

INSTRUCTION TO CANDIDATES

- 1) All the candidates must remain present for the counseling on the date and time specified as notified with requisite documents. Only one parent/guardian will be permitted with the candidate in the counseling hall.
- 2) The candidate must submit following Original Certificates and Demand Draft of fees and one set of self attested photocopies.
 - (i) AIPMT-2016/NEET- I/NEET-II 2016 Hall Ticket
 - (ii) AIPMT-2016/NEET-I/NEET-II 2016 Statement of Marks
 - (iii) Nationality Certificate / Valid Passport / Domicile Certificate
 - (iv) Certificate of Birth / Age (S.S.C. Passing Certificate / Valid Passport
 - (v) S.S.C. / Equivalent Statement of Marks and Certificate
 - (vi) H.S.C. / Equivalent Statement of Marks and Certificate
 - (vii) Bonafide and Character Certificate from the Head of the Institution last attended
 - (viii) Gap Certificate (if passed 10+2 in or before 2014)
 - (ix) Medical Fitness Certificate from a Registered Medical Practitioner
 - (x) Migration Certificate
 - (xi) Four passport size color photographs
 - (xii) Leaving / Transfer Certificate
 - (xiii) Photo Identity Proof (School identity card / driving license /Aadhaar Card / Voter ID etc.)
 - (xiv) Undertaking / Declaration (duly Notorized) as per attached format ('A' & 'B')
 - (xv) Authority Letter (if applicable) as per the attached format
 - (xvi) Caste Certificate & Caste Validity Certificate (by candidates belonging to respective category)
- 3) **Demand Draft** (from Nationalized/Scheduled Bank Only) of Tuition Fee in favor of '**MGM Institute of Health Sciences**' payable at Mumbai of **Rs. 10,25,000/- (Rupees Ten Lakhs Twenty Five Thousand only)** immediately after the counseling, if selected.
- 4) The Candidates need to pay the full amount of Tuition fees at the time of admission, failing which the admission offered to him/her will be treated as cancelled, and no claim of admission will be entertained later. The request for extension of time limit for payment or to accept partial payment will not be entertained under any circumstances.
- 5) The admitted candidate should report to Dean of respective Medical College on the same day to fulfill college level formalities like joining report, payment of Hostel/Mess/Library fees etc. Failing which their admission will be treated as cancelled and they will have to pay full fee of the entire course of 4 ½ years.

- 6) Candidates who are eligible and called for counseling for MBBS admission should satisfy the eligibility requirement as per the NEET and the minimum eligibility requirements as prescribed by MCI regulations for admission. **All admissions will be provisional and subject to verification of all original documents issued by competent authorities.**
- 7) The number of candidates included in the merit and also those called for the counseling will be more than the total number of the seats available. This is to take care of any dropouts at the counseling stage. Mere inclusion in the merit and call for counseling does not guarantee admission to a course.
- 8) **Refund of Fees:** No Refund / No cancellation is permitted.
- 9) Any false / fake information will lead to disqualification of the students candidature & concerned student / parent will be liable for suitable legal action.



Registrar

Prof. Z. G. Badade
Registrar,
MGM Institute of Health Sciences,
Kamøthe, Navi Mumbai-401209,

Undertaking A

(TO BE TYPED ON NON JUDICIAL STAMP PAPER OF RUPEES ONE HUNDRED
& SUBMITTED TO MGMIHS AFTER DULY NOTORIZED)

AFFIDAVIT

I, _____ Age: _____ years
daughter of / son of _____
do hereby affirm and state as under :-

1. I have submitted the following original documents to the MGM Institute of Health Sciences (MGMIHS) Navi Mumbai for seeking admission to the _____
 - i. AIPMT-2016/NEET- I/NEET-II 2016 Hall Ticket
 - ii. AIPMT-2016/NEET-I/NEET-II 2016 Statement of Marks
 - iii. Nationality Certificate / Valid Passport / Domicile Certificate
 - iv. Certificate of Birth / Age (S.S.C. Passing Certificate / Valid Passport
 - v. S.S.C. / Equivalent Statement of Marks and Certificate
 - vi. H.S.C. / Equivalent Statement of Marks and Certificate
 - vii. Bonafide and Character Certificate from the Head of the Institution last attended
 - viii. Gap Certificate (if passed 10+2 in or before 2014)
 - ix. Medical Fitness Certificate from a Registered Medical Practitioner
 - x. Migration Certificate
 - xi. Four recent passport size color photographs
 - xii. Leaving / Transfer Certificate
 - xiii. Photo Identity Proof (School identity card / driving license / Aadhaar Card / Voter ID etc.)
 - xiv. Undertaking / Declaration (duly Notorized) as per attached format ('A' & 'B')
 - xv. Authority Letter (if applicable) as per the attached format
 - xvi. Caste Certificate & Caste Validity Certificate (by candidate belonging to all backward class)

2. I have also submitted :

- (i) Two sets of self attested photocopies of each of the documents,
- (ii) Certified true copy from Gazetted Officer of Passport / Photo ID bearing No. _____ dated _____ issued by _____
: _____

3. I further solemnly affirm and state that:

- (i) I am very well aware that I have been given admission to the _____ course inter-alia on the basis of the above said original documents submitted by me.
- (ii) The documents mentioned at Sr. No. 1 (i) to (xvi) are the original documents and their true copies are duly authenticated by Notary and also signed by me.
- (iii) I shall be held solely responsible for genuineness of my original documents listed at Sr. Nos. 1 (i) to (xvi) which are submitted to the MGMIHS, and shall not hold the MGMIHS liable in any manner.
- (iv) In case any of the said documents is not found to be authentic or genuine, I shall be liable for appropriate legal action and also for cancellation of my admission or withdrawal of my degree, even if the degree is already confirmed / awarded.

Solemnly affirmed at: _____

On this : _____ day of _____ 2016

Deponent: (Signature of student): _____

(Name of Student): _____

Identified by me: _____

Undertaking B

(TO BE TYPED ON NON JUDICIAL STAMP PAPER OF RUPEES ONE HUNDRED
& SUBMITTED TO MGMIHS AFTER DULY NOTORIZED)

AFFIDAVIT

I, _____
father / mother of _____
do hereby solemnly affirm and state that I am aware about the documents submitted by my son /
daughter / ward: Mr./Mrs./Ms. _____
for seeking admission for _____ course
of MGM Institute of Health Sciences. I further state that I have seen these original documents
and they are genuine. In case of any doubt / dispute arising about the authenticity of the said
original documents my son / daughter / ward: Mr. / Mrs. /
Ms. _____ shall be liable for appropriate action including
cancellation of his / her admission from _____ course of the
MGM Institute of Health Sciences. I as well as my son / daughter / ward:
Mr./Mrs./Ms. _____ shall also be responsible
for any action initiated by the MGM Institute of health Sciences for falsity / doubt of the said
document/s submitted by my son / daughter / ward to the MGM Institute of Health Sciences,
Navi Mumbai. We shall no claim of whatever nature against the MGM Institute of Health
Sciences.

Solemnly affirmed at: _____

On this: _____ day of _____ 2016

Deponent: (Signature of Students' Father / Mother): _____

(Name of Student's Father / Mother): _____

Identified by me: _____



MGM INSTITUTE OF HEALTH SCIENCES

(Deemed University u/s 3 of UGC Act, 1956)

Grade 'A' Accredited by NAAC

Sector-01, Kamothe, Navi Mumbai - 410 209

Tel 022-27432471, 022-27432994, Fax 022 - 27431094

E-mail : registrar@mgmuhs.com ; Website : www.mgmuhs.com

Authority Letter

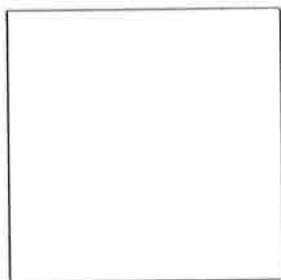
(To appear in counseling for admission to first year MBBS course – 2016-17)

I, Son / Daughter / Ward of
Mr. bearing Roll No./Seat No.
..... in NEET – 2016 (MBBS), MGM Merit No.
..... do hereby authorize *Mr. / Mrs. / Miss.
..... (Relation:) to represent me on
date/...../2016 before the committee for selection for admission to MBBS Course.

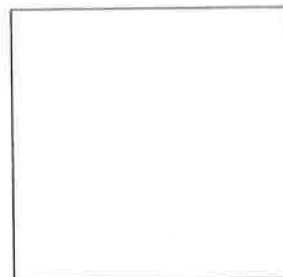
Photographs of above named persons are pasted below:

(These photographs must be attested by Gazetted Officer)

Candidate Photograph
(Authorizing person)



Representative Photograph
(Authorized Person)



UNDERTAKING

I,, Son / Daughter / Ward of
Shri aged years, do hereby
solemnly affirm and undertake that the decision of my authorized proxy, Mr. / Miss. / Mrs.
..... regarding selection of seat in
counselling on Shall be binding to me and I shall not have any claim whatsoever,
other than the decision taken by my authorized representative on my behalf, including seat
refusal.

Signature of Authorised Proxy

Signature of Candidate

*Representative should be a father/Mother/elder brother/elder sister/elder brother in law/elder sister in law.