

MOU - File.

**MEMORANDUM OF UNDERSTANDING BETWEEN
(2019-2024)**



BLDE (Deemed to be University)
Vijayapur

District Hospital
Vijayapur

BLDE
(Deemed to be University)
The Constituent College
Shri B. M. Patil Medical College, Hospital & Research Centre,
Vijayapura, Karnataka, India

With

DISTRICT HOSPITAL VIJAYAPUR

Date: 4th October, 2019

BLDE (Deemed to be University), Vijayapura, Karnataka State, INDIA has affiliated Shri BM Patil Medical College Hospital and Research Centre which has department of pediatrics with tertiary level Pediatric and Neonatal Intensive Care Units (PICU and NICU) and District Hospital Vijayapur, Karnataka State, INDIA agree to enter into this Memorandum of Understanding based on “A foundation of trust for mutual benefit, development and goodwill.”

A. Background:

- i) The parties seek to demonstrate by signing this memorandum their commitment to co-operation in terms of common interest through the development of collaboration between District Hospital Vijayapur and Department of Pediatrics BLDE (Deemed to be University) the Shri BM Patil Medical College Hospital and Research Centre Vijayapur.
- ii) The parties recognized the mutual benefit each will gain from working together and the value this will add to the promotion of not only medical sciences research but also overall impact on health sectors.

B. Scope of co-operation and activities:

District Hospital Vijayapur, BLDE (Deemed to be University) department of pediatrics Shri BM Patil Medical College Hospital and Research Centre Vijayapur desire to explore & promote some or all of the following activities based on the respective academic and research needs, which may be formally developed through a separate legally binding agreement between the parties:

- i) To create a strong academic environment.
- ii) To improve the knowledge and skills of all healthcare providers.
- iii) Organization of joint research programs.

C. Management of Co-operation:

- i) The implementation of exchange based on the MoU shall be separately negotiated and determined by both the parties.
- ii) Nothing shall diminish the full autonomy of either party, nor will any constraint or financial obligations be imposed by either, upon the other in carrying out MoU.

- iii) The parties acknowledge that this MoU doesn't involve the transfer of money between the parties. The parties further acknowledge that, no sponsor funding exists regarding activity contemplated by this MoU.
- iv) The Coordinator from University to be nominated for all the activities.
- v) Any notice require to given under this agreement by either party will be in writing and sent to the other party by either hand delivery or certified mail return receipt requested as follows:
- vi) If to District Hospital : District Surgeon, District Hospital

Athani Road Vijayapur Karnataka India

Telephone: + 91 8352-270009, Fax: +91 8352-270009

Email: dsbijapur@gmail.com

- vii) If to BLDE (Deemed to be University):

Dean ,Faculty of Medicine, BLDE (DU),

Smt. Bangaramma Sajjan Campus,

VIJAYAPURA-586103, Karnataka, INDIA

Telephone: + 91 8352-262770, Fax: +91 8352-263303.

Email: registrar@bldeuniversity.ac.in

Website: www.bldeuniversity.ac.in

D. Terms & Termination:

- i) The MoU will be valid for 5 years from effective date. Thereafter, renewal of the MoU will be subject to the written agreement of both parties.
- ii) The MoU is subject to revision by mutual written agreement. It is also understood that, either party may terminate the MoU for any reason and that any time upon thirty (30) days prior written notice to the other party; although such action will only be taken after mutual consultation in order to avoid any possible inconvenience to all parties.
- iii) The MoU is effective when representatives of both parties have signed and dated the document ("Effective Date").

AUTHORISE TO SIGN FOR AND ON BEHALF OF DISTRICT HOSPITAL VIJAYAPUR

Signature: 
**District Surgeon
Vijayapur.**

Date: .....

Name in Capitals: **DR. SHARANAPPA KATTI**
Position in Organization **DISTRICT SURGEON, DISTRICT HOSPITAL
ATHANI ROAD VIJAYAPUR
KARNATAKA**

AUTHORISE TO SIGN FOR AND ON BEHALF OF BLDE (DEEMED TO BE UNIVERSITY)

Signature: .....



Date:.....

Name in Capitals: **DR. ARAVIND .V. PATIL**
Position in Organization: **DEAN FACULTY OF MEDICINE, BLDE
(DEEMED TO BE UNIVERSITY) VIJAYAPUR
KARNATAKA**
PRINCIPAL
BLDE (Deemed to be University)
Shri B. M. Patil Medical College
Hospital & Research Centre,
VIJAYAPUR- 586103

DISTRICT HOSPITAL VIJAYAPUR

Date: 11 October, 2019