

Name of NEET with year :: NEET-SS- (20 - )

Percentile of NEET ::

Name of Subject ::

SML/Rank No.(state & AIR)::

Marks (out of) ::

Category/Caste/Sub-caste:: **Open / Reserve -**

Caste Validity Cert. No. ::  
Date of Issue(if Applicable)

Caste Validity Done By ::  
(District/Authority)  
(Issuing Authority)

Full Name of Student ::

Full Name of Student in **Marathi** ::

Mother Name ::

Date of Birth ::

Nationality :: **INDIAN** / \_\_\_\_\_

DOMICILE STATE :: \_\_\_\_\_

Address :: \_\_\_\_\_  
\_\_\_\_\_

Mobile No. ::

Aadhar No. ::

E-mail ID ::

1) D. D. No. \_\_\_\_\_ , Dt. / / , Amt. \_\_\_\_\_ , \_\_\_\_\_ Bank

2) D. D. No. \_\_\_\_\_ , Dt. / / , Amt. \_\_\_\_\_ , \_\_\_\_\_ Bank

3) D. D. No. \_\_\_\_\_ , Dt. / / , Amt. \_\_\_\_\_ , \_\_\_\_\_ Bank

4) D. D. No. \_\_\_\_\_ , Dt. / / , Amt. \_\_\_\_\_ , \_\_\_\_\_ Bank

**Govt. Receipt No.** \_\_\_\_\_ , Dt. / / , **for Rs.1500/-**

**PG(SS) - 2024-25.**

**VERIFICATION FORM OF DOCUMENTS FOR ADMISSION TO SUPER SPECIALTY  
COURSE AT GOVT. MEDICAL COLLEGE, NAGPUR.**

SR. NO.	PARTICULARS		STATUS OF CERTIFICATES
1.	Name of Candidate	■ ■	
2	Duration of Course	■ ■	
3.	Category	■ ■	
4.	Certificate Verified :	■ ■	[ YES / NO ]
5.	Nationality / Domicile Cert.	■ ■	
6.	Aadhar Card Xerox		
7.	Attempt Cert.	■ ■	
8.	Degree Passing Cert.(UG and PG)	■ ■	
9.	Internship Completion Cert.	■ ■	
10.	Registration Cert.	■ ■	
11.	Caste Cert.	■ ■	
12.	Caste Validity Cert.	■ ■	
13.	Non Creamy Layer Cert.	■ ■	
14.	Educational Gap Cert.	■ ■	
15.	Migration Cert.	■ ■	
16.	Bond Release Cert.	■ ■	
17.	Affidavit for Service Bond	■ ■	
18.	Medical Fitness Cert.	■ ■	
19.	Transfer / Leaving Cert.	■ ■	
20.	Any Other Cert(s) :	■ ■	
21	Provisional Allotment letter(MCC)		
22	Admit card issued by NBE		
23	Rank letter issued by NBE		
24	Birth cert./HSC Cert. for DOB		

Above certificates have been verified and found correct – Remarks if, any.

Sign: \_\_\_\_\_

Verifying Officer,  
GMC, Nagpur.

Sign: \_\_\_\_\_

Prof. & HOD of: \_\_\_\_\_  
GMC, Nagpur.

**DEAN,  
GOVT. MEDICAL COLLEGE, NAGPUR.**

24 | Birth cert./HSC Cert. for DOB

FORM NO.

RECEIPT NO.

DATE:

Pass  
port  
size  
photo  
graph to  
be  
affix  
here.

NEET(PG)(SS) - 2024 SML / RANK NO. \_\_\_\_\_, NEET Marks : \_\_\_\_\_ (Out of \_\_\_\_\_)

Application Form for admission to Post-graduate (SUPER SPECIALTY)  
Courses at Govt. Medical College, Nagpur.

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**INSTRUCTIONS**

1. Incomplete application form will not be accepted in any circumstances.
2. Two sets of attested photocopies of all certificates to be submitted by the Candidate along with required all original certificates for the admission.
3. As per directives of R.B.I., validity of Demand Draft is only for 03 months hence, Demand Draft as submitted by you to this College for Prescribed Fees, it is sole responsibility of concerned candidate to re-validate the same (*if, validity expires*) in due course of time otherwise, suitable action will be taken against him / her for the same.

Those students are going to Retain the PG(SS) seat in this College then, immediately

he / she has to submit Demand Draft(s) of prescribed fees i.e. **For (SS):** Rs.1,39,300/- & Rs.15900/- *in favor of "THE DEAN, G.M.C., NAGPUR"* along with "**Status Retention**" Form to this Office for the confirmation of his / her PG seat.

4. Admitted Candidate should have visit to Websites of DMER, Mumbai [www.dmer.org.com](http://www.dmer.org.com) and MUHS, Nashik - [www.muhs.ac.in](http://www.muhs.ac.in) time-to-time for new updating, new circulars, notifications etc.
5. Concerned students are hereby directed / instructed to submit his / her any type of application or representation through proper channel i.e. through its; Prof. & HOD of respective dept., application without proper channel will not be entertained.
6. Applicants must specify if any, of his / her original certificate is Bonafide Certificate or DUPLICATE certificate issued by the Competent Authority.

7. Candidate desires to cancel his / her admission after the cutoff date of admission process or admission cancelled due any other reason like; any lapses / abscond / breach of Residency Rules; he / she will have to pay penalty as per rules prescribed in Information NEET-PG Brochure vide Rule No. 21.1 and Rule No. 21.2, 21.3 , 21.4 & 21.5 respectively.
8. All Concerned PG(SS) Students have to submit their required all original certificate(s) for the completion of Eligibility to be done by the MUHS, Nashik within **03** (three) months from the date of joining of the said PG(SS) course. *What so ever reason if, any CERTIFICATE remains for submission then, it will be the sole responsibility of Candidate to complete all the formalities in due time-limit so that his / her eligibility could be done by MUHS, Nashik [Like ; penalty charged for eligibility purpose by MUHS, Nashik for delay in submission of any original certificate(s) / document(s).]*
9. To avoid penalty of MUHS, Nashik, Enrollment / Eligibility Form with prescribed fee of MUHS has to submit by the concerned candidate, admitted for respective P.G.(SS) Course to this Office within **10 days** after the cut-off date of University admission (*Form is available with Students Consumer Co-operative Stores, G.M.C., Nagpur*).
10. - All post-graduate (SS) students should have to complete their course without any absentee in their respective dept(s) during his / her academic session. Due to shortage of course duration / period (prescribed term) i.e. needs minimum attendance of Theory / Practical 80% and above if, any P.G. (SS ) Student detain from the MUHS exam (Summer / Winter) then, he / she will be fully responsible for the loss of academic term and further consequences arises, if any.
11. Candidate should have to submit his / her Log-book and Post Residency Completion Certificate of Concerned HOD along with MUHS, Nashik Examination Form.
12. Applicant is required to pursue progress of Registration / Eligibility process by diligently observing notifications issued by the Dean as displayed on notice board time-to-time. No individual correspondence will be made for the same.
14. **EVERY ADMITTED CANDIDATE MUST SUBMIT A PEN DRIVE CONTAINING PDF OF ALL REQUIRED DOCUMENTS UNDER 400 KB AND EVERY CERTIFICATE SHOULD BE SCANNED SAPARATELY AND NAMED.**

**" I have read all above instructions carefully and is abide to complete all formalities for the Eligibility of my admission to this course and if, I fail to do the same within time then, I will be held fully responsible for further consequences arises, if any."**

Nagpur.

Date: / /2025.

Signature : \_\_\_\_\_

Name of Student :

Address, Mobile & Ph. No. and E-mail ID:

**INFORMATION TO BE FILLED BY THE CANDIDATE IN BLOCK LETTERS.**

1. a) Name in full :

\_\_\_\_\_

[Surname]

[Name]

[Middle-name]

b) Sex : Male / Female.

c) Date of Birth : \_\_\_\_\_ [In-words  
\_\_\_\_\_]

d) Caste \_\_\_\_\_ Category : \_\_\_\_\_ [SC / ST / VJ / NT / NT-2 / NT-3 / OBC /  
OPEN ] \* (Proof necessary if applicant want to be considered under  
reserved class)

2. Name and address of lawful guardian :

\_\_\_\_\_

\_\_\_\_\_

3. Name & Current Address of Local guardian for: with Telephone

No. \_\_\_\_\_

\_\_\_\_\_

4. Resident Telephone with Code No. \_\_\_\_\_

5. Mobile Nos.: Candidate \_\_\_\_\_ , Parents

\_\_\_\_\_

6. E-mail Address : Candidate \_\_\_\_\_ ,

Parents \_\_\_\_\_

7. Occupation of Parents : \_\_\_\_\_

& Post Held : \_\_\_\_\_

8. Annual Income of Parents : \_\_\_\_\_

**9. OTHER INFORMATION :**

SR.NO.	INFORMATION TO BE FILLED	FURNISH DETAILS
a.	Date of admission to 1 <sup>st</sup> MBBS Course	
b.	Whether you have been admitted to MBBS course through All India Entrance Examination or as Govt. of India Nominee or nominee on seat Border are of reciprocal basis. If yes, furnish details	
c.	Name of Medical College from which graduated.	
d.	Name of the University from which graduated.	
e.	Registration Number with NMC/MCI/ Maharashtra Medical Council / Relevant State Medical Council.	
f.	Have you obtain any Post-graduate qualification. If yes, give details.	
g.	State if you are Registered now for any Post-graduate course in any Medical College. If any, give details.	
h.	State if you are employed. If yes, state the Name of Employer and the post held <b>OR</b> State whether you have completed Govt. Service as per rules. If yes, give the details.	
i.	Whether you have cancelled admission to any post-graduate course or your admission has been cancelled by the Dean / University. If yes, give details.	

**DETAILS OF M.B.B.S. EXAMINATION :**

Subject	Month & Year of Passing	Subject Marks	Attempt	Grand Total
I - MBBS				
II - MBBS				
III - MBBS (I)				
III - MBBS (II)				

a. Date of starting and completion of Internship \_\_\_\_\_

**Contd.03/....**

I, hereby declare that, the information furnished above by me is true.

I, hereby agree if, admitted to be confirmed to the Residency Rules and Regulations in force from time-to-time. I will do nothing either inside or outside the college that will interfere with these. I have carefully gone through all the rules and give an undertaking that; I shall abide to the decisions of the Dean / Director. I understand that, I am at risk of getting deregistered if, I do not diligently pursue my post-graduate study to the satisfaction of my teachers and the Institution.

I will not apply or pursue any other Course or any type of Service during the period of this course without prior permission of Dean / Director.

- I will not participate in any strike as per Residency Rules.

Signature: \_\_\_\_\_

Name of Applicant:  
Correspondence Address:  
with Phone (Res.)/ Mobile  
and E-mail.

**Note:** Applicants are requested to note that; they must fill relevant information in every column or Para given above. No column should be left unfilled or filled by graphics like (\_\_\_\_\_) etc. otherwise; it will amount to suppression of facts and would eligible for disciplinary action including rejection of application form.

## U N D E R T A K I N G.

I the Undersigned \_\_\_\_\_

R/o (Permanent / Address for Correspondence)

\_\_\_\_\_

admitted for Post graduate(SS) course in the subject of \_\_\_\_\_ through ( 1<sup>st</sup> / 2<sup>nd</sup> & 3<sup>rd</sup> or Final ) \_\_\_\_\_ round through NEET-PG at Govt. Medical College, Nagpur, do hereby take oath as follows ;

1 That, If I got admission in another Medical College, through Common Entrance Examination of Other-state or through AIQPG, I will take necessary prior permission to leave this college within a stipulated period as decided by the Govt. of Maharashtra for the cancellation of admission and I will follow the rules & regulations laid down by the Govt. of Maharashtra for the same.

2. That, I will be vigilant about the cut-off date declared by the Govt. of Maharashtra as per the directives of Hon'ble Supreme Court of India as well as by the Maharashtra University of Health Sciences, Nashik for the Post-graduate admissions time to time.

3. If, I want to cancel my present admission of this institution, I will cancel it before cut-off date declared by MUHS, Nashik and Govt. of Maharashtra and in any case I will not cancel my admission in such a way that, my seat will go lapse in any way and If I do so, I will be liable for penalty as per rules and regulations laid down by govt. of Maharashtra and will pay full requisite fees i.e. Tuition as well as College fees with the penalty towards the cancellation of respective course (Degree / Diploma) from your College.

Signature \_\_\_\_\_

Name & Address with

Resident Phone Nos. &

Mobile No.



## **SERVICE BOND.**

**Date:**

**[AFFIDAVIT TO BE EXECUTED ON RS.100/- STAMP PAPER]**

I, \_\_\_\_\_ (Name)  
Admitted to \_\_\_\_\_ Post-graduate Super Specialty  
Course at Government Medical College in the year **2024-25** do solemnly  
affirm and admit that, I shall be Serving the Government of Maharashtra or  
Local Self Government or Defense Services for a period of **TWO** year, failing  
which, I will pay to Government of Maharashtra a sum of Rs.2,00,00,000/-  
(In words Rs. Two Crore only) for the default.

Signature \_\_\_\_\_

Name & Address with

Resident Phone Nos. &

Mobile No.

**IMP NOTE**

FOR **PG (SS)** STUDENTS

ALL DOCUMENTS SHOULD BE SCANNED  
AND TITLED AS PER THEIR NAME  
SEPEARATELY AND PROVIDE THEM IN  
PEN DRIVE IN PDF FORMAT DURING  
ADMISSION.

**(EACH DOCUMENT UNDER 400 KB )**