

PROFORMA FOR COLLEGE - INFORMATION REGARDING FEE, BOND - CONDITIONS ETC.

GENERAL DETAILS

Name of the College:	Aralaguppe Mallegowda District Hospital,
Complete Mailing Address:	AZAD PARK CHIKKAMAGALURU
State:	17
Pin Code:	577101
Name of Affiliating University with Date:	NA
Amount to be Paid at the time of Admission (including Hostel fees) (INR):	0
Amount to be paid at the time of Admission(Including Hostel Fee 1st Year)in INR:	0
Amount to be paid at the time of Admission(Including Hostel Fee 2nd Year)in INR:	0
Amount to be paid at the time of Admission(Including Hostel Fee 3rd Year)in INR:	0
Amount to be paid at the time of Admission(Including Hostel Fee 4thYear)in INR:	0
Amount to be paid at the time of Admission(Including Hostel Fee 5th Year)in INR:	0
Stipend Paid to the students I st Year (INR):	45000
Stipend Paid to the students II nd Year (INR):	50000
Stipend Paid to the students III rd Year (INR):	55000
Hostel facility for Male students :	N
Hostel facility for Female students:	N
The Amount of Fee to be deducted on re-allocation of seat to the candidates in 2nd/3rd round of Counseling (INR):	
The Amount of Fees To be reimbursed in case Candidate resigns during Counseling period (INR) :	0
Amount to be forfeited in case of resigning (not upgraded) seat during round 2 or non-joining/not reporting during Round-2/Mop-UP/ Stray Vacancy Round of counselling period (INR) :	
Amount to be paid at the time of Admission(Including Hostel Fee 1st Year) NRI (in \$):	0
Amount to be paid at the time of Admission(Including Hostel Fee 2nd Year) NRI (in \$):	0
Amount to be paid at the time of Admission(Including Hostel Fee 3rd Year) NRI (in \$):	0

Amount to be paid at the time of Admission(Including Hostel Fee 4th Year) NRI (in \$):	0
Amount to be paid at the time of Admission(Including Hostel Fee 5th Year) NRI (in \$):	0
Annual Fees of Candidates(INR):	125000
Website Address of College :	https://karunadu.karnataka.gov.in/hfw/sihfw/kannad
Other Info :	HEAD OF THE INSTITUTION DR MOHANKUMAR C DISTRICT SURGEON 944885085 NAME OF THE SECRETARY SMT SUNEETHA P AAO 9449444569
Miscellaneous Charges	0
PwBD Friendly (Ramps/Lifts/Divyangjan friendly Washrooms/Signage including tactile Path/Lights/Display Boards and sign Posts)	0
Contact Details	
Contact Information	NA
Name of Dean/Principal/Director:	DR.CHANDRASHEKAR SALIMATH DNB CO ORDINATOR
Designation:	Dean
Tele No. Office:	08262-235213
Mobile No:	9448845605
Fax No.:	-
Name of Secretary/Director (Medical Education/Health):	SRI ANILKUMAR T K
Office Address:	PRINCIPAL SECRETARY GOVT OF KARNATAKA HEAL THA FAMILY WELFARE SERVICES VIKASA SOUDHA BENGALURU
Tele No.:	080-22255324
Fax No.:	080-22353916
E-mail Address:	prs-hfw@karnataka.gov.in
Name of Director (Medical Education):	DR PARIMALA S MAROOR
Office Address:	SIHFW 1CROSS MAGADI ROAD BENGALURU 23
Tele No.:	080-23206125
Fax No.:	-
E-mail Address:	directorsihfw.bg@gmail.com
Name of Nodal Officer:	DR.CHANDRASHEKAR SALIMATH DNB CO ORDINATOR
Office Address:	DISTRICT HOSPITAL CHIKKAMAGALURU
Tele No.:	08262-235213
Fax No.:	-
Nodel Officer Mobile No:	9448845605
E-mail Address:	dschikmagalur@gmail.com
Designation:	Dean

1. Incase bond is applicable, candidates are advised to see link Institute Bond Information

2. The above information has been provided by Medical College. MCC takes no responsibility regarding the above information including Fees/ Bond/ Mode of Payment or any typographical error/ data etc. Candidates are advised to visit College website or contact the College Authorities directly for any query regarding above information and before filling choices.