

ADD INSTITUTE

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* COLLEGE TYPE:	GOVERNMENT/PRIVATE
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* AFFILIATION VALID UPTO:	
* FULL ADDRESS:	
* DISTRICT:-	
* PINCODE:	
* NAME OF THE NODAL OFFICER: (HEAD OF THE INSTITUTE)	
* DEISGNATION OF THE NODAL OFFICER:	
* E-MAIL ADDRESS:	
* CONTACT NO.	

mail to
dirswkmr@gmail.com