LETTER OF PERMISSION

The Dean/Principal,
Indira Gandhi Institute of Medical Sciences,
Sheikhpura, Patna,
Bihar-800014

Email : dean@igims.org; director@igims.org

Sub: Starting of MS (Ophthalmology) course at Indira Gandhi Institute of Medical Sciences, Sheikhpura, Patna, Bihar under Indira Gandhi Inst of Medical Sciences (Deemed University), Patna u/s 10(A) of the IMC Act, 1956 for academic year 2020-21- Permission of Board of Governors - Regarding.

Sir/Madam,

In continuation to this office Letter dated 25th November 2019 seeking information and your acceptance of the conditions mentioned therein vide letter dated: 2nd December 2019. I am directed to convey the permission of the Board of Governors for Starting of MS (Ophthalmology) course for 04(Four) seat(s) per year with prospective effect i.e. from the academic year 2020-21 at Indira Gandhi Institute of Medical Sciences, Sheikhpura, Patna, Bihar u/s 10A of the IMC Act, 1956, as amended.

This permission for starting of above mentioned course and admission of students will be till 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 first batch admitted against the sanctioned intake appears for final year examination with the Central Government.

I am further directed to inform that you and your institution is fully responsible to fulfill and maintain norms including the infrastructure both physical and human resource, teaching faculty and clinical material, etc. throughout the academic year, as stipulated in Regulation of Medical Council of India. In case false/wrong declaration or fabricated documents have been used for procuring permission of the Board of Governors and the said misconduct is brought to notice or comes to the knowledge of Medical Council of India at any stage during the current academic year, your institution is liable not to be considered for