

पिंपरी चिंचवड महानगरपालिका, पिंपरी - १८
वैद्यकीय मुख्य कार्यालय
क्र. वेद्य/कावि/ २४२ - २०२१
दि - ०१/०३/२०२१

प्रति,
अधिष्ठाता
यशवंतराव चव्हाण स्मृती रुग्णालय
पिंपरी चिंचवड महानगरपालिका
पिंपरी १८

विषय - नर्सिंग कोर्ससाठी प्रवेश घेणा-या विद्यार्थ्यांना प्रशिक्षणासाठी /

अनुभवासाठी वायसीएम रुग्णालय संलग्नतेबाबत

संदर्भ - १) मा.स्वांगी समिती सभा ठराव क्र ८०१७ दि १३/०२/२०१४

२) गॅन्ट मेडीकल फाउंडेशन, तेहमी गॅन्ट इन्स्टिट्यूट ऑफ नर्सिंग

एज्युकेशन पुणे यांचा दि. ०३/०२/२०२१ रोजीचा अर्ज

३) दिनांक ०९/०९/२०१९ चा करारनामा मुदत दि १३/०५/२०२४ पर्यंत

४) मनपा फि भरणा पावतो क्र वी ७४२ दिनांक ०३/०२/२०२१ र.रु. ९७२०/-

उपरोक्त विद्यार्थ्यांकामां सदस्यीय क्र. १ चे मा.स्वांगी समिती सभा ठराव क्रनांक ८०१७ दि १३/०२/२०१४ अन्वये-महानगरपालिका शासन-वैद्यकीय शिक्षण व औषधी द्रव्य विभाग यांचेकडील शासन निर्णय एनईडी/२००९/सीआर/१३३/०९ शिक्षण व मंत्रालय मुंबई ४०००३२ दि २५/८/२००९ अन्वये सदर रुग्णालयास सरावासाठी असणारी आवश्यक फि भरून घेवून मनपाचे रुग्णालयांमध्ये वैद्यकीय शिक्षणाचे सरावास उपलब्ध करून देणेस नान्यता दिलेली आहे.

ने. गॅन्ट मेडीकल फाउंडेशन, तेहमी गॅन्ट इन्स्टिट्यूट ऑफ नर्सिंग एज्युकेशन पुणे या संस्थेने ३ संदर्भ क्रमांक २ अन्वये त्याचे पत्रासोबत जोडलेल्या यादीमध्ये नमूद केलेल्या विद्यार्थ्यांना नमूद केलेल्या कालावधीसाठी नर्सिंग प्रशिक्षण घेणेबाबतची परवानगी मागितली आहे. व त्यानुसार कामकाजा करारनाम दिलेला आहे. अर्जासोबत जोडलेल्या यादीनुसार प्रशिक्षणार्थी विद्यार्थ्यांसाठी एकूण रक्कम रुपये ९७२०/- (रक्कम रुपये नव हजार सातशे वीस फक्त) उपरोक्त संदर्भ ४ नुसार संलग्नता फी वानपा कोषागारात जमा आहे.

तरी गॅन्ट मेडीकल फाउंडेशन, तेहमी गॅन्ट इन्स्टिट्यूट ऑफ नर्सिंग एज्युकेशन पुणे यांचेकडील विद्यार्थ्यांना आपले रुग्णालयात त्यांचे पत्रासोबत जोडलेल्या यादी नुसार नमूद केलेल्या कालावधीमध्ये रोटेशन नुसार पाहणे दृष्ट्यात यावी

(डॉ. धनंजय साळवे)

अति.आरोग्य वैद्यकीय अधिकारी
पिंपरी चिंचवड महानगरपालिका

पिंपरी -

PRINCIPAL

TEHMI GRANT I.N.E.

RUBY HALL CLINIC, PUNE-1.

सोबत - दि. ०३/०३/२०२१ चे पत्र व
संलग्नता फी भरलेली पावली आहे.
प्रत - गॅन्ट मेडीकल फाउंडेशन, तेहमी गॅन्ट इन्स्टिट्यूट ऑफ नर्सिंग एज्युकेशन पुणे

पिंपरी चिंचवड महानगरपालिका, पिंपरी पुणे - ४११ ०१८.

B/743 सामान्य रावती

03/02/20

पावली क्रमांक

दिनांक :

नाव : श्री/मे.

TEHMI GRANT INSTITUTE OF NURSING EDUCATION

रा.

PUNE

वांध्याकडून अक्षरी रुपये :

RUPEES NINE THOUSAND SEVEN HUNDRED TWENTY C

याबद्दल रोड/चकन पिळाल.

हस्ते

SALANGATA FEE : 9720.00

रुपये

चेक/डी.डी.नं.:

चक.

Cash Amt. 0.00

CHEQUE/DD 9720.00

TOTAL 9720.00

cheque091656 (DD)

(SUBJECT TO REALIZATION OF CHEQUE)

AXIS BANK LTD



Rec. निष्ठापाल/लिपिक

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पुस्तक

8-2 AUG 2319

प्रथम मुक्तिक लिपिका
मुक्तिकागार मुक्तिक लिपिका



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Male
PRINCIPAL

AL *Hale*
PRINCIPAL
TEHNI GRANT M.E.
RUBY HALL CLERK, PHONE-4



MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding is drawn on the ____ day of August 2019

and those have been accepted by both parties:

1. Tehmi Grant Institute of Nursing Education has paid Rs. 25,000/- deposit (refundable) towards Y.C.M. Hospital of the Corporation for granting permission to nursing courses, vide receipt no. 8/97 dated 14/05/2019 40 131512024 UJH
2. The Corporation hereby allows Tehmi Grant Institute of Nursing Education to make use of Yashwantrao Chavan Memorial Hospital, Pimpri to impart practical training to its Basic B.Sc. -Nursing, M.Sc. Nursing and P.B.B.Sc. Nursing students.
3.

Number of Basic B.Sc Nursing students	95
Number of M.Sc Nursing Students	10
Number of Post B.Sc Nursing students (IGNOU)	30
4. The Corporation will not pay any remuneration to the nursing students on this account.
5. The Tehmi Grant Institute of Nursing Education will not claim any type of fund or grant from the Corporation for this educational activity.
6. In consideration for the facility of practical training made available, Tehmi Grant Institute of Nursing Education will pay remuneration to the Corporation.
7. Remuneration will be paid as per the rate prescribed by the Government of Maharashtra vide resolution dated 26.08.2009 i.e. per day per bed Rs. 10/- for each student.
8. The clinical instructors / clinical tutor will do the day - to - day supervisions during posting in the concerned hospital.
9. Tehmi Grant Institute of Nursing Education will ensure that the students will maintain discipline during the tenure of training in the hospital.
10. Tehmi Grant Institute of Nursing Education has to ensure that the student nurses attend the hospital regularly and in time for the duty



Shale

PRINCIPAL
TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1

Medical Officer of Health, Dr. Pawan Salve having its office at 2nd floor, Main Building, Bombay Pune Road, Pimpri, Pune 411015 (which expression shall unless it be repugnant to the context or meaning thereof shall be deemed to mean and include its assignees, heirs, administrators, executors and successors)

..... OF THE ONE PART

AND

TEHMI GRANT INSTITUTE OF NURSING EDUCATION, a Nursing Training College, through its Principal Mrs. Shubhada Kale, having its office at Tadiwala Road, Pune 411001, (which expression shall unless it be repugnant to the context or meaning thereof shall be deemed to mean and include its assignees, heirs, administrators, executors and successors)

..... OF THE SECOND PART

WHEREAS, Pimpri Chinchwad Municipal Corporation is a corporate body constituted under the provisions of Maharashtra Municipal Corporation Act (Previously known as BMC Act, 1949) and its Medical Officer of Health having the authority to execute contracts on behalf of the Corporation.

AND WHEREAS the Corporation owns and manages various hospitals within its territorial jurisdiction.

AND WHEREAS Tehmi Grant Institute of Nursing Education established in the year 2004 duly recognized by Indian Nursing Council, Maharashtra Nursing Council and affiliated to Maharashtra University of Health Sciences, Nashik and approved by Government of Maharashtra vide G.R. No.- NUR-/304/107/PK-34/04/EDU -1 DATED 24TH August 2004 and the Principal of Tehmi Grant Institute of Nursing Education being given powers to enter into agreement for according practical training of student nurses of the courses (Basic B.Sc., M.Sc. and P.B.B.Sc. Nursing) at Yashwantrao Chavan Memorial Hospital under Pimpri Chinchwad Municipal Corporation.

AND WHEREAS the Corporation thereupon in its Standing Committee Meeting passed a resolution No 6017 dated 13.07.2014 allowing Tehmi Grant Institute of Nursing Education to use Yashwantrao Chavan Memorial Hospital for practical training for its student nurses.


Principal
TEHMI GRANT I.N.E.
RUBY HALL PUNE-41

renewable every year for five consecutive years as per the resolution of Standing Committee.

12. Tehmi Grant Institute of Nursing Education will be responsible for all the claims, correspondence or expenses payable to consequences of any accident or injuries sustained by any study in the hospital.
13. It is agreed by and between the parties that in case of any dispute arising in terms of this Memorandum of Understanding, the Commissioner, PCMC has the authority to terminate this Memorandum of Understanding without any prior notice.
14. It is assumed that the parties have to sign this Memorandum of Understanding on the day and year mentioned above.

a. Name Dr. Pawan Salve
Address Additional Officer of Health
Pimpri-Chinchwad Municipal Corporation
Pimpri-Chinchwad Municipal Corporation
2nd floor, Main Building,
Bombay Pune Road,
Pimpri, Pune 411018

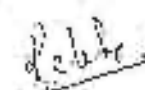
Signature

b. Signature
Name

Mrs. Subhada Kale
Principal,
Tehmi Grant Institute of Nursing Education
Tadiwala Road,
Pune 411001

In the presence of:

1. Signature: 
Name Mr. Pallavi Shinde
Address TADWE, Pune

2. Signature: 
Name Mrs. Ratcha. R.
Address TADWE, Pune



PRINCIPAL
TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1

Noted And Registered
Serial No. 1063
PRINCIPAL
TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1



ATTES

PRAKASH C. B.
NOTARY
GOVT OF I
REG. NO.

13 AUG



KEM®
Hospital
PUNE

Quality and ethics in patient care

+91 20 6803 7300
+91 20 2821 7300
488 Rasta Path,
Sardar Meher Road,
Pune - 411011
www.kemhospitalpune.org

KEMH/DIR ACAD/1116/2021

Date: 01.11.2021

To,
Prof. Shubbada Kale,
Principal,
Tehmi Grant Institute of Nursing Education,
Pune - 411001.

Ref. : Your letter No. TGINE/BSc (N)/156b/2021, dated 28.10.2021

Dear Madam,

With reference to your above letter, you can send 30 B.Sc Nursing students from your College, for Clinical experience in Paediatric Ward and NICU at this Institution from 22.11.2021 to 18.12.2021.

You have to pay Rs. 2000/- (+ 18% GST) per month per student as per our rules.

With best regards,

Yours sincerely,

Dr. Dayahand Shetty,
Director Academics.

CC:
Director Paediatrics
Matron

PRINCIPAL
TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1.



K.E.M. Hospital, Pune
Bank Receipt

Division : KEM
Party : 10334(Grant medical foundation)
Status : Approved

Doc No : BRT547/1100035
Doc Date : 13/11/2021
Chq No : 335888 Dt: 10/11/2021

Sr No	Particulars	Charge Div	A/C Head	Amount
1	Amount received from Grant medical foundation for clinical experience in paediatric ward and NICU from 22.11.21 to 18.12.21 (30 B. Sc nursing student) paid by cheque. INVSC1/1100050 dt.13/11/21 Btl# dt.	KEM	11560	70800 C

HDFC Bank-SD No 50153012517547

Total 70800 D

Narration : Ch no. 335888 dated 10.11.2021 received from Grant medical foundation for clinical experience in paediatric ward and NICU from 22.11.21 to 18.12.21 (30 B. Sc nursing student) paid by cheque.

In words : Rupees Seventy Thousand Eight Hundred

Prepared By : ddn8513
Prepared Date : 13/11/2021

Approved By : nlb9996
Approved Date : 13/11/2021

Diya
13/11/21

Male
PRINCIPAL
TENTACANTINE
RUB. 10/11/21 PUNE-1.



Ref. No :

Date :

Ref No: TGINE/ B.B.Sc (N)/156b/2021

11/11/2021

To,
The Medical Superintendent,
Regional Mental Hospital,
Yerwada,
Pune

Subject:- Request permission for clinical experience for 30, third year Basic B.Sc Nursing students in Psychiatric (Mental Health) Nursing at Yerwada Regional Mental Hospital, Pune from 10/01/2022 to 29/01/2022.

24 Students from 10/01/2022 to 29/01/2022 - 17 Days

6 Students from 17/01/2022 to 29/01/2022 - 11 Days

1. The third year Basic B.Sc Nursing students have Psychiatry (Mental Health) Nursing as a part of their curriculum by Maharashtra University of Health Science, Nashik.
2. I request you to kindly grant permission for clinical experience from 10/01/2022 to 29/01/2022, Three weeks at your esteemed hospital.
3. The students will be accompanied by the teachers for supervision.
4. The students will abide by the rules & regulation of the institution.

Kindly acknowledge,

Thanking You,

Shale

Prof Mrs. Shubhada Kale
Principal,
TGINE,
Pune-1

Shale
PRINCIPAL
TEHMI GRANT I.N.E.

RUBY HALL CLINIC, PUNE-1.

Office of Tehmi Grant Institute of Nursing Education
13, Tadiwala Road, Opp. Hotel Meru, Pune - 411001.
Phone: +91-20-26162359

Shale

Tehmi Grant Institute of Nursing Education

PRINCIPAL NAAC Accredited

TEHMI GRANT I.N.E. (Recognised by INC, MNC & Affiliated to MUHS, Nashik)

RUBY HALL CLINIC, PUNE-1

13, Tadiwala Road, Opp. Hotel Meru, Pune - 411001. Tel. : 020-26455688/89. Fax: 020-26162359.

Email : tehmi@hotmali.com Website : www.tgine.com

Hospital : Ruby Hall Clinic, (NAAC Accredited Hospital) 40, Sassoon Road, Pune - 411 001, Tel. +91-20-26162391 (8 Lines)

*Submitted to Resp. Officer
for necessary permission
can be permitted following
crack rules, regulations
and protocols.*

Shale
10/11/21
जायलेश्वर
प्रदेशिक मनोरंजन
सेवा पुणे

Shale
10/11/2021

सर्वसा. १११
Gen ११३ मी.

पूत णत
[सःसातरणीय]
[NON-TRANSFERABLE]
ORIGINAL COPY

RECEIPT FOR PAYMENT TO GOVERNMENT

ठिकाना/Place दिनांक/Date 01/12/2022

१०३ मेडिकल मांटेडन लेहमा गैर। क्षिप्रत पोभान्याकाङ्कन।

Received from University of Wisconsin - Madison

₹/Rs. 2337 only (रुपय/Ruppes) ...

यावरिता मिळाले.

on account of मसिद्धि रुजिडा

रोखपाल था लेखापाल
Cashier or Accountant

(Signature) (Print Name)

श्री 7827059

RUBY HALL CLINIC, PUNE-1

 Grant Medical Foundation
Tehmi Grant Institute of Nursing Education



REF :NO:- TGINE/ B.B.Sc (N)/ 122 - D/2021

Date- 02/12/2021

To,
The Director,
Deep Griha Family Welfare Society,
Tadiwala road,
Pune-01.

Subject- Regarding the permission for Urban Health Experience in Community Health Nursing for 34 students of 4th year Basic B.Sc Nursing 2021 - 2022

Sir/Madam,

This is to inform you that the Fourth Year Basic B.Sc Nursing students (34) have their Urban Health Experience as a part of their curriculum of MUHS Nashik. The adopted community for Urban Health experience is Tadiwala community.

Kindly give us permission for the students posting in Tadiwala community and Deep Griha Family Welfare Society from 06th December 2021 to 24th December -2021.

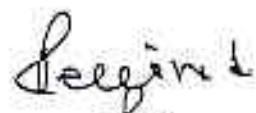
Thanking you,


Dr. Shubhada Kale,
Principal, 02-12-2021
TGINE,
Pune- 01.



PRINCIPAL
TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1


PRINCIPAL
TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1.


03/12/2021





Grant Medical Foundation Tehmi Grant Institute of Nursing Education



REF: NO: TGINE/B.D.S c(N)/112 - A/2021

DATE : 01/02/2021

To,
Dulmi Health
The Medical Officer,
MHE, Zilla Parishad,
Kunjirwadi,
Pune.

SUB:- Requesting Permission for the Rural Community Health Nursing Experience for 4th Year Basic B.Sc Nursing Students at Kunjirwadi

Sir/Madam,

With respect to above cited subject, Kindly grant us permission for 4th Year Basic B.Sc Nursing Students (36) of TGINE, Pune for their Rural experience for a period of 2 weeks in April 2021. This experience is a part of their Curriculum prescribed by Maharashtra University of Health Sciences, Nashik.

The Clinical Instructor's will accompany with them for the posting.

Sr. No	Basic B.Sc Nursing Year	Number of Students	Date
1.	4 th Year Basic B.Sc Nursing	36	05/04/2021 to 17/04/2021

Kindly do the needful,

Thanking You,

Kale

Prof. Shubhada Kale,
Principal, 01-02-2021
TGINE,
Pune



PRINCIPAL
GMF's TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1

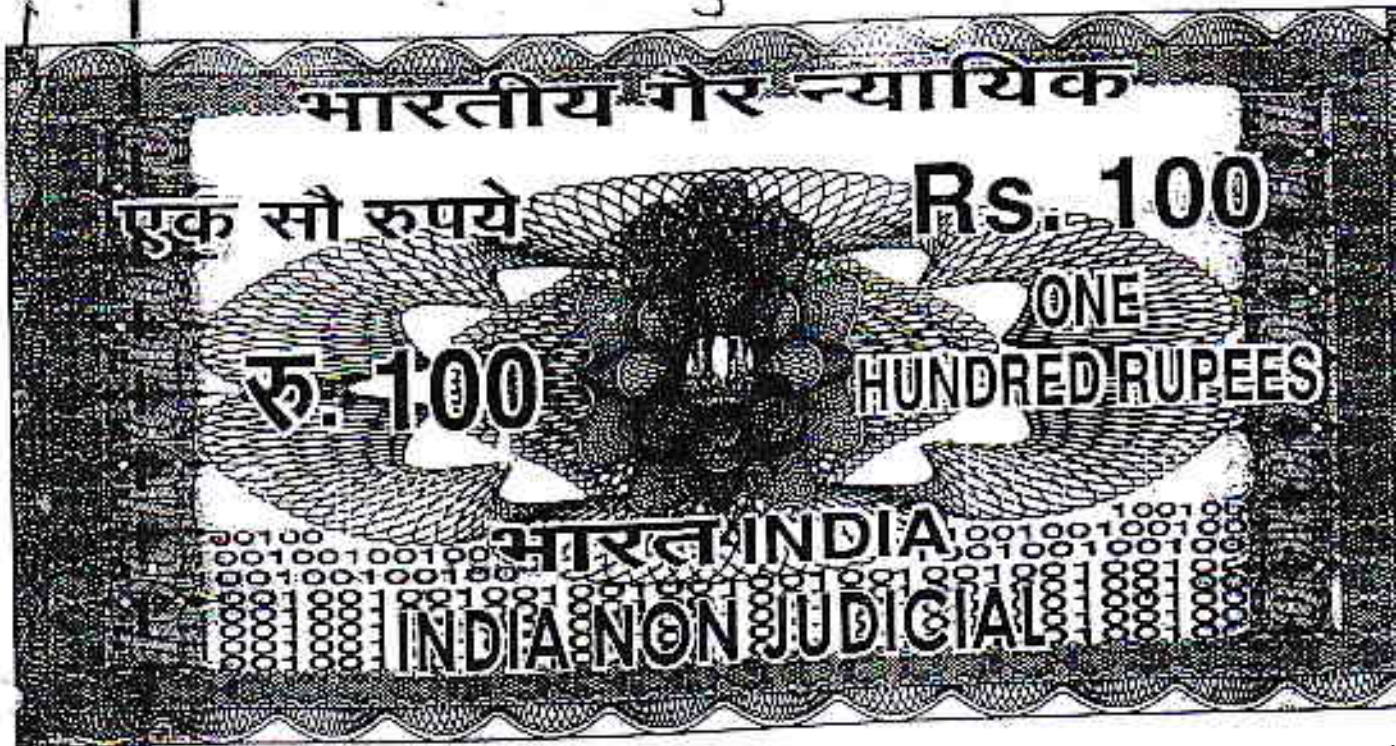
Kale

PRINCIPAL
TEHMI GRANT I.N.E.
RUBY HALL CLINIC, PUNE-1

13, Tadiwala Road, Pune - 411 001. Tel: +91-20-6645 5088/69 | Fax: +91-20-2010 4339

Email: tehmigrant@hotmail.com | Website: <http://www.tgine.com>

Hospital: Ruby Hall Clinic. (NABH Accredited Hospital) 40, Sassoon Road, Pune - 411 001. Tel. +91-20-2616 3391 (8 Lines)



महाराष्ट्र MAHARASHTRA

2019

UW 766024

1 APR 2019



25 MAR 2019

प्रथम सिंदांक लिपि
कोषागार पुणे कनि

..... दि. पु. पु. २०१९

..... प्रकृत

दस्त नोंदणी करणार आहेत का ? होय/नाही.

मिळकतीचे वर्ग

मुद्रांक विकत घेणाऱ्याचे नाव

पत्ता

दुसऱ्या पक्षकाराचे नाव

हस्त व्यवस्थेचे नांव व पत्ता

[Signature]

[Signature]
SANGIETAA LOKANDE

मुद्रांक विकत घेणाऱ्याची संपूर्ण मालिका हॉटेल कम्युनिटी, बॅंगलोर रोड, पुणे - ४

न्याय कारणासाठी द्यावी मुद्रांक घ्यावी केला, ह्यांनी त्याच कारणासाठी मुद्रांक

लगेच देण्यात येईल, भाडेभावात वापरणे बंधितकारक आहे

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) is made on the 1st day of April 2019

[Signature]
PRINCIPAL
TEHMI GRANT LINE
RUBY HALL CLANS, PUNE-1

BETWEEN

Zilla Parishad, Pune

Having its Office at Zilla Parishad, Pune, hereinafter referred to as the Zilla Parishad (Which expression shall repugnant to the context and meaning thereof, be deemed to include its office executors, administrators and assignee) and herein represented by its authorized Coordinator, District Health Officer.

.... Party of the **FIRST PART**

AND

Tehmi Grant Institute of Nursing Education

Having its registered office at 11 - Tadiwala Road, Opp Hotel Meru, Pune-411001, hereinafter referred to as "TGINE" (Which expression shall repugnant to the context and meaning thereof, be deemed to include its office executors, administrators and assignee) and here in represented by its authorized Principal, Prof. Mrs. Shubhada Kale.

.... Party of the **SECOND PART**

WHEREAS, Primary Health Centre is a Government body of Government of Maharashtra and its Managing body having authority to execute contracts on behalf of the Primary Health Centre.

AND WHEREAS TGINE established in the year 2004 duly recognized by Indian Nursing Council, Maharashtra Nursing Council and affiliated to Maharashtra University of Health Sciences, Nashik and approved by Government of Maharashtra vide G.R No. - NUR-304/107/PK-34/04/EDU-I DATED 24th August 2004 and Principal Tehmi Grant Institute of Nursing Education has been authorized to enter into agreement for affording practical training of student nurses of the course (Basic B.Sc, M.Sc Nursing) at Primary Health Centre under Zilla Parishad.

AND WHEREAS the Primary Health Centre has granted permission for the month of January each year.

During the term of this MOU allowing TGINE to use the facilities of Primary Health Centre for practical training for its student nurses

Now therefore following terms and conditions have been prescribed and those have been accepted by both the parties.

1. TGINE to make use of all the facilities available at Primary Health Centre to impart practical training to its Basic B.Sc Nursing and M.Sc Nursing Students.

2. BSc Nursing - 54
M.Sc Nursing -

3. All the above number of students shall obtain practical training in the subject of Community Health in Primary Health Centre during all days of the month of January each year except on Sunday and public holidays.

4. The training shall continue for Eight hours every day except as referred here in above.

5. The transport facility for the student nurses of TGINE shall be arranged by TGINE on all days per all students to attend training at Primary Health Centre.

6. The Primary Health Centre will not pay or be responsible for payment of any remuneration to TGINE student nurses on this account.

7. The TGINE will not claim any type of fund or grant from Primary Health Centre for this educational activity.

8. In consideration for the facility of practical training made available, TGINE will pay the remuneration/consideration to the Primary Health Centre.

9. Remuneration will be paid as per the rate prescribed by Zilla Parishad i.e. Rs 50/- (Rupees Fifty only) per month per student sent for training by the said Zilla Parishad.

10. The clinical instructors / clinical tutor will do the day to day supervision during posting in the concerned Institute.

11. TGINE will ensure that the students will maintain discipline during the tenure of training in the Institute.

12. TGINE has to ensure that the student nurses attend the Institute regularly and in time for the duty hours.

13. This agreement is valid for a period of Five Years from date of this agreement and renewable every year for five consecutive years.

14. TGINE will be responsible for all the claims correspondence or expenses payable to consequences of any accident or injuries sustained by any student in the Institute.

15. It is agreed by & between the parties that in case of any dispute arises in terms of the agreement either part has the authority to terminate this agreement with two month prior notice.

16. It is assumed that the parties have signed this agreement on the day and year mentioned above.

a. Name:
Designation: District Health Officer,
Zilla parishad
Pune,
Sign

b. Name: Prof. Mrs. Shubhada Kale
Designation: Principal
Address: Tehmi Grant Institute of Nursing Education,
13 Tadiwala road,
Opp. Hotel Meru Pune, 411001
Sign



In the presence of

1. Signature: Rakha
Name: MS. Rekha.R
Address: TGINE Pune

2. Signature: Ms. Leena S
Name: Ms. Leena.S
Address: TGINE Pune