

PROFORMA

DETAILS OF THE SELF-FINANCING POST GRADUATE DEGREE / DIPLOMA MEDICAL AND SUPER SPECIALITY INSTITUTIONS WHICH OFFER SEATS FOR MD / MS & DM M.Ch COURSES FOR 2025-2026 UNDER SINGLE WINDOW SYSTEM

NAME OF THE COURSE: MD RADIATION ONCOLOGY

1	Name and full address of the College with Pin Code (IN CAPITAL LETTERS)	: CANCER INSTITUTE (W.I.A.), REGIONAL CENTRE FOR CANCER RESEARCH AND TREATMENT No 1 EAST CANAL BANK ROAD, GANDHI NAGAR, ADYAR CHENNAI-600020
2	G.O. number and date in which permission was granted to start the course.	: No:63(22)/03-Med. /47774 Dt.27/01/92
3	Year of commencement of the course in the College.	: 1992
4	Whether orders of the Tamil Nadu Dr.M.G.R. Medical University, Chennai for the continuance of provisional affiliation has been obtained for the year 2025-2026 (evidence to be produced)	: Proc. No. Affln.IV(4)66419/2019 Dated 24/09/2024 (Enclosure 1)
5	Whether approval of the MCI/DCI, New Delhi has been obtained for the year 2025-2026. (evidence to be produced)	: Public Notice: No. N-16013(16)/1/2025- IT-NMC (8328232) (Enclosure 2)
6	College phone number (s) with STD Code	: 044- 22209150
	E-mail id	: dean@cancerinstitutewia.org
	FAX number with Code	: 044 -21912085
	Nearest Railway Station and distance	: Indiranagar MRTS Distance : 1 Km
	Nearest Bus stop and distance	: Anna University Bus Stop / Distance:500 M
7	Name of the Trust / Management	: Cancer Institute (W.I.A.)

	Phone numbers with STD Code	:	044- 22209150					
	FAX number	:	044 -21912085					
8	Name of the Head of the Institution	:	Dr. Kalpana Balakrishnan					
	Land Line number	:	044- 22209150					
	Mobile Number	:	9840158777					
9	Name of the Administrative Officer / Dean✓ (Tick whichever is applicable)	:	Dr.S. Shirley					
	Designation and Educational Qualification	:	Professor & Dean MD.,DNB., Ph.D.					
	Land Line number	:	044- 22209150					
	Mobile number	:	9840271771					
	e-mail id	:	dean@cancerinstitutewia.org					
10	Sanctioned strength (Annual intake of students for the year 2025-2026 as approved by the Government of India/Government of Tamilnadu /The T.N. Dr.M.G.R.Medical University. (evidence to be produced)	:	1)Proc.No. Affln.IV(4)66419/2019 Dated 24/09/2024 (Enclosure 1) 2) Public Notice: No. N16013(16)/1/2025-IT-NMC (8328232) (Enclosure 2)					
11	Allotment of seats Academic Year:2025-2026	:	Total seats (Speciality wise)	Government (SWS) SQ	Self-Financing (MQ/ NRI)			
			7	3	4			
12	Specify the gender the college admits. (Please tick in the appropriate box)	:	Boys and Girls	✓				
			Only Girls	-				
13	Whether declared as Minority Institution? If so, the copy of G.O. to be produced.	:	NO					
14	Whether Hostel facilities are available	:	Please (tick) in the appropriate box					
			For Boys	:	Yes	✓	No	-
			For Girls	:	Yes	✓	No	-
	If yes, mention the number of rooms available.							

		Single room	Double room	Dormitory type rooms
	For Boys	-	12	-
	For Girls	-	8	-
15	Any service contract after completing the course imposed on students by the Management. If so, the details thereof may be furnished	Yes, 1 year service contract. Bond severance Rs. 10,00,000. Discontinuation fee: Tuition fee paid plus stipend received till time of discontinuation		
16	Online Remittance of Tuition Fee. Please indicate the Name & Address, Bank A/c No: & Code No. to which Tuition Fee collected from the candidates to be sent (as per court order)	Name of the Beneficiary: CANCER INSTITUTE (W.I.A.) COLLEGE Name & Address of Bank: Union Bank of India Madhya Kailash Branch Cancer Institute (WIA) Dr.S. Krishnamurthi Campus Sardar Patel Road Chennai-600036. Account No: 149710011000023 Code: 814971 MICR No. 600026110 IFSC Code: UBIN0814971		

Note: All columns should be filled up. No column can be left blank.

Place: Chennai

Date : 17.04.2025

SIGNATURE OF THE HEAD OF THE INSTITUTION
WITH DESIGNATION AND STAMP

Dr. S. Shirley
24/4/2025
Dr. S. SHIRLEY MBBS, MD, DNB, MNAMS, PhD
Dean
Cancer Institute (W.I.A.)
Adyar
Chennai - 600 020.

DECLARATION

We hereby declare that the information furnished in the proforma are true and we assure that there will not be any deviation from the facts furnished. If any deviation or deficiencies are noticed at a later stage, it is liable to initiate action against the concerned authorities as per law.

AUTHORISED SIGNATORY OF THE MANAGEMENT,
COLLEGE SEAL WITH DATE

Dr. S. Shirley
24/4/2025
Dr. S. SHIRLEY MBBS, MD, DNB, MNAMS, PhD
Dean
Cancer Institute (W.I.A.)
Adyar
Chennai - 600 020.

DEAN / PRINCIPAL.

Dr. S. Shirley
24/4/2025
Dr. S. SHIRLEY MBBS, MD, DNB, MNAMS, PhD
Dean
Cancer Institute (W.I.A.)
Adyar
Chennai - 600 020.

17	Details of the fees levied (should clearly be noted without ambiguities for the candidates selected by Government under SWS in the seats offered by you.(evidence of the Fee Fixation Committee to be enclosed).	
	Tuition Fee (per annum)	: Rs.3,50,000.00 (State Quota) Rs.8,00,000.00 (Management Quota)
	Special Fee (per annum)	: NO
	Other Fee, if any (per annum) Please specify	: Rs.35,000.00 (Development Fees)
	Other Fee, (Transportation Charges, Hostel Fee, etc.,) per annum	: Hostel fees – Rs. 15,000/-
18	Hostel charges levied (per student/per month)	
	Room Rent	: Rs. 1250/-
	Mess (Approximate)	: Nil
	Other charges (if any)	: Nil
19	Stipend Details	: I year Rs.50,923/- II year Rs.53,544/- III year Rs.56,275/-

Note: The Management is advised not to collect the fee in excess other than the fee prescribed by the Committee. All columns should be filled up. No column can be left blank.

DECLARATION

We hereby declare that the fee details furnished above fee in the proforma are true and we assure that there will not be any excess fee deviation from the facts furnished other than the fee prescribed by the Fee Fixation Committee. If any deviation or deficiencies are noticed at a later stage, it is liable to initiate action against the concerned authorities as per law.

AUTHORISED SIGNATORY OF THE MANAGEMENT,
COLLEGE SEAL WITH DATE

Shirley 24/4/2025
DEAN / PRINCIPAL.
Dr. S. SHIRLEY MBBS, MD, DNB, MNAMS, PhD
Dean
Cancer Institute (W.I.A.)
Adyar
Chennai - 600 020.