

Saloni Joshi

Snehal Dumbre

Mansi Gaikwad.

SHR/Gajbe
12/07/2022

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

Name of Applicant: Mrs. Shivani Rao & Mr. Jitendra W. Gajbe

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

Title of Project: **Antimicrobial preparation of herbal product.**

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	2000/-
4	Total cost of actuals. (Details are mentioned below)	686/-
	Grand Total	4686/-
	18% GST	844/-
	(Grand Total+18% GST)	5,530/-

*All chemicals are purchased by students among themselves and the herbal product will be obtained as a gift sample.

DETAILS OF ACTUALS

Sr. No.	Item (Consumables)	Qty. Required (min. pack size)	Approx. Cost
1	Muller Hinton Agar	100gm	686/-
			-
			-
Grand total			686/-

Mrs. Shivani Rao

Mr. Jitendra W Gajbe

(Name and Signature of Chief Investigator)

UNDERTAKING

I undersigned hereby take responsibility of the project titled, **Antimicrobial preparation of herbal product(cream)** be conducted between "July 2022 to September 2022"

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)

Mrs. Shivani Rao

Mr. Jitendra W Gajbe

SANCTION CERTIFICATE

I hereby grant permission for undertaking the project titled. **Antimicrobial preparation of herbal product (Cream)**

(Hon. Secretary, AISSMS Pune)

Hon. Secretary

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

POST APPROVAL DETAILS

Details of Payment:

Bank of Baroda college account Bpham,

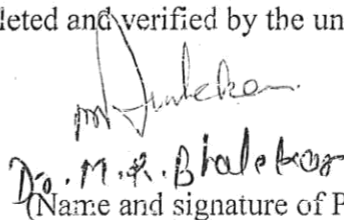
Challan No. with Date: 2677

Amount:

5530/-

(Kindly enclose Xerox copies of Application and Challan)

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


Dr. M. R. Bhalekar

(Name and signature of Project -Coordinator)