SHRI M.P.SHAH GOVERNMENT MEDICAL COLLEGE- JAMNAGAR



# FORM - 2022

Admission To Post-Graduate Degree/Diploma

Quota (2) Univ.Quota (3) AIQ.Quota ()

Paste Recent Passport Size Photograph Self Attested

Surname:-			
Father'S/Husband'S Name:-			
Mother'S Name:-			
Date Of Birth:-			
Category:- (1).OPEN (2).SC (3).ST (4).SEBC (5).PH (6).In M.O. ()			
Eligibility Certi No: Eligibility Certi Date://			
Neet Roll No:Neet State Rank:			
Neet Score Percentile: AIQ.Rank:			
PERMANENT ADDRESS			
PIN:			
City: State: State:			
Mobile No: Father'S Mobile No:			
E-Mail ID:			
(SBI) (BOI) (CBI) , One Bank Account(*please provide personal bank account details only)			
Bank Account No: IFSC Code:			
Branch:			
M.B.B.S.DETAILS			
Name Of University:			
Name Of Medical College:			
Registration Council Name and No.:			
Month & Year Of (1 <sup>st</sup> Year M.B.B.S.) Addmission:			
Date Of Starting Internship:			
> Date OF Completion Of Internship:			

## ALL INDIA P.G. ADMISSION 2022

PROFORMA FOR WILLINGNESS FOR UPGRADATION IN ROUND 2<sup>ND</sup> AND 3<sup>RD</sup>.

I DR. ..... bearing ALL India Rank No.....are WILLING /NOT WILLING for up-gradation in Round 2<sup>nd</sup> and WILLING /NOT WILLING FOR participationin Round 3<sup>rd</sup>.

In case I am allotted any other seat, I will vacate the seat allotted to me at Shri M.P.Shah Govt. Medical College Jamnagar.

As per Govt. of Gujarat letter No.MCG-Bond-Niti-AIQ-I-28100-11 dt.14-9-22 I

am submitting Bond solvency of Rs.10-00 lakh and 30-00 under taking on or before.....

Signature	
(Dr.	)

Dt.

Place :

I hereby certify that all documents and information submitted by me is true and genuine.

If at any point of time the information/certificate is found to be incorrect my Admission would stand cancelled and the institution would in fact appropriate action against me.

.....

)

Signature

(Dr.

Dt. Place :

## SHRI M.P.SHAH GOVERNMENT MEDICAL COLLEGE JAMNAGAR P.G. ADMISSION-50 % ALL INDIA QUOTA LIST OF CERTIFICATE SUBMITTED AT THE TIME OF ADMISSION (AS PER MCC GUIDELINES) (Two copy)

- 1. Admit card issued the NBE,
- 2. Provisional Allotment Letter
- 3. Provisional Eligibilities certificate from the Saurashtra University Rajkot. Submitted at the time of Physical joining at College (Those student pass out other than Saurashtra University)
- 4. Cast Certificate &Non Cremylayer& EWS Certificate. AS PER MCC GUIDELINES
- 5. Mark sheet of First MBBS to Final MBBS
- 6. MBBS Degree certificate.
- 7. Internship completion certificate.
- 8. Permanent/Prov. Registration certificate issued by MCI/State Medical council.
- 9. Attempt certificate
- 10.High School/Birth certificate as proof of Date of Birth.
- 11.Mark sheet of Neet Entrance exam result.
- 12.12<sup>TH</sup> Marksheet
- 13.Identification Proof. & Adharcard.
- 14.PH certificate as per mentioned in AS PER MCC GUIDELINES
- 15.College email ID: <u>deanjamnagar@gmail.com</u>& Contact no.(0288) 2550206
- 16. Fees details : (Tuition and other Fees)

	DEG	REE	DIPLOMA		
	GOVT.FEE	UNI. FEE	GOVT.FEE	UNI. FEE	
BOYS			20000	17660	
GIRLS			20000	5660	
DEPOSITE	84000		630	00	

At the time of Pay above fee/deposit through Separate Check name of **'Dean M. P. Shah Medical College, Jamnagar'.** 

<u>NB: 2<sup>nd</sup> and 4<sup>th</sup>Saturday Uni. Closed and 2<sup>nd</sup> and 4<sup>th</sup> Saturday college office closed</u>. Other Information Pl. Contact No. Mr. Atul Mehta 9429118922.

#### ANNEXURE I FORMAT OF UNDERTAKING BY THE STUDENT

	(Full Name in Block Letters)
	Son/ Daughter of Mr./Mrs./Ms
	(Full Name in Block Letters)
	admitted to the course ofwith Admission
	(Name of Course)
	at
	(Name of College / Institution)
	And the Section Strategies and the
	affiliated to (Name of University)
	have received a copy of the REGULATIONS FOR PREVENTION AND PROHIBITION OF RAGGING IN MEDICAL COLLEGES/INSTITUTIONS, 2021 of the National Medical Commission(NMC).
•	I have carefully read and fully understood the provisions in these Regulations
	I have particularly perused CHAPTER II SECTION 3 and have fully understood what constitute "Ragging"
· · ·	I have also in particular perused Chapter IV and read and understood the Administrative and Pena actions that may be taken against me in case I am found guilty of ragging or abetting ragging actively or passively, or being part of a conspiracy to promote ragging
	I hereby undertake that-
	(i) I will not indulge in any behavior or act that may come under the definition of ragging as may be constituted under Section <b>3</b> of these regulations
	(ii) I will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under Section 3 of these regulations
	(iii) I will not hurt anyone physically or psychologically or cause any other harm.
	I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provision of the NMC Regulations mentioned above and/or as per the law in force
	I also declare that I have never been found to be guilty of ragging or abetting ragging, actively o passively, or being part of a conspiracy to promote ragging and have never been punished in any

passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled / withdrawn .

Signed on this \_\_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_year

#### Signature

Name: Address : Signature of Witness 1 (Name of Witness 1) Signature of Witness 2 (Name of Witness 2)

Tel/ I	Mol	bild	e N	0:
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Address

Address

### FORMAT OF UNDERTAKING BY PARENT / GUARDIAN OF THE CANDIDATE/STUDENT

1.

(Full Name in Block Letters)

(Name of Course)

Father / Mother / Guardian of Mr. / Mrs. / Ms.

(Full Name of Student in Block Letters)

admitted to the course of

\_\_\_\_\_with Admission No.\_

át\_

(Name of College / Institution)

affiliated to

(Name of University)

Hereby declare that I have received a copy of the REGULATIONS FOR PREVENTION AND PROHIBITION OF RAGGING IN MEDICAL COLLEGES/INSTITUTIONS, 2021 of the National Medical Commission(NMC).

- 2. I have carefully read and fully understood the provisions in these Regulations
- 3. I have particularly perused CHAPTER II SECTION 3 and have fully understood what constitutes "Ragging"
- 4. I have also in particular perused Chapter IV and read and understood the Administrative and Penal actions that may be taken against my son/daughter/ward in case he /she is found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging
- 5. I hereby undertake that my son/ daughter/ ward -
  - (iv) Will not indulge in any behaviour or act that may come under the definition of ragging as may be constituted under Section 3 of these regulations
  - (v) Will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under Section 3 of these regulations
  - (vi) Will not hurt anyone physically or psychologically or cause any other harm.
- 6. I hereby agree that if my son/ daughter/ ward is found guilty of any aspect of ragging, he/ she may be punished as per the provisions of the NMC Regulations mentioned above and/or as per the law in force
- 7. I also declare that he/she has never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, his/her admission is liable to be cancelled / withdrawn.

Signed on this day	0	f month of ye	ear
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	Signature
Name:	
Address	:

Signature of Witness 1 ( Name of Witness 1 ) Signature of Witness 2 (Name of Witness 2)