

THE TAMIL NADU DR. M.G.R. MEDICAL UNIVERSITY

No.69, ANNA SALAI, GUINDY, CHENNAI – 600 032.

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PROCEEDINGS OF THE REGISTRAR

PRESENT : Dr.T. BALASUBRAMANIAN, M.S., D.L.O.,

Proc.No. Affln.IV(2)/57346/2015

Dated: 27. 09.2016

Sub:	AFFILIATION – The Tamil Nadu Dr. M.G.R. Medical University, Chennai - BDS Degree Course – Rajas Dental College & Hospital, Chennai Grant of Continuance of Provisional Affiliation for BDS Degree Course for the academic year 2016-2017 – Orders - Regarding.
Ref: 1.	Proc. No. Affln.IV(2)/57346/2014, dated 30.10.2015
2.	G.O. (Ms) No.75 Health & Family Welfare (ME) Department, dated 23.02.2016
3.	Recommendations of the Perusal Committee Meeting held on 09.06.2016
4.	Recommendations of the Affiliation Sub-committee Meeting held on 14.06.2016
5.	Resolution No.12, passed at the 245 th meeting of the Governing Council held on 30.06.2016
6.	This University's letter of even No. Dated 14.07.2016
7.	Letter No. RDC/PRL/AFF/D-530/2016, dated 29.08.2016 received from the Principal, Rajas Dental College & Hospital, Tirunelveli..

ORDER:

The Tamil Nadu Dr. M.G.R. Medical University grants Continuance of Provisional Affiliation to Rajas Dental College & Hospital, Tirunelveli for conducting B.D.S. Degree course for the academic year 2016-2017 as indicated below subject to the usual conditions already intimated in the Provisional Affiliation order of this University.

:2:

Name of the Institution	Name of the Course	Date of Governing Council Resolution	Continuance of Provisional Affiliation granted for	Intake of Students
Rajas Dental College & Hospital, Tirunelveli	B.D.S. Degree Course	Resolution No.12, passed at the 245 th meeting of Governing Council held on 30.06.2016	Year 2016-2017	100 (One Hundred) Batch: To conduct entire BDS Degree Course.

2) The admission procedure of the Government as per the scheme of admission enunciated by the Supreme Court of India should be followed.

3) The admission procedure as laid down in G.O.(Ms) 75, Health & Family Welfare (ME), dated 23.02.2016 should be followed.

4) Any other conditions which the University considers necessary to impose from time to time should be followed strictly.

5) The receipt of this proceeding should be acknowledged.

Sd/-
Dr.T. BALASUBRAMANIAN,
REGISTRAR

To

The Principal,
Rajas Dental College & Hospital,
Kavalkinaru Junction
Tirunelveli District – 627 105

Copy to:

1) The Secretary to Government of India,
Ministry of Health and Family Welfare
Department of Health, Nirman Bhavan,
New Delhi-110 011.

2) The Secretary,
Dental Council of India,
Kotla Road, New Delhi - 110 002.