

No.U.12012/577/2015-ME-I
Government of India
Ministry of Health & Family Welfare
(Department of Health & Family Welfare)

Nirman Bhawan, New Delhi – 110 011
Dated the 12th January, 2016

To

The Dean/ Principal,
ESIC Medical College,
NH-3 NIT Faridabad, Haryana-121001,
Email: dean-faridabad.hr@esic.in

Subject: Renewal of permission for MBBS course for 2nd batch of 100 MBBS students at ESIC Medical College, Faridabad, Haryana under Pandit BD Sharma University of Health Sciences u/s 10A of the IMC Act, 1956 for the academic year 2016-17 – reg.

Sir/ Madam,

I am directed to refer to MCI's letter No. MCI-34(41)(R-78)/2015-med./158261 dated 30.12.2015 (copy enclosed) recommending disapproval in respect of your scheme for renewal of permission for admission of 2nd batch of 100 MBBS students at your College/Institute for the academic session 2016-17.

2. In pursuance to the provisions contained in section 10(A)(4) of IMC Act, 1956, it has been decided to grant you hearing on **19.01.2016 at 2:00 PM** by the Committee constituted by this Ministry for this purpose in **Room No. 151, A-Wing**, Nirman Bhawan, Maulana Azad Road, New Delhi.

3. You are requested to appear in person or to depute authorized representative(s) to present the case of your College/Institute vis-à-vis the disapproval letter of the MCI alongwith the requisite information in the prescribed format on the specified date & time failing which the scheme will be decided ex-parte. You are also requested to **bring two hard copies and one softcopy** of the information /material you propose to present before the committee in the prescribed format in MS Word. You are also requested to send a letter of confirmation of participation by Fax at **011-2306 2959** or by e-mail dvkrao@nic.in.

Yours faithfully,


(D.V.K Rao)

Under Secretary to the Govt. of India
Telefax: 011-2306 2959

Encl: as above.

Note: It is requested to get the entry pass from Reception Officer at Gate No. 5.

Format

| S.No | Deficiencies pointed out by MCI | Submission of College on deficiencies | Annexure No. | Remarks |
|------|---------------------------------|---------------------------------------|--------------|---------|
| | | | | |