

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

College Code / College : DTN9 Sree Balaji Dental College and Hospital, Chennai
State : TAMIL NADU

GENERAL DETAILS :

Name of College :	SREE BALAJI DENTAL COLLEGE & HOSPITAL
Full Address of College :	VELACHERY MAIN ROAD, NARAYANAPURAM, PALLIKARANAI, CHENNAI - 600100
State / Pin :	TAMIL NADU / 600100
Affiliating University :	BHARATH INSTITUTE OF HIGHER EDUCATION AND RESEARCH
Session Start Date :	01/08/2017
Annual Fees for Deemed Universities Candidates for Management (₹):	500000
Annual Fees for NRI seats in Deemed University. (\$):	15000
Hostel facility for :	MALE AND FEMALE
Annual hostel dues (₹) :	50000
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 reimbursment (in days) :	30
College website address :	www.sbdch.ac.in
Other Information :	Under NRI category 15 seats available. NAAC Accredited-Grade 'A'. NIRF Ranking by MHRD, Govt. of India. No.1 in Outreach and Inclusivity. No.21 among all Universities. * Refund policy- As per UGC nor

CONTACT DETAILS :

Name of Dean :	DR. S. RAGHAVENDRA JAYESH
Designation :	Principal
Tel No. Dean (Office) / Fax No. :	044-22460619 / 044-22460631
Tel No. Dean (Res) / Mobile No. :	044-22652015 / 9841109759
Dean Email Address :	sbdchprincipaloffice@gmail.com
Name of Secretary (Vice Chancellor) :	Dr. V. Kanagasabai
Secretary Office Address :	No 7, CLC Works Road, Chromepet, Chennai - 600 044
Tel No. Secretary (Office) / Fax No. :	044-42911000 / 044-22460631
Secretary Email Address :	vc@bharathuniv.ac.in
Name of Director (Registrar) :	Dr. S. Bhuminathan
Director Office Address :	SBDCH, VELACHERY MAIN ROAD, NARAYANAPURAM, PALLIKARANAI, CHENNAI - 600100
Tel No. Director (Office) / Fax No. :	044-42833316 / 044-22460631
Director Email Address :	registrar@bharathuniv.ac.in
Name of Nodal Officer :	DR. M. SIVAKUMAR
Nodal Officer Designation :	Reporting Official
Nodal Officer Office Address :	SREE BALAJI DENTAL COLLEGE & HOSPITAL, VELACHERY MAIN ROAD, NARAYANAPURAM, PALLIKARANAI, CH-100
Tel No. Nodal Officer (Office) / Fax No. :	044-42833316 / 044-22460631
Nodal Officer Email Address :	sbdchprincipaloffice@gmail.com

Official Seal :

Signature (Head of Institution) : _____

Name (Head of Institution) : _____

Designation : _____

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ETC.

Nodal Officer Mobile : 9884319354

Official Seal :

Signature (Head of Institution) : _____

Name (Head of Institution) : _____

Designation : _____