

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

GENERAL DETAILS

Name of the College:	Rainbow Childrens Hospital,
Complete Mailing Address:	RAINBOW CHILDRENS HOSPITAL 157 ANNA SALAI GUINDY CHENNAI
State:	31
Pin Code:	600015
Name of Affiliating University with Date:	NBEMS, NewDelhi
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):	47000
Stipend Paid to the students II nd Year (INR):	49000
Stipend Paid to the students III rd Year (INR):	51000
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):	0
Website Address of College :	www.rainbowhospitals.in
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.Rahul Yadav
Designation:	Dean
Tele No. Office:	044-40122444
Mobile No:	9176196208
Fax No.:	-
Name of Secretary/Director (Medical Education/Health):	Dr.Ganesh R
Office Address:	rainbow childrens hospital
Tele No.:	40122444-044
Fax No.:	-
E-mail Address:	drganesh.r@rainbowhospitals.in
Name of Director (Medical Education):	DR.RAHUL YADAV
Office Address:	RAINBOW CHILDRENS HOSPITAL
Tele No.:	40122444-044
Fax No.:	-
E-mail Address:	drrahul.y@rainbowhospitals.in
Name of Nodal Officer:	R Ganesh
Office Address:	157, Anna salai
Tele No.:	044-40122444
Fax No.:	-
Nodel Officer Mobile No:	9444281209
E-mail Address:	drganesh.r@rainbowhospitals.in
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.