Phone : 25367030, 25367033, 25367055, 25367036

grem : 25367030, 25367033, 253670.5, 25367036 Telegrams : MEDCONCIND, New Delhi

ार : गैडकॉसिंड गई दिख्सी Fax : 0091-11-25367024

E-mail : pg@mciindia.org; mci@bol.net.in

Website : www.mciindia.org



प्रकट - 14, संकटर - 8, इरका फेस- 1 नई दिल्ली-110 077 Pocket- 14, Sector- 8, Dwarka Phase - 1 New Delhi-110077

भारतीय आयुर्विज्ञान परिषद् "MEDICAL COUNCIL OF INDIA"

No. MCI-68(22)/2012-Med./

Med/ >>950

Dated:

14/9/13

The Dean/Principal,

Amrita Institute of Medical Sciences,

Amrita Vishwa Vidyapeetham Elamakkara P.O.,

Kochi - 682026 Kerala

Email: - medicalcollege@aims.amrita.edu, prathapannair@aims.amrita.edu

Sub: Permission for starting of M.Ch.(Head & Neck Surgery)/M.Ch.(Head & Neck Oncology) course at Amrita School of Medicine, Kochi, Kerala under Amrita Vishwa Vidyapeetham University, Kochi, Keral u/s 10A of the IMC Act, 1956 -Permission of Board of Governors-regarding.

Sir/Madam,

In continuation of this office Conditional LOP issued to you on 12/07/2013 and your compliance conveyed vide letter dated 25/07/2013 for starting of M.Ch.(Head & Neck Surgery)/M.Ch.(Head & Neck Oncology) course with annual intake of 02(Two) student(s) per year with prospective effect i.e. from the academic year 2013-2014 at your institute u/s 10A of the IMC Act, 1956, (as amended), your letter is taken on record. The conditions attached in Conditional LOP dated 12/07/2013 are withdrawn in view of the compliance received.

This permission for starting of the above course and admission of students will be for such time the first batch of students admitted against the above course appears for the final examination in the subject. The college authorities may take up the matter for recognition of the qualification under section 11(2) of the IMC Act at the time of the first batch admitted against the course appears for final year examination.

The Medical Council of India reserves the right to withdraw/cancel/revoke the Letter of Permission if it comes to the notice that the permission has been obtained from MCI by misrepresentation of fact or fraud.

The college authorities are bound to intimate to the Council, if any material change in the facts based on which this permission was sought/occur.

Please acknowledge receipt of this letter.

Yours faithfully

[Dr. P. Prasannaraj] Additional Secretary

C.C. to:

- The Secretary, Health & FW Department, Govt. of Kerala, Thiruvananthapuram (Kerala).
- The Registrar, Amrita Vishwa Vidyapeetham University, AIMS Ponekkara PO, Kochi, Kerala...
- The Director of Medical Education, Medical College Campus, Thiruvananthapuram-695011 Kerala.
- 4. The Secretary to the Govt. of India, Ministry of Health & F.W., Nirman Bhawan, New Delhi.

10 Rkm

Capit- L+0D

