

MEMORANDUM OF UNDERSTANDING

Between

St. Xavier's College, Mahuadanr

And

St. Ann's Hospital, Malkapuram

This Memorandum of Understanding (hereinafter referred to as "MoU") is executed between **St. Xavier's College, Mahuadanr** (hereinafter referred to as "SXCM"), a College whose address is at Mahuadanr, Latehar-822119, Jharkhand and shall include its lawful representatives and permitted assigns; and **St. Ann's Jubilee Memorial Hospital Malkapuram** a Private Hospital whose address is Vishakhapatnam, Andhra Pradesh and shall include its lawful representatives and permitted assigns; (hereinafter referred to as singularly as "**The Party**" and collectively as "**The Parties**").


WHEREAS

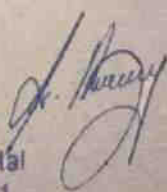
- A. **SXCM** is an established College with a track record of educational excellence and research and with a dynamic programme of collaborative arrangements with many institutions of Colleges, Schools, Hospitals & Industries.
- B. **St. Ann's Jubilee Memorial Hospital** is one of the best Hospitals in Visakhapatnam. NABH Entry Level Accredited. It Provides 24 Hours Emergency Services. It has a supportive and friendly staff, and the latest medical know-how to help patients. It meets the medical needs of the Local people with timely care and renders service to different nearby villages.
- C. The Parties are desirous of entering this MoU to declare their respective intentions and to establish a basis of cooperation and collaboration between the Parties upon the terms as contained herein.

NOW THIS MOU WITNESSES AS FOLLOWS:

OBJECTIVE

The Parties, subject to the terms of this MoU from time to time in force in each party's place, shall


Principal
St. Xavier's College
Mahuadanr


ADMINISTRATOR
St. Ann's J.M. Hospital
Malkapuram, VSP-11

endeavor to strengthen, promote and develop Faculty Development Programs & Student Development Programs and co-operate between the Parties on the basis of equality and mutual benefit.

AREAS OF COOPERATION

The Parties agree to encourage the following activities, in particular, to promote academic cooperation in the following areas:

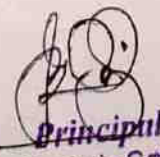
- a) Institutional exchanges between faculty and staff from each partner institution for development Programs;
- b) Exchange of information pertaining to developments
- c) Cooperation in any other areas as agreed to by the Parties from time to time; and
- d) The Parties will mutually promote information and activities of partner institutions within the MoU.

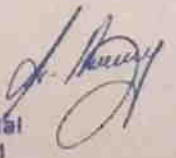
ENTRY INTO EFFECT AND DURATION

- This MoU shall become effective as of the date of signatures of both parties, or if the dates vary, then the date of the later signature.
- This MoU shall remain in effect for a period of five (5) years.
- This MoU may be extended for such further period as may be agreed in writing by both parties.
- If the MoU is not renewed by mutual consent, the MoU shall conclude at the end of the specified period, or after activities in progress have concluded.

REVISION, VARIATION AND AMENDMENT

- Either party may request in writing a revision, variation or amendment of this MoU with an approval of other party.
- Any such revision, variation or amendment agreed to by the Parties shall be in writing and shall form part of this MoU.
- Such revision, variation or amendment shall come into force on such date as may be determined by the Parties.
- Any revision, variation or amendment shall not prejudice the implementation of any project, activity or co-operation arising from or based on this MoU before or up to the date of such revision, variation or amendment.


Principal
St. Xavier's College
Mahuadom


ADMINISTRATOR
St. Ann's J.M. Hospital
Maikapuram, VSP-11

TERMINATION

This MoU may be terminated by either party with a minimum of ninety (90) days written notice to the other party. Activities in progress at the time of termination of this MoU shall be permitted to conclude as planned unless otherwise agreed.

NOTICES

Any communication under this MoU shall be in writing in the English language and delivered by registered mail to the address or sent to the electronic mail address or facsimile number of the institutions as the case may be, shown below or to such other address or electronic, mail address or facsimile number as either Party may have notified the other Party and shall, unless otherwise provided herein, be deemed to be duly given or made when delivered to the recipient at such address or electronic mail address or facsimile number which is duly acknowledged:

IN WITNESS WHEREOF, signed in duplicate on 11th July 2021 in two (2) original texts, both texts being equally authentic.

SIGNED BY

for and on behalf of SXCM



Dr. Fr. M.K. Jose SJ **Principal**
Principal **St. Xavier's College**
Mahuadanr
St. Xavier's College,
Mahuadanr

SIGNED BY

for and on behalf of St. Ann's Hospital

ADMINISTRATOR
St. Ann's J.M. Hospital Sr. Binny
Malkapuram, VSP-11 Administrator

St. Ann's Memorial Hospital
Malkapuram, Vishakhapatnam
Andhra Pradesh

Date: 10th July 2021

Date: 11th July 2021