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

GENERAL DETAILS

Name of the College:	Dr. L H Hiranandani Hospital,
Complete Mailing Address:	HILL SIDE AVENUE, HIRANANDANI GARDENS, POWAI-400076
State:	21
Pin Code:	400076
Name of Affiliating University with Date:	DR LH HIRANANDANI HOSPITAL
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):	63000
Stipend Paid to the students IInd Year (INR):	64000
Stipend Paid to the students IIIrd Year (INR):	65000
Hostel facility for Male students :	Y
Hostel facility for Female students:	Y
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):	0
Website Address of College :	www.hiranandanihospital.org
Other Info :	
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 SUJIT CHATTERJEE
Designation:	Dean
Tele No. Office:	022-27103321
Mobile No:	9820068516
Fax No.:	-27563344
Name of Secretary/Director (Medical Education/Health):	HELEN MURGESHAN
Office Address:	HIRANANDANI GARDEN
Tele No.:	022-27103321
Fax No.:	-27563344
E-mail Address:	helen.murgeshan@hiranandanihospital.org
Name of Director (Medical Education):	DR MANISH GUPTA
Office Address:	HIRANANDANI GARDEN
Tele No.:	022-27103299
Fax No.:	-27563344
E-mail Address:	manish.gupta@hiranandanihospital.org
Name of Nodal Officer:	PRIYANKA D. KOTHEKAR
Office Address:	HILL SIDE AVENUE, HIRANANDANI GARDENS, POWAI-400076
Tele No.:	022-71023492
Fax No.:	-25763311
Nodel Officer Mobile No:	8104149281
E-mail Address:	dnb.cordinator@hiranandanihospital.org
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.