

**(INSTITUTIONAL INFORMATION)****1. Particulars of Dean :** *(Who so ever is Head of Training Centre)*

Name: : Dr. Srivalli Natarajan. Age: 51 years (Date of Birth) 03/08/1970

PG Degree	Subject	Year	Institution	University
Recognized	Oral & Maxillofacial Surgery	Sept. 1996	GDC, Chennai	Tamilnadu, Dr. M.G.R. Medical University

**Teaching Experience:-**

Designation	Institution	From	To	Total Exp.
Lecturer	D. Y. Patil Dental College Nerul, Navi Mumbai	02/04/1997	17/06/2000	03-02-15
Associate Professor	D. Y. Patil Dental College Nerul, Navi Mumbai	17/06/2000	12/09/2005	05-02-26
Professor	D. Y. Patil Dental College Nerul	13/09/2005	16/01/2006	00-04-03
Professor	MGM Dental College, Navi Mumbai	08/02/2006	01/03/2016	10-00-22
Professor & HOD	MGM Dental College, Navi Mumbai	02/03/2016	08/08/2021	05-05-06
Dean	MGM Dental College, Navi Mumbai	09/08/2021	Till date	00-08-21
Any Other	-	-	-	-
<b>Grand Total =</b>				<b>25yrs. 3dys.</b>

**2. Management /Society / Inst. Information :**

1.	<b>i) Name of the Society /Institution/College University Department</b>	Mahatma Gandhi Mission
	<b>ii) Postal Address, with PIN:</b>	Shri. Kamalkishor Kadam 12, Bhagya Nagar, Nanded
	<b>iii) Contact Details:</b>	Mob: 9049299555
	<b>iv) E-mail ID:</b>	knk1945@gmail.com
2.	<b>Society / Institution / College, Registration Number and date</b>	i) Public Trust Act 1950 : F-674 (Nanded) Dt. 30/04/1983 ii) Society's Registration Maharashtra/74-82 Nanded Act.1860 : Dt. 20/12/1982 iii) Year of establishment : 1982 iv) Copies of Registration, Constitution and Memorandum of Association attached? Yes- Mark as <b>Appendix 'A'</b>
3	<b>Hospital Information:</b> <i>(It is mandatory for Training Centre /applying Institute to have their own functional Hospital as per norms)</i>	
	i) Name of the Hospital	Mahatma Gandhi Mission Hospital Kamothe, Navi Mumbai
	ii) Nursing Home Registration No.	MH/pmc/m-136 Dt. 11/03/2019
	iii) Establishment Year	05/04/1994
		<b>Mark as <b>Appendix 'B'</b></b>

4.	<b>i) Name of the College Institute where course is to be conducted:</b>	Mahatma Gandhi Mission Dental College & Hospital	
	ii) Postal Address, with PIN	Plot No. 1 & 2 Sector-01 (Old 18 & 19), Kamothe, Navi Mumbai- 410209	
	iii) Contact Details	Tel. Phone No. : 022-27436604, 022-27433185	
	iv) Email ID:	mgmdch@mgmmumbai.ac.in	
	v) List of University approved Fellowship / Certificate Course (s) conducted / already running at Training Centre with Intake Capacity	<b>Name of the Course(s) : Approved Intake Capacity Affiliated Since (if necessary Attach separate list)</b>	i) Forensic Dentistry (Odontology) -05 A.Y. 2019-20
			ii) Comprehensive Cleft Care-04 A.Y. 2019-20
		iii) Endodontics-05 A.Y. 2019-20	
		iv) Oral Implantology-05 A.Y. 2019-20	
vi) Training Centre/Institute willing/desirous to Start/ Open Fellowship / Certificate Course(s) (For New Opening Purpose only)	<b>Name of the Course(s) : Approved Intake Capacity Affiliated Since (if necessary Attach separate list)</b>	<b>Not Applicable</b>	
5.	Affiliation Fees details: (Bank / DD No. /date /amount /NEFT /RTGS)	<b>Paid Fees details Attached: Rs.50000/- (Fifty Thousand Only) UTR No. IBKL211020687959 Dt. 21/10/2021</b>  <u><a href="#">Annexure-2</a></u>  (Pending Fees, if any: Nil)	
6.	Financial position of the Society /Institute in the preceding 03 years	Audited Statements of Accounts for: Yes <b>Mark as <u><a href="#">Appendix 'C'</a></u></b>	
7.	Budgetary provision for the FC for the next 03 years	1) F.Y. 2021-22 :- Rs. 2.5 lac per student 2) F.Y. 2022-23 :- Rs. 3 lac per student 3) F.Y. 2023-24 :- Rs. 3.5 lac per student	
8.	Management Resolution seeking Recognition of Institute for FC of MUHS, Nashik	Resolution No. 09 dated 31/01/2019 Copy of Management Resolution attached? <b>Yes</b> <b>Mark as <u><a href="#">Appendix 'D'</a></u></b>	
9.	<b>Other Information:-</b>		
	a) Land:	Yes. If yes, then Area: 5 Acres	
	i) Whether the land is owned by the Applicant Institute / College / Trust:	Copy of land documents i.e. 7/12 extract, Property Card, etc. attached : Yes <b>Mark as <u><a href="#">Appendix 'E'</a></u></b>	
	ii) Whether the land is registered?	Yes. If yes, Registration Number: 39M dated 29/11/2014 at (Place): Panvel Copy of Land Registration Certificate attached: <b>Yes</b> <b>Mark as <u><a href="#">Appendix 'F'</a></u></b>	
	iii) Any loans, mortgage, etc. shown against the title of the land:	No, If yes, amount of loan Rs. Nil / mortgaged for Rs. Nil Copy of Loan/Mortgage Deed attached: <b>N. A.</b> <b>Mark as <u><a href="#">Appendix 'G'</a></u></b>	
	b) Building: i) Total built-up area:	119563.55 sq.ft. Certified copy of Building Plan attached : <b>Yes</b> <b>Mark as <u><a href="#">Appendix 'H'</a></u></b>	

### 3. Central Library:-

[Appendix 'I'](#)

- Total number of Books in library :- 6189
- Books pertaining to concerned Fellowship subject :- 186
- Purchase of latest editions of concerned books in last 3 years :- 25

#### Journals:

Journals		Total	Concerned Fellowship subject
Indian	02	02	02
Foreign	03	03	03

- Year /Month up to which latest Indian Journals available : April 2022
- Year / Month up to which latest Foreign Journals available: April 2022
- Internet / Med pub / Photocopy facility : Available
- Library opening times : 8:30am. to 6:30pm.
- Reading facility out of routine library hours : Available

*(Obtain list of books & journals duly signed by competent authority)*

4. **Recreational facilities:-** Play grounds, Gymnasium : Available

### 5. Hostel Accommodation:-

Particular	UG		PG		Interns	
	Boys	Girls	Boys	Girls	Boys	Girls
No. of Rooms	84	84	64	48	-	-
No. of Students	11	54	nil	02	-	-
Status of Cleanliness	Excellent	Excellent	Excellent	Excellent	-	-

6. **Residential accommodation for Staff / Paramedical staff:-** Available

7. **Ethical Committee (Constitution)** : Yes

8. **Medical Education Unit (Constitution)** : Yes, Health Science Education Technology (HSET) Unit

*(Specify number of meetings held annually & minutes thereof):* Number of Meetings: 04

9. **Any other faculty specific information required:** - (such as Herbal garden / Panchakarma Unit

✓

/ Pharmacy / **Dental Chairs and Units** / as per the requirement of Concerned Course)

Attached details [Appendix 'J'](#)