



**Small and Medium Pharmaceutical Industry Centre (SMPIC)
National Institute of Pharmaceutical Education and Research (NIPER)**

Sector 67, Near PCA Stadium, S.A.S. Nagar- 160062, Punjab
Block G, Phone No. 0172-2292032, Email: smpic@niper.ac.in

TRAINING CALENDAR 2022

Hands on Practical trainings on High Pressure Liquid Chromatography (HPLC), Gas Chromatography (GC), and Fourier Transform Infra Red Spectroscopy (FTIR)

Dates	Modules
07-11 March	GC & FTIR
21-25 March	HPLC
04-08 April	HPLC
18-22 April	HPLC
25-29 April	GC & FTIR
09-13 May	HPLC
23-27 May	HPLC
30 May-03 June	GC & FTIR
06-10 June	HPLC
13-17 June	GC & FTIR
20-24 June	HPLC
27 June- 01 July	GC & FTIR
04-08 July	HPLC
11-15 July	GC & FTIR
18-22 July	HPLC
25-29 July	GC & FTIR
01-05 August	HPLC
22-26 August	HPLC
29 August- 02 September	GC & FTIR
05-09 September	HPLC
12-16 September	GC & FTIR
19-23 September	HPLC
26-30 September	GC & FTIR
10-14 October	HPLC
17-21 October	GC & FTIR
14-18 November	HPLC
21-25 November	HPLC
28 November- 02 December	GC & FTIR
05- 09 December	HPLC
12- 16 December	GC & FTIR
19- 23 December	HPLC



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FEE & OTHER INFORMATION

1. Fee for students of educational institutions Rs. 3,000/- and others Rs. 5,000/- per participant per module.
2. DD in favour of Director, NIPER SAS Nagar payable at SAS Nagar/Chandigarh.
3. Online transfer, SBI Acct. No. 55034549623, IFSC Code SBIN0004421, SCO 45, Phase 10, SAS Nagar.
4. Minimum 5 and maximum 10 participant are needed for conducting the training.
5. Boarding and lodging facility is available at NIPER campus in training hostel with additional charges. Hostel is subject to availability of rooms.

APPLICATION PROCEDURE

1. Fill the application form and send it to smpic@niper.ac.in.
2. If sufficient numbers of participants are available, a mail shall be send to candidate for fee payment.
3. A proof of payment need to send by participant (online transaction detail/scan copy of DD).
4. A confirmation mail for training will be send to candidates. ***Please come to NIPER only if you have received the intimation.***



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APPLICATION FORM

Training Module Applied: _____

Training Period Applied: _____

Name of Applicant: _____

Fathers Name: _____

Age & sex: _____

Education Qualification: _____

Organization: _____

Designation (student/other): _____

(If student attach a copy of college IC.)

Name and Email ID of your HOD: _____

Correspondence Address: _____

Tel & Email Id: _____

Training Hostel Required: _____

Signature of Applicant