

Phone : 25367033, 25367035, 25367036
दूरभाष : 25367033, 25367035, 25367036
Telegrams : MEDCONCIND, New Delhi
तार : मेडकॉसिंड नई दिल्ली
Fax : 0091-11-25367024
E-mail : pg@mciindia.org; mci@bol.net.in
Website : www.mciindia.org



पॉकेट - 14, सेक्टर - 8,
द्वारका फेस- 1
नई दिल्ली-110 077
Pocket- 14, Sector- 8,
Dwarka Phase - 1
New Delhi-110077

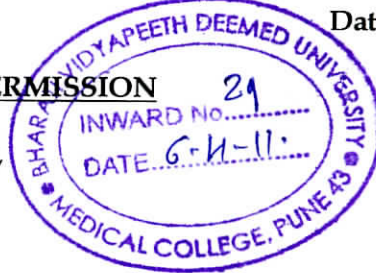
भारतीय आयुर्विज्ञान परिषद्
BOARD OF GOVERNORS IN SUPER-SESSION OF
"MEDICAL COUNCIL OF INDIA"

No. MCI-87(22)/2010-Med. 476.

Item No. 31/3/11
Dated: 01/04/11

LETTER OF PERMISSION

The Dean/Principal,
Bharti Vidyapeeth Deemed University Medical College,
Satara Road, Pune,
Maharashtra-411 043



Sub: Increase of seat in MD(Pharmacology) course at Bharti Vidyapeeth Deemed University Medical College, Pune under Bharti Vidyapeeth Deemed University Medical College, Pune u/s 10A of the IMC Act, 1956 -Permission of Board of Governors- regarding.

Sir,

I am directed to refer your proposal for increase of seats in MD(Pharmacology) course at Bharti Vidyapeeth Deemed University Medical College, Pune under Bharti Vidyapeeth Deemed University Medical College, Pune u/s 10 A of the I.M.C Act. 1956.

This is to inform you that after careful consideration of the scheme and the assessor's report (February, 2011), the Board of Governors has decided to grant Letter of Permission for increase of seats in MD(Pharmacology) course from 03(Three) to 04(Four) students per year with effect, from the academic session 2011-12 at your Institute/college u/s 10A of the I.M.C. Act, 1956.

This Letter of Permission is subject to fulfillment of the following conditions:-

1. The applicant shall continue to provide all infrastructural facilities in terms of teaching and non-teaching staff, buildings, equipment and hospital facilities as per norms laid down in Regulations of Medical Council of India.
2. Deficiencies, if any, pointed out in the inspection report, shall be rectified. A copy of MCI inspection report is enclosed.
3. The applicant shall provide Bank Guarantee of required amount wherever required in favour of Secretary, Medical Council of India, New Delhi valid for three years from a nationalized/scheduled Bank as per MCI's norms against increase of seats in above said course.

You are requested to send compliance and bank guarantee as required under the Regulations of Medical Council of India within 15(Fifteen) days of issue of this letter failing which the Letter of Permission issued for increase of seats in the above course shall stand cancelled which shall result in forfeiture of right of the college/institution to admit the students in the above course.

Kindly acknowledge receipt of this letter.

Yours Faithfully

[Dr. Sangeeta Sharma]
Secretary

C.C. to:

1. Secretary (Health), Medical Education & Drugs, Mantralaya, Mumbai-400032 (Maharashtra)
2. The Registrar, Bharti Vidyapeeth Deemed University Medical College, Satara Road, Pune, Maharashtra-411 043
3. The Secretary to the Govt. of India, Ministry of Health & F.W., Nirman Bhawan, N.Delhi-110011.
4. PS to Chairman, Board of Governors, Medical Council of India, Sector-8, Dwarka, New Delhi.