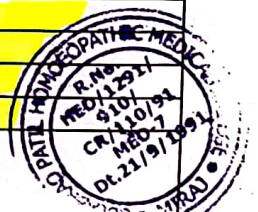


FEES REGULATING AUTHORITY - 2024-25, Mumbai

305, Govt. Polytechnic Building, Ali Yawar Jung Marg, Bandra (E), Mumbai - 400 051 (M.S.), INDIA

APPROVED FORMAT FOR COMPUTATION OF FEES FOR YEAR 2024-25 AND STREAM BHMS

1	Name of the College/Institute: Gulabrao Patil Homoeopathic Medical College, Miraj, Sangli Code: BHMS0012 Stream: BHMS Year: 2024-25 Location: 795, Gulabrao Patil Educational Campus, Near Govt. Milk Dairy, Miraj Dist- Sangli																																																																																																					
2	a)	1. Information related to Fee For AY 2023-24 2. Information related to Fee For AY 2022-23 3. Information related to Fee For AY 2021-22 4. Information related to Fee For AY 2020-21 5. Information related to Fee For AY 2019-20	Approved 86500 No Upward Revision 90000 Approved 90000 Approved 90000 Approved 79000																																																																																																			
	b) Fee Proposed by College for AY 2024-25	Proposal Status Y Proposed fee for 2024-25 117000 Rs.																																																																																																				
	C) Hospital Status:	Own																																																																																																				
	D) If owned, date of Hospital Establishment :	06/03/2006																																																																																																				
4	3.	Whether undertaking on stamp paper submitted reg. refund?	Y																																																																																																			
	4	Computation of final tuition fee and development fee:	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Expenditure incurred (in Rs.)</th> </tr> <tr> <th>Total</th> <th>Per Student (divided by 4.8)</th> </tr> </thead> <tbody> <tr> <td>4.1.1</td> <td>Salary expenditure for 2022-23 to approved teaching /non teaching staff. as per as per MCI/DCI/MUHS/Ayurved/Homeopathic/Nursing Council/ all other recognized council/ No. of Professors/Associates Professors/Assistant Professors as per the norms required and actual No/ GOVERNMENT norms.</td> <td>27056326</td> <td>60125</td> </tr> <tr> <td>4.1.2</td> <td>Salary/Honorarium paid to visiting Faculties and their numbers</td> <td>60000</td> <td>133</td> </tr> <tr> <td>4.1.3</td> <td>Stipend paid to the students</td> <td>0</td> <td>0</td> </tr> <tr> <td>4.1.4</td> <td>Total Salary Expenditure (4.1.1+4.1.2+4.1.3)</td> <td>27116326</td> <td>60259</td> </tr> <tr> <td>4.2</td> <td>Non salary revenue expenditure (Rent, Interest on loan, Penalties if any legal charges and unrelated expenditure to be excluded) for 2022-23</td> <td>14264678</td> <td>31699</td> </tr> <tr> <td>4.2.1</td> <td>a) Less income</td> <td>731015</td> <td>1624</td> </tr> <tr> <td></td> <td>b) Hostel expenses,</td> <td>0</td> <td></td> </tr> <tr> <td>4.2.2</td> <td>Total (4.1.4 + 4.2) - (4.2.1)</td> <td>40649989</td> <td>90333</td> </tr> <tr> <td>4.2.2.1</td> <td>Actual Bank Interest on Working Capital Loan Amount Claimed (0) or Total interest allowable limited to 2% of 4.2.2 (813000) whichever is lower</td> <td>0</td> <td></td> </tr> <tr> <td>4.2.2.2</td> <td>Total 4.2.2 + 4.2.2.1</td> <td>40649989</td> <td>90333</td> </tr> <tr> <td>4.2.3</td> <td>10% of 4.2.2.2 for increase in cost for 2022-23</td> <td>4064999</td> <td>9033</td> </tr> <tr> <td>4.2.3.1</td> <td>Equalization Factor - Duration of Course 4.5 Years - 5.48% of 4.2.2</td> <td>2227619</td> <td>4950</td> </tr> <tr> <td>4.2.4</td> <td>Hospital deficit</td> <td>0</td> <td></td> </tr> <tr> <td>4.3</td> <td>Usage charge for building Rs. 7000 per student for total sanctioned intake 1. 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	Research Publications in international journals & Patents - 0.00 per faculty per year - Add = 0 Placement of students - 0% - Add = 0	
4.10.3	Total Development Fee (4.10 + 4.10.2-(11315)) or Limited 15% of Tuition Fee(4.9.1-(16972)) whichever is less.	11315
4.10.4	Total Fee (4.9.1 + 4.10.3)	124462

Date _____
Place _____



[Signature]
Principal

Signature and Seal of person authorized in terms of Section 2 (l) of the Gulabrao Patil Homoeopathic

FOR OFFICE USE ONLY Medical College, Mira;

Date _____

Disallowance:-

- 1)
- 2)
- 3)
- 4)

Prepared by: _____

Checked by (Chartered Accountant) _____