

**PROFORMA FOR COLLEGE - INFORMATION REGARDING FEE, BOND-CONDITIONS ETC.  
(FOR UNDER-GRADUATE COURSES FOR ACADEMIC SESSION 2017-2018)**

**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. (\$):** 0

**Hostel facility for :** MALE AND FEMALE

**Annual hostel dues (₹):** 50000

**The amount of fee to be deducted in case of re-allocation in subsequent Under Graduate Medical / Dental Seats For Deemed Universities Round (Rs):** 50000

**The amount of fees to be deducted in case candidate resigns during counseling period (Rs):** 50000

**The Amount of Fees To be deducted in case Candidate resigns after Counseling period after last date of admission. (Rs):** 500000

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

**Specify penalty, if any, in case candidate resigns after final round of AIQ counseling:** 500000

**College website address :** www.sbdch.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.  
\* Refund policy- As per UGC norms.  
\* Hostel fee is excluding of mess

**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

Official Seal :

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

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

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

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| <b>Director Office Address :</b>                  | SBDCH, VELACHERY MAIN ROAD, NARAYANAPURAM, PALLIKARANAI, CHENNAI - 600100                       |
| <b>Tel No. Director (Office) / Fax No. :</b>      | 044-42833316 / 044-22460631   |
| <b>Director Email Address :</b>                   | registrar@bharathuniv.ac.in   |
| <b>Name of Nodal Officer :</b>                    | DR. M. SIVAKUMAR  |
| <b>Nodal Officer Designation :</b>                | Reporting Official  |
| <b>Nodal Officer Office Address :</b>             | SREE BALAJI DENTAL COLLEGE & HOSPITAL, VELACHERY MAIN ROAD, NARAYANAPURAM, PALLIKARANAI, CH-100 |
| <b>Tel No. Nodal Officer (Office) / Fax No. :</b> | 044-42833316 / 044-22460631   |
| <b>Nodal Officer Email Address :</b>              | sbdchprincipaloffice@gmail.com  |
| <b>Nodal Officer Mobile :</b>                     | 9884319354  |

**BOND DETAILS :**

|  |    |
|--|----|
| <b>Bond, if any (mention briefly bond condition and amount)* :</b>   | NO |
| <b>* In case bond is applicable, candidates are advised to see link Institute Bond Information</b>   |    |
| <b>* The above information has been provided by Medical College. MCC/DGHS takes no responsibility regarding the above information. Candidates are requested to contact the college authorities directly for any query regarding above information.</b> |    |

Official Seal :

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

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

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