

Phone: 25367033, 25367035, 25367036  
दूरभाष: 25367033, 25367035, 25367036  
Telegrams: MEDCONCIND, New Delhi-75  
ऑर: मेडिकल परिषद, नई दिल्ली  
Fax: 0091-11-25367024  
E-mail: mci@bol.net.in  
Website: www.mciindia.org



पेडकट - 14, सेक्टर - 8,  
द्वारका फेज - 1,  
नई दिल्ली - 110077  
Pocket- 14, Sector- 8,  
Dwarka Phase - 1  
New Delhi-110077

38

भारतीय आयुर्विज्ञान परिषद  
MEDICAL COUNCIL OF INDIA

G.B ITEM NO. 88 (30/03/2016)

No. MCI -71(22)/2016-Med./

Date:

The Secretary to the  
Govt. of India,  
Ministry of Health & Family Welfare,  
Nirman Bhawan,  
New Delhi-110011

Sub: MJP Rohilkhand University, Bareilly, U.P. - Recognition of MD(Skin & VD) qualification for 2 seats in respect of students being trained at Rohilkhand Medical College & Hospital, Barielly.

Sir/ Madam,

I am to state that the General Body of this Council at its meeting held on 30/03/2016 considered the Council Assessor's Report (29th & 30th April, 2015) on the physical and other teaching facilities available at Rohilkhand Medical College & Hospital, Barielly for the award of MD(Skin & VD) qualification for 2 seats under MJP Rohilkhand University, Bareilly, U.P.. The Council approved the following recommendations of the Postgraduate Medical Education Committee, which I am directed to convey herewith for your information and necessary action:-

"The Postgraduate Medical Education Committee considered the Council Assessor's Report (29th & 30th April, 2015) and decided to recommend to the Central Government that MD(Skin & VD) qualification for 2 seats granted by MJP Rohilkhand University, Bareilly, U.P. in respect of students being trained at Rohilkhand Medical College & Hospital, Barielly be recognized and included in the 1st Schedule to the I.M.C. Act, 1956.

The Postgraduate Medical Education Committee further decided that the recognition so granted shall be for a maximum period of 5 years from the date of Notification upon which the Institute shall have to apply for renewal of recognition. Failure to seek timely renewal of recognition as required shall invariably result in stoppage of admission to the Postgraduate Course."

You are therefore requested to notify the above qualification at the earliest.

A copy of assessment report is enclosed herewith.

Date/ year of starting the course: 2012

Date/ year of examination of first batch: 2015

Yours faithfully,

(Dr. Seema Madan)  
Consultant (P.G.)

Encl.: As above.

Phone : 25367033, 25367035, 25367036  
FAX : 25367033, 25367035, 25367036  
Telegrams : MEDCONCIND, New Delhi-75  
गार : मडकासिंड नई दिल्ली  
Fax : 0091-11-25367024  
E-mail : [mci@bol.net.in](mailto:mci@bol.net.in)  
Website : [www.mciindia.org](http://www.mciindia.org)



पॉकेट - 14, सेक्टर - 8  
द्वारका फेज - 1  
नई दिल्ली- 110 077  
Pocket- 14, Sector- 8  
Dwarka Phase - 1  
New Delhi-110077

भारतीय आयुर्विज्ञान परिषद्  
MEDICAL COUNCIL OF INDIA

Endst. No. MCI -71(22)/2016-Med. / 100865

Date: 05/4/16

Copy together with a copy of assessment report is forwarded for information and necessary action to:-

1. The Dean/ Principal, Rohilkhand Medical College & Hospital, Bareilly, U.P.
2. The Registrar, MJP Rohilkhand University, Bareilly - 243006. U.P.
3. Director General, Medical Education & Training, Jawahar Bhawan, 6th Floor, Ashok Marg, Lucknow, Uttar Pradesh
4. Computer Section of the Council for uploading on MCI website.

(Dr. Seema Madan)  
Consultant (P.G.)