



**The Punjab State Board of Technical Education
and Industrial Training**

Plot No. 1-A, Sector 36-A, Chandigarh PH: 0172-2615385, 2622584-85



No. PSBTE&IT/DA/2026/4809

Dated: 01.06.2026

Circular

Introduction of Training for Diploma in Pharmacy Course in addition to the training included in Education Regulations (ER) of PCI, New Delhi – Regarding

As per the approval granted in the 43rd meeting of Academic Committee of the Board, it is hereby informed that a training of two months (Not less than 150 hours), after the completion of first year, in addition to the training included in Education Regulations (ER) of PCI, New Delhi for Diploma in Pharmacy course, has been introduced in all the Govt. and Private Pharmacy colleges affiliated with the Board, from the new batches starting from session 2025-26.

Please note:-

1. Students will complete this two months (Not less than 150 hours) training after the completion of first year of Diploma in Pharmacy.
2. This training shall be implemented for the new batches starting from the academic session 2025-26 onwards.
3. Guidelines are attached herewith

Sd/-
Director Academics
PSBTE&IT
Chandigarh

A copy is forwarded to following for information and necessary action:-

1. PA to Director, Technical Education & Industrial Training, Punjab, Chandigarh
2. PS to Chairman, PSBTE&IT Chandigarh
3. PA to Secretary, PSBTE&IT Chandigarh
4. Registrar, PSBTE&IT Chandigarh
5. System Administrator, PSBTE&IT Chandigarh

Guidelines

Rationale

The Professional training aims to expose student to:-

1. Working Knowledge of Keeping of records required by various legislative Acts concerning the profession of Pharmacy.
2. Practical experience in activities such as:-
 - (i) Stocking of drugs and medical devices.
 - (ii) Inventory control procedures.
 - (iii) Handling of Prescriptions.
 - (iv) Patient Counseling.
 - (v) Manufacturing of Pharmaceutical formulations.
 - (vi) Quality control of Pharmaceutical formulations.

Training Places

Training may be conducted at one of the following:-

1. Hospitals/Dispensaries run by Central/State Govt./ Pvt Organizations.
2. A licensed pharmacy for retail sale of drugs under Drugs & Cosmetics' Rules 1945.
3. Pharmaceutical industry manufacturing any of the common dosage forms viz. tablets , capsules, liquid orals and injectables, topical etc

Duration of Training

There should be a professional training of two months not less than 150 hours.

Procedure of commencement of Training

The Institute should establish contact/rapport with the training places to conduct the professional training. The institute may monitor the progress of Professional training by contacting the training places through telephones, electronic media or physical visits. In case of physical visit, the necessary recurring expenditure for making payment of TA/DA to the concerned official may be worked out by the respective institute.

Evaluation

The student shall submit a report of professional training attended by him/her to the concerned institute with training certificate. The institute shall submit a copy of the training certificate to the Nodal Centre with the list of students who have completed the professional training and get this verified from the Nodal Centre allocated by the Board for admission

purpose. The verified copy of the list of students should be retained by the Nodal Center and a copy should also be forwarded to board.

Note:-

1. The Punjab State Board of Technical Education & Industrial Training will issue certificate of Diploma of Pharmacy after the submission of Professional Training Certificate of the student.
2. The professional training carries no marks or credits.
3. The duration of professional training shall not be counted towards part-III of practical training in Diploma pharmacy as promulgated in Education Regulation 2020 gazette notification.

Format of Training Report

Name of training Place:

Address:

Telephone No.:

E-mail:

Period of professional training

From

To

Learning outcome of professional training (minimum 200 words)

Signature of student date

Name of Student

Verified by:

Name:

Reg. No.

Designation:

TRAINING CERTIFICATE (on letterhead of training place)

It is certified that (Name of student-----has
undergone-----hours of professional
Training from-----to-----

Authorized Signatory