



**PALAMURU UNIVERSITY**  
**MAHABUBNAGAR – 509001**  
**Academic Audit Cell**

Lr. No:284/A/PU/AAC/2017

Date: 25-07-2017

To  
The Principals of Colleges offering Pharm D (6 Years) Pharm D (PB-3 Years) Course  
Under the Jurisdiction of Palamuru University.

Sub: Almanac Pharm D (6 Years) Pharm D (PB-3 Years) Course for the Academic  
year 2017-18 - Communication of Approval.

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Sir/Madam

With reference to the letter cited, I am desired to communicate the approval of  
Almanac for the Pharm-D (6 years)/Pharm-D (PB-3Years) for the Academic year 2017-18

| S.No | Particulars                 | Date                     |
|------|-----------------------------|--------------------------|
| 1    | Commencement of Classes     | 01-08-2017               |
| 2    | Short Vacation              | 24-09-2017 to 02-10-2017 |
| 3    | Reopen after Short Vacation | 03-10-2017               |
| 4    | I Sessional Exams           | 06-11-2017 to 08-11-2017 |
| 5    | Supplementary Exams         | 01-12-2017 to 31-12-2017 |
| 6    | Short Vacation              | 07-01-2018 to 14-01-2018 |
| 7    | Reopen after Short Vacation | 15-01-2018               |
| 8    | II Sessional Exams          | 12-02-2018 to 14-02-2018 |
| 9    | III Sessional Exams         | 02-04-2018 to 04-04-2018 |
| 10   | Last Date of Instruction    | 06-04-2018               |
| 11   | End Semester Exams          | 18-04-2018 to 17-05-2018 |
| 12   | Summer Vacation             | 18-05-2018 to 30-06-2018 |

**REGISTRAR**

Copy to:

1. The Dean, Faculty of Pharmacy, PU
2. The Controller of Examination, PU
3. The Joint Directors, Academic Audit Cell, PU
4. The P.A-to Registrar, PU