

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

GENERAL DETAILS	
Name of the College:	C.S.I. Kalyani General Hospital,,
Complete Mailing Address:	15, DR RADHAKRISHNAN SALAI, MYLAPORE, CHENNAI
State:	31
Pin Code:	600004
Name of Affiliating University with Date:	NBE
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):	48000
Stipend Paid to the students II nd Year (INR):	49000
Stipend Paid to the students III rd Year (INR):	50000
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):	NA
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) :	NA
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.kalyanihospital.com
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.J.JERENE JAYANTH
Designation:	Director
Tele No. Office:	044-28474141
Mobile No:	9840411877
Fax No.:	-
Name of Secretary/Director (Medical Education/Health):	DR.DEVA EVU SUBHAS
Office Address:	15,DR.RADHAKRISHNAN SALAI,MYLAPORE,CHENNAI-4
Tele No.:	044-28474141
Fax No.:	-
E-mail Address:	deva.subhas@gmail.com
Name of Director (Medical Education):	DR.J.JERENE JAYANTH
Office Address:	15,DR.RADHAKRISHNAN SALAI,MYLAPORE,CHENNAI-4
Tele No.:	044-28474141
Fax No.:	-
E-mail Address:	csikalyanihospital@rocketmail.com
Name of Nodal Officer:	DR.DEVA EVU SUBHAS
Office Address:	15,DR.RADHAKRISHNAN SALAI,MYLAPORE,CHENNAI-4
Tele No.:	044-28474141
Fax No.:	-
Nodel Officer Mobile No:	9894873076
E-mail Address:	csikalyanihospital@rocketmail.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.