

 <p>Estd. 1962 "A++" Accredited by NAAC(2021) With CGPA 3.52</p>	<p><b>SHIVAJI UNIVERSITY, KOLHAPUR</b> 416 004, MAHARASHTRA PHONE: EPABX-2609000, www.unishivaji.ac.in, E-mail : affiliation.t2@unishivaji.ac.in <b>शिवाजी विद्यापीठ, कोल्हापूर ४१६ ००४, महाराष्ट्र</b> दूरध्वनी - ईपीएबीएक्स - २६०९०००, www.unishivaji.ac.in, E-mail : affiliation.t2@unishivaji.ac.in संलग्नता टी २ विभाग थेट दूरध्वनी क्र. ०२३१ - २६०९०९१, २६०९१३५</p>		
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Ref. No. Shivaji Uni./Affiliation T-2/  
To,  
The Principal,  
Arvind Gavali College of Pharmacy,  
Jaitapur, Tal. Dist. Satara.

**No 2 4 2**

Date : **17 JUN 2025**

**Subject :- Regarding affiliation of college for the year 2025-26.**

**Reference :- Your reference letter No.AGCOP/2250/2025, Dt.16.June, 2025.**

**Respected Sir / Madam,**

In accordance with the above subject and context, we hereby inform you by order that the following affiliation type and course proposals have been received from our college for approval from June 2025. The present proposal is being approval as follows subject to the approval of the University Authority Board and please note that the decision of the Authority Board in this regard will be final.

Sr. No.	Affiliation Type	Course / Branch	University Recognition
1.	Continuation	B.Pharmacy - I to IV (60)	For One (01) Year from June 2025-26
		M.Pharmacy Part – I to II – Pharmaceutics (18)	
		M.Pharmacy Part – I to II – Pharmacology (06)	
		M.Pharmacy Part – I to II – Pharmaceutical Chemistry (15)	
		B.Pharmacy - I to IV ( 60 to 100 )	

Thanking Your,

Your Faithfully



**Dr. P. S. Pandav**  
**Dy. Registrar**  
**Affiliation T-2 Section**

Copy to :- 1. Eligibility Section  
4. BOS Section

2. Examination Section  
5. Affiliation T-1 Section

3. Appointment Section  
6. P.G. Admission Section