

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

**College Code / College :** PY06 Sri Lakshmi Narayana Inst. of Med. Scien., Puducherry

**State :** PONDICHERRY

### GENERAL DETAILS :

**Name of College :** SRI LAKSHMI NARAYANA INSTITUTE OF MEDICAL SCIENCES

**Full Address of College :** OSUDU,AGARAM VILLAGE,KUDAPAKKAM POST,  
VILLIANUR COMMUNE,PUDUCHERRY.

**State / Pin :** PONDICHERRY / 605502

**Affiliating University :** BHARATH INSTITUTE OF HIGHER EDUCATION AND RESEARCH

**Session Start Date :** 01/08/2017

**Annual Fees for Deemed Universities Candidates for Management (₹):** 1950000

**Annual Fees for NRI seats in Deemed University. (\$):** 0

**Hostel facility for :** MALE AND FEMALE

**Annual hostel dues (₹):** 125000

**Bond, if any :** N

**The Amount of Fee to be deducted on re-allocation of seat to the candidates in 2nd/3rd round of UG Counseling. (₹):** 50000

**Time period of reimbursement (in days):** 30

**College website address :** www.slims.ac.in

**Other Information :** NAAC Accredited-Grade 'A'. NIRF Ranking by MHRD, Govt. of India. No.1 in Outreach and Inclusivity. No.21 among all Universities.  
\* Fee refund policy- As per UGC norms.  
\* Hostel fee is INCLUDING mes

### CONTACT DETAILS :

**Name of Dean :** DR.G.JAYALAKSHMI

**Designation :** Dean

**Tel No. Dean (Office) / Fax No. :** 0413-2661995 / 0413-2661996

**Tel No. Dean (Res) / Mobile No. :** 0413-2661996 / 9884056257

**Dean Email Address :** slimsdean@bharathuniv.ac.in

**Name of Secretary (Vice Chancellor) :** Dr. V. Kanagasabai

**Secretary Office Address :** No 7, CLC Works Road, Chromepet, Chennai- 600044

**Tel No. Secretary (Office) / Fax No. :** 044-42911000 / 044-22415051

**Secretary Email Address :** vc@bharathuniv.ac.in

**Name of Director (Registrar) :** Dr. S. Bhuminathan

**Director Office Address :** SBDCH, Velachery Main Road, Pallikaranai, Chennai-600 100

**Tel No. Director (Office) / Fax No. :** 044-42833316 / 044-28364502

**Director Email Address :** registrar@bharathuniv.ac.in

**Name of Nodal Officer :** DR A MANOHARAN

**Nodal Officer Designation :** Professor

**Nodal Officer Office Address :** OSUDU,AGARAM VILLAGE,KUDAPAKKAM POST, VILLIANUR COMMUNE,PUDUCHERRY

**Tel No. Nodal Officer (Office) / Fax No. :** 0413-2299200 / 0413-2661996

Official Seal :

Signature (Head of Institution) : \_\_\_\_\_

Name (Head of Institution) : \_\_\_\_\_

Designation : \_\_\_\_\_

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ETC.

**Nodal Officer Email Address :** slimsdean@bharathuniv.ac.in

**Nodal Officer Mobile :** 9600092079

Official Seal :

Signature (Head of Institution) : \_\_\_\_\_

Name (Head of Institution) : \_\_\_\_\_

Designation : \_\_\_\_\_