To,  
The Principal Secretary (Hr. & Tech Education)  
Govt. of Karnataka, K. G.S., 6th Floor,  
M.S. Building, R. N. 645,Dr. B. R. Ambedkar Road,  
Bangalore-560001  

Sub: Extension of approval for the academic year 2017-18  

Ref: Application of the Institution for Extension of approval for the academic year 2017-18  

Sir/Madam,  

In terms of the provisions under the All India Council for Technical Education (Grant of Approvals for Technical Institutions) Regulations 2016 notified by the Council vide notification number F.No.AB/AICTE/REG/2016 dated 30/11/2016 and norms, standards, procedures and conditions prescribed by the Council from time to time, I am directed to convey the approval to  

**Permanent Id** 1-5931783  
**Application Id** 1-3327067459  

**Name of the Institute** INSTITUTE OF HEALTH MANAGEMENT RESEARCH, BANGALORE  
**Institute Address** SY NO. 319, HULIMANGALA, ELECTRONIC CITY-FIRST PHASE BANGALORE-560105, BANGALORE, BANGALORE RURAL, Karnataka, 560105  

**Name of the Society/Trust** INDIAN INSTITUTE OF HEALTH MANAGEMENT RESEARCH  
**Society/Trust Address** #1, PRABHU DAYAL MARG, SANGANER AIRPORT,JAIPUR,JAIPUR,Rajasthan,302029  

**Institute Type** Unaided - Private  
**Region** South-West  

<table>
<thead>
<tr>
<th>Opted for change from Women to Co-ed and Vice versa</th>
<th>Opted for change of name</th>
<th>Opted for change of site</th>
<th>Conversion (degree to diploma or vice-a-versa) Approved</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

| Change from Women to Co-ed approved and Vice versa | Change of name Approved | Change of site Approved |  
|-----------------------------------------------------|--------------------------|--------------------------|----------------------------------------------------------|  
| Not Applicable                                      | Approved                 | Approved                 | Not Applicable                                           |  

<table>
<thead>
<tr>
<th>Opted for Conversion from degree to diploma</th>
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<th>Conversion (degree to diploma or vice-a-versa) Approved</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

**To conduct following courses with the intake indicated below for the academic year 2017-18**  

<table>
<thead>
<tr>
<th>Program</th>
<th>Shift</th>
<th>Level</th>
<th>Course</th>
<th>Full/Part Time</th>
<th>Affiliating Body</th>
<th>Intake Approved for 2016-17</th>
<th>Intake Approved for 2017-18</th>
<th>NRI Approval status</th>
<th>PIO / PN / Gulf quota / OCI Approval status</th>
<th>Foreign Collaboration/Twinning Program Approval status</th>
</tr>
</thead>
<tbody>
<tr>
<td>MANAGEMEN T</td>
<td>1st</td>
<td>POST</td>
<td>POST GRADUATE DIPLOMA IN</td>
<td>FULL TIME</td>
<td>None</td>
<td>60</td>
<td>60</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>
The above mentioned approval is subject to the condition that
INSTITUTE OF HEALTH MANAGEMENT RESEARCH, BANGALORE
shall follow and adhere to the Regulations, guidelines and directions issued by AICTE from time to time and the undertaking / affidavit given by the institution along with the application submitted by the institution on portal.

Course(s) Applied for Closure by the Institute for the AY 2017-18:

<table>
<thead>
<tr>
<th>Application Id: 1-3327067459</th>
<th>Name of the Course</th>
<th>Full/Part Time</th>
<th>Affiliating Body</th>
<th>Course Closure Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>MANAGE MENT</td>
<td>POST GRADUATE DIPLOMA IN MANAGEMENT</td>
<td>FULL TIME</td>
<td>None</td>
<td>Pending $</td>
</tr>
</tbody>
</table>

$ due to non submission of NOC’s from University / Board and / or State Government

In case of any differences in content in this Computer generated Extension of Approval Letter, the content/information as approved by the Executive Council / General Council as available on the record of AICTE shall be final and binding.

Strict compliance of Anti-Ragging Regulation:- Approval is subject to strict compliance of provisions made in AICTE Regulation notified vide F. No. 37-3/Legal/AICTE/2009 dated July 1, 2009 for Prevention and Prohibition of Ragging in Technical Institutions. In case Institution fails to take adequate steps to Prevent Ragging or fails to act in accordance with AICTE Regulation or fails to punish perpetrators or incidents of Ragging, it will be liable to take any action as defined under clause 9(4) of the said Regulation.

Note: Validity of the course details may be verified at www.aicte-india.org

Prof. A.P Mittal
Member Secretary, AICTE

Copy to:

1. The Regional Officer,
   All India Council for Technical Education
   Health Centre Building
   Bangalore University Campus
   Bangalore - 560 009, Karnataka

2. The Director Of Technical Education**,
   Karnataka

3. The Registrar**,
   None

4. The Principal / Director,
INSTITUTE OF HEALTH MANAGEMENT RESEARCH, BANGALORE
SY NO. 319,
HULIMANGALA,
eLECTRONIC CITY-FIRST PHASE
BANGALORE-560105,
BANGALORE,BANGALORE RURAL,
Karnataka,560105

5. The Secretary / Chairman,
INDIAN INSTITUTE OF HEALTH MANAGEMENT RESEARCH
#1, PRABHU DAYAL MARG, SANGANER AIRPORT,,
JAIPUR,JAIPUR,
Rajasthan,302029

6. Guard File(AICTE)

Note: ** - Approval letter copy will not be communicated through post/email. However, provision is made in the portal for downloading Approval letter through Authorized login credentials allotted to concerned DTE/Registrar.