

ANNEXURE IV

Tel: "UNIVERSITY"

33171 to 33178 }
33179 to 31508 } (16 lines)



MADURAI KAMARAJ UNIVERSITY

Please quote this reference Number)

46/78 /28-a

PALKALAI NAGAR
MADURAI-625 021
4-7-83
Dated

MAJOR P.P.CHINNADURAI
REGISTRAR-IN-CHARGE

To
The Director
Aravind Eye Hospital
Madurai-625 020.

Sir,

Sub: D.O. Course - Approval for appointment of Lecturer
in Ophthalmology and increase of seats - Reg.

Ref: Your letter dt. 4-6-83 and 7-6-83.

With reference to your letters cited, I am directed
to inform you that two more additional seats have been
granted for the D.O. course from the year 1983-84 to
your hospital.

I am further to inform you that the appointment of
Dr. A.V. Rajagopalan as Lecturer in Ophthalmology w.e.f.
1st June 1983 in your hospital is approved.

I am also to inform you that your request to
approve the appointment of Dr. M. Srinivasan as Asst. Professor
in Ophthalmology is not complied with.

Kindly acknowledge the receipt.

Yours faithfully,

REGISTRAR i/c.

Copy to the Director of Medical Education, Madras-600 005.
Secretary, Medical Council of India, New Delhi.