



MGM INSTITUTE OF HEALTH SCIENCES

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

Accredited by NAAC with 'A' Grade

Sector-01, Kamothe, Navi Mumbai - 410 209

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

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

MGM/01/AC-16/2020/172

Date: 09/04/2020

Notification No: AC- 39 / 2020

Post Graduate Admission (MD/MS) 2020 – 21 at Constituent Medical Colleges of MGM Institute of Health Sciences, Navi Mumbai

As per the Hon'ble Supreme Court of India, Directorate General of Health Services, (DGHS) guidelines, admission counseling for all PG seats of the Deemed Universities will be done by DGHS/MCC. Therefore the process of PG Admission (MD/MS) for constituent Medical Colleges of MGM Institute of Health Sciences, Navi Mumbai will be as follows:

1. All NEET PG-2020 qualified candidates who are interested in getting admission at following constituent Medical Colleges need to select these colleges as their choice on **MCC portal** of DGHS.
 - I) MGM Medical College & Hospital, Navi Mumbai
 - II) MGM Medical College & Hospital, Aurangabad
2. Selected candidates in the first round need to report to Deans of respective Medical Colleges of MGMIHS as per the instruction of DGHS.
3. **A) Physical Reporting:** At the time of reporting, selected candidates must submit:
 - The requisite annual tuition fee. (**Annexure - 01**) in the form of demand draft favoring "**MGM Institute of Health Sciences**" Payable at Mumbai.
 - All the documents in original as per check list attached with this notification (**Annexure -02**) (Please also refer NEET PG 2020 FAQ's uploaded on www.mcc.nic.in website) with two sets of self-attested photocopies.
 - Without original documents and demand drafts of Tuitions Fees candidate will be considered as '**Non Reported**'.
 - Students himself/herself must be present to the respective Medical College at the time of reporting. **No proxy will be allowed in any circumstances.** Candidate must join duties as per the instructions of respective Dean's office.
- B) Online Reporting:**
 - As per DGHS Notice Ref. No. U-12021/44/2019/14-MEC, dated 08/04/2020, candidates can join the allotted college by sending a confirmatory email to MGM Medical College, Navi Mumbai (Email ID - mgmmcnb@gmail.com) and MGM Medical College, Aurnagabad (Email ID - mgmmca@themgmgroup.com) regarding acceptance of seat and attaching scanned copies of relevant documents as mentioned in (**Annexure - 02**) in the same email.

P. T. O.

- Pay the requisite annual tuition fees online in the following account:-

Account details:-

Name of Beneficiary - MGM Institute of Health Sciences

Beneficiary Bank Account No. - **0183104000132763**

Type of Account - SAVING ACCOUNT

Bank Name - IDBI Bank Ltd,

IFS Code - **IBKL0000183**

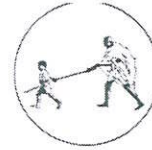
- All online reporting candidates need to send an email on 'accountmumbai@mgmuhs.com' mentioning Name of candidate, Amount paid and UTR Number received from bank after NEFT/RTGS. Kindly also attach Self-declaration form in the prescribed format (**Annexure – 05**) and Account details (**Annexure – 06**) with this email.
 - Without Confirmatory email of seat acceptance, online fee payment and scanned documents candidate will be considered as '**Non Reported**'.
 - All such candidates need to report in person along with original documents as and when prevailing condition become favorable to travel.
4. All original documents will be returned to the student after verification and granting of eligibility by the Institute.
 5. Candidates are requested to strictly adhere to FAQs and counseling schedule/scheme put up on www.mcc.nic.in website.
 6. Seat matrix for both Colleges under MGMIHS in annexed at (**Annexure 03**).
 7. One year compulsory bond to be submitted in prescribed format after all admission formalities are completed. Format of the Bond is enclosed as (**Annexure 04**).
 8. For any clarification or query : Email us at registrar@mgmuhs.com

Registrar

Dr. Rajesh B. Goel

Registrar

MGM Institute of Health Sciences
(Deemed University u/s 3 of UGC Act, 1956)
Navi Mumbai- 410 209



MGM INSTITUTE OF HEALTH SCIENCES

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Sector -1, Kamothe, Navi Mumbai – 410 209.

Fees Structure for Management & NRI Quota for the Academic Year 2020 – 21 (MD/MS)

Fees Structure for MGM Institute of Health Sciences constituent Medical Colleges at Navi Mumbai & Aurangabad.

Sr. No.	Fee Structure	Particulars & Fee Type	Management Quota Fees (Rs.)	NRI Quota Fees
1.	Tuition fees (To be paid at the time of Reporting)	Clinical Subjects (All) – (Per Year)	25,00,000	\$76,800/- (but not less than Rs. 55,00,000/-)
		MD Pathology MD Immuno-Haematology & Blood Transfusion MD Family Medicine – (Per Year)	15,00,000	\$43,500/- (but not less than Rs. 30,00,000/-)
		Anatomy, Physiology, Biochemistry, Microbiology, Pharmacology, Community Medicine – (Per Year)	7,00,000	\$22,000/- (but not less than Rs. 15,00,000/-)
2.	University Eligibility / Registration Fee and Hostel & Mess Charges as applicable (Need to be paid after admission)			

Bond: One Year Compulsory Bond to serve in the respective department after completion of PG.


Registrar
Dr. Rajesh B. Goel
 Registrar
 MGM Institute of Health Sciences
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Tel 022-27432471, 022-27432994, Fax 022 - 27431094

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

Admission (MD / MS) 2020 – 2021

No. Acad. 16/2020

Date: / /2020

All India NEET Rank No.

Name: Dr. _____

Check List

Please submit the following original documents and two sets of self attested photocopy of each of the to the respective college at the time of reporting



Note: Please put ✓ in the appropriate check box below for the original documents received from the student.

Please put X in the appropriate check box where no original document received from the student.

1.		Admit Card of NEET PG - 2020												
2.		Mark Sheet of NEET PG - 2020												
3.		Bonafide Certificate from Institute where qualified for M.B.B.S. / Diploma												
4.		Nationality Certificate or valid Passport												
5.		SSC Passing Certificate / 10 th												
6.		HSC Passing Certificate / 12 th												
		Statement of MBBS Marks of :												
		<table border="1"> <thead> <tr> <th>7.</th> <th>8.</th> <th>9.</th> <th>10.</th> </tr> </thead> <tbody> <tr> <td>First Year</td> <td>Second Year</td> <td>Third Year – Part I</td> <td>Third Year – Part II</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	7.	8.	9.	10.	First Year	Second Year	Third Year – Part I	Third Year – Part II				
7.	8.	9.	10.											
First Year	Second Year	Third Year – Part I	Third Year – Part II											
11.		MBBS Degree Certificate												
12.		MBBS Passing Certificate												
13.		Attempt Certificate of all University Examinations												
14.		Internship Completion Certificate												
15.		Migration Certificate												
16.		Transfer Certificate												
17.		Provisional / Permanent Registration Certificate of MMC / State Council / MCI												
18.		Medical Fitness Certificate												
19.		Affidavit regarding educational gap (Gap means if the period between Internship Completion & 01/05/2020 is more than one year) candidate have to submit notarized affidavit on Rs. 100/- stamp paper as Gap Certificate.												
20.		A copy of Gazette, in case of any change in the name of the candidate												
21.		Photocopy of Aadhaar Card												
22.		Four Passport Size photographs												
23.		Caste Certificate												
24.		Caste Validity Certificate												
25.		Non Creamy Layer Certificate for OBC valid up to 31/03/2020												
26.		Tuition Fee: DD No. Dated: / /2020 Bank: Amount: Tuition Fee: DD No. Dated: / /2020 Bank: Amount: Tuition Fee: DD No. Dated: / /2020 Bank: Amount:												
27.		Foreign Medical Graduates are required to bring their FMGE Pass Certificate issued by NBE												
28.		Competed Bond documents												

P.T.O

29. For NRI Quota admissions: (As per of DGHS/Govt. of India guidelines)

1.		Notarized Affidavit of the person who is NRI and the Sponsorer
2.		Document claiming that the Sponsorer is an NRI (Valid passport, Visa of the sponsorer
3.		Relationship of NRI with the candidate (Notarised affidiavit of family tree)
4.		Notarized Affidavit from Sponsorer that he /she will sponsor the entire duration course fee of the candidate
5.		Embassy Certificate of the Sponsorer

For office use only:-

Dr. _____ All India NEET Rank No. _____ is eligible / not eligible for admission & certified that the above tick (✓) marked original documents (Total: _____ documents) are retained by MGMIHS.

Verified by a Member of Scrutiny Committee: Dr. _____ Signature: _____

Note: Admission will be confirmed on payment of Tuition Fee at the time of reporting and on completion of other formalities at the respective Medical College

DECLARATION

I solemnly affirm and state that:

- (i) Attached / submitting documents mentioned at Sr. No. _____ are authentic documents.
- (ii) I shall be held solely responsible for genuineness of my original documents which are submitted and shall not hold the MGM Institute of Health Sciences liable in any manner.
- (iii) 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 conferred.
- (iv) In case my admission is cancelled because of fraudulent practices, I undertake to pay the entire fee for the course of study / Bond.
- (v) Candidates who are registered with their local state council or MCI will have to compulsorily register themselves with Maharashtra Medical Council within 15 days of getting admission. Otherwise their admission may get cancelled as per the rules of MGM Institute of Health Sciences/MMC/MCI.

Solemnly affirmed at: _____

On this: _____ day of _____ 2020

Deponent: (Signature of student): _____

(Name of Student): _____



MGM INSTITUTE OF HEALTH SCIENCES

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PG NEET- 2020 (MD/MS)

Seat Distribution

PG Speciality	MGM Medical College, Navi Mumbai			MGM Medical College, Aurangabad		
	Total	Management Quota (85%)	NRI Quota (15%)	Total	Management Quota (85%)	NRI Quota (15%)
MD Anatomy	5	5	-	4	4	-
MD Physiology	3	3	-	3	3	-
MD Biochemistry	2	2	-	2	2	-
MD Microbiology	2	2	-	4	4	-
MD Pharmacology	4	4	-	2	2	-
MD Pathology	11	11	-	5	5	-
MD Community Medicine	2	2	-	2	2	-
MD General Medicine	14	11	3	14	11	3
MD Emergency Medicine	5	5	-	NA	NA	NA
MD Respiratory Medicine	3	3	-	3	3	-
MD Dermatology	3	1	2	3	2	1
MD Paediatrics	11	8	3	6	4	2
MD Anaesthesiology	11	11	-	5	5	-
MD Radiology	6	4	2	4	3	1
MD Psychiatry	3	3	-	3	2	1
MD Geriatrics	2	2	-	NA	NA	NA
MD Immuno Haematology & Blood Transfusion	3	3	-	NA	NA	NA
MD Family Medicine	2	2	-	NA	NA	NA
MS General Surgery	12	9	3	8	6	2
MS Orthopedics	11	8	3	4	3	1
MS Ophthalmology	4	3	1	5	4	1
MS Obst. & Gynaec.	12	9	3	9	7	2
MS ENT	3	3	-	3	3	-
MS Traumatology & Surgery	2	2	-	NA	NA	NA
Total	136	116	20	89	75	14

17/2/20

Dr. Rajesh B. Goel
Registrar

MGM Institute of Health Sciences
(Deemed University u/s 3 of UGC Act, 1956)
Navi Mumbai- 410 209.

BY STUDENT ON RS. 500 STAMP PAPER AND NOTARIZED**(DRAFT 1)****AGREEMENT**

AGREEMENT is made at ... this ... day of ... between the Mahatma Gandhi Missions Institute of Health Sciences having its office at Sector 1, Kamothe, Navi Mumbai (hereinafter referred to as the Party of the First Part) and Miss/Mr. (Dr.----- residing at ----- (hereinafter referred to as the Party of the Second Part).

WHEREAS

1. The Party of the first part is the Mahatma Gandhi Missions Institute of Health Sciences, a deemed to be University registered under the University Grants Commission Act and established by the Mahatma Gandhi Mission Trust (MGM Trust), registered Public Charitable Trust. The Mahatma Gandhi Missions Institute of Health Sciences has 2 constituents Medical Colleges in Navi Mumbai and in Aurangabad.

2. The Party of the second part is a student who has taken admission and enrolled/ is desirous of enrolling in the course of (Degree) MD/MS/Diploma offered by the Colleges/Institutes, which are run and administered by the Party of the First part.

3. The party of second part on completion of the course of (Degree) MD/MS/Diploma will be qualified person to be employed to the post of Senior Resident/Tutor with the party of first part. The Party of the second part has agreed and undertaken to join the employment of the party of first part as a Senior Resident/Tutor and work with the party of the first part for a period of 1 year.

4. The party of the second part has also agreed to execute a Bond, Indemnity and Undertaking in relation to the employment etc. The party of the second part acknowledges, admits and undertakes that after the completion of the course of (Degree) MD/MS/Diploma, the party of the second part will join and continue to work with the party of the first part for a period of 1 year. The party of the second part will be paid salary.

6. The parties have now mutually decided to reduce the same in writing on the following terms and conditions:-

NOW IT IS AGREED BETWEEN THE PARTIES HERETO AS FOLLOWS:

- (i) The party of the second part agrees to work with the party of the first part as a Senior Resident/Tutor at the ----- run and administered by the party of the first part at a pre defined monthly salary/stipend based on the MCI/Government norms.
- (ii) The party of the second part agrees, undertakes and is bound by the agreement, bond and undertaking to work for a total period of 1 year from the date the party of second part assumes charge of the said post. The said period may be extended for a further period from time to time as may be agreed upon. The party of the second part and the sureties have also executed the required bond, indemnity and undertaking.
- (iii) The party of the first part shall pay to the party of the second part a pre defined monthly salary/stipend based on the MCI/Government norms.
- (iv) The party of the first part will, as far as possible provide a suitable residential accommodation to the part of the second part free of cost.
- (v) The Party of the Second Part agrees and admits that the rural posting for specified duration will be compulsory. The place of posting will be purely at the discretion of the Dean/Management.
- (vi) The Party of the Second Part agrees and admits that all the original documents submitted to the institute at the time of admission and mark sheet, passing certificate and degree certificate of the course in which admitted (issued by University) will be in custody of ----- Medical College, Hospital & Research Centre, till completion of the bond period of 1 years.
- (vii) The party of the second part will be entitled to leave as per the norms of MGMIHS.
- (viii) The party of the second part will devote the whole office or working time and shall work faithfully, sincerely, diligently and efficiently and to the best of her ability and make her best efforts to use her knowledge and skill in providing the best medical services and medical care to the patients.

- (ix) The party of the second part will diligently undertake and complete the administrative work related to the patients assigned to her/him. The party of second part will not divulge or disclose to anybody any medical case papers, examinations details, reports of any of the patients.
- (x) If the party of the second part resigns from service and terminates this agreement before the expiration of the said period of 1 year, she/he will be liable to pay to the party of the first part a sum of Rs 50,00,000/ - (Rupees Fifty lacs only) as per the agreement, bond indemnity and undertaking.
- (xi) The party of the second part will not remain absent from the work without a prior intimation and without obtaining prior written permission of the Administrator of the hospital or in his absence of any other Director of the Hospital.

7. All disputes or difference pertaining to the subject matter of the this agreement or in respect of the employment of the party of the second part shall be referred to Arbitration.

8. This agreement is executed in duplicate and one copy each will remain with the parties.

IN WITNESS WHEREOF the parties have put their hands the day and year first hereinabove written.

Signed for and on behalf of
The party of the first part

in the presence of -----

- 1)
- 2)

Signed by the withinnamed

The party of the second part

in the presence of -----
1)
2)

BOND BY PARENT ON RS. 500 STAMP PAPER AND NOTARIZED

(Draft 2)

Bond by Sureties of a Student Admitted to a College to Secure the Performance of an Agreement

BY THIS BOND We, Mr/Mrs -----residing at -----, and Mr /Mrs ----- residing at ----- (hereinafter called “the sureties”) are bound jointly and severally to the trustees/management of the _____ College (hereinafter called “the trustees/management”) for the payment to the trustees/management of the sum of Rs. 50,00,000/- (Rupees Fifty Lacs).

WHEREAS by a deed of agreement dated the _____ executed by the trustees/management and ----- (student) (or guardian of student) the trustees/management have agreed to educate the said ----- (student) at the _____ College and to make him certain payments therein stipulated on the terms and conditions therein specified.

AND WHEREAS for the purpose of securing and indemnifying the trustees/management, their assigns and successors against all loss and damage which they might suffer by reason of the said ----- (student) (or, the said ----- (surety)) making default in the observance and performance of any covenant on his part to be performed and contained in the aforesaid agreement and in consideration of the said education and payment to be given and made by the trustees/management to the said ----- (student) it has also been agreed that the sureties should execute the above written bond subject to the condition hereinafter contained.

NOW THE CONDITION of the above written bond is that if the said ----- (student) (and the said ----- surety) shall duly and faithfully observe and perform all the stipulations and conditions on his (their) part to be observed and performed and contained in the aforesaid agreement dated _____ then the above written bond or stipulation shall be void otherwise the same shall remain in full force.

Signed.

BOND BY GUARDIAN ON RS. 500 STAMP PAPER AND
NOTARIZED
(Draft 3)

This is to be given if parents are not available for (draft 2) bond

KNOW ALL MEN that We Mr ----- (student) residing at ----
----- (or, ----- guardian of Student) etc. (Surety No.1) and ----
----- (Surety No.2) bind ourselves jointly and severally to the ---
-----Mahatma Gandhi Missions Institute of Health
Sciences/management /Trustees for payment of the sum of Rs. 50,00,000/- (Rupees Fifty Lacs).

WHEREAS the above named bounden ----- (student) has
under the letter/order _____ dated _____ been admitted to the -----
----- course run and administered by _____ college.

WHEREAS by a deed of agreement dated _____ executed between the
MGMIHS/Trustee/Management and the said bounded ----- (student
) (or, his guardian -----) the MGMIHS/Trustee/Management
has admitted the student and agreed to educate the student. The Student in
turn has agreed to work with the MGMIHS/Trustee/Management for a
period of 1 year for which he will be paid a salary as per the terms and
conditions therein specified.

AND WHEREAS for the purpose of securing and indemnifying the
MGMIHS/MGM Trust/management against all losses and damages which
the MGMIHS/MGM Trust/management may suffer by reason of the said -----
----- (student) making any default in the observance and performance of
any covenant on his part to be performed and contained in the said agreement
and in consideration of the expenses to be incurred on the said training and
payments thereof to be made to the said ----- (**student**), it has
been agreed that the said sureties i.e Mr/Mrs ----- and Mr /Mrs ----
-----) should execute the above given bond subject to the condition
hereinafter contained.

NOW THE CONDITION of the above-written bond is that if the said -----
----- (student)(or, the said ----- his guardian) shall duly and
faithfully observe all these stipulations and conditions on his part to be
observed and performed and contained in the aforesaid agreement dated
_____ then the above written bond or stipulation shall be void otherwise
the same shall remain in full force.

Signed, etc.

SERVICE BOND TO BE GIVEN BY STUDENTS ON RS. 500 STAMP

PAPER AND NOTARIZED

(Draft 4)

BOND

This Bond made on this day _____ between _____ **(Name & Address of Student)** hereinafter called "Student" which expression shall unless the context does not permit includes her / his executors etc. of one part and the Registrar/Dean, ----- Medical College, Hospital & Research Centre, hereinafter called "College" of the other part.

Whereas the student has agreed to undergo Post Graduate Course of (Degree) MD/MS/Diploma in department of _____ at -----
----- Medical College, Hospital & Research Centre, -----.

NOW THEREFORE THIS BOND WITNESSED AS UNDER:

1. That the student shall entitled to stipendiary benefit from the College as may be decided by the College and will not accept any employment or conduct any private practice while undergoing the course.
2. That the student admitted in this Institute will serve the college for a minimum period of 1 year after passing post graduate qualification, alternatively she/he will pay an amount of Rs. 50,00,000/- (Rs. Fifty Lacs Only) for Clinical PG Degree Courses and Rs. 50,00,000/- for Para Clinical Degree Courses and PG Diploma Courses) to the management. However, the management may discontinue her / him considering her/his record, conduct, requirement of staff etc.
3. That during bond period, the student will be paid the stipend/ salary of Senior Resident/Tutor (for degree student) and the stipend/salary of Junior Resident III for Diploma student as a pre defined monthly salary/stipend based on the MCI/Government norms.
4. That the rural posting for specified duration will be compulsory. The place of posting will be purely at the discretion of the Dean/Management.
5. That all the original documents submitted to the institute at the time of admission and mark sheet, passing certificate and degree certificate of the course in which

admitted (issued by University) will be in custody of _----
----- Medical College, Hospital &
Research Centre, -----, till completion of the
bond period of -----years.

6. That if the student during the period undergoing the Post Graduate Course quits or leaves the course in the middle of entire duration of two / three years, she / he will make good the balance fees due to her / his for the entire course and in default will be required to pay Rs. 50,00,000/- (Rs. Fifty Lacs) for bond period as per the agreement bond indemnity and undertaking for not serving the College and no certification or documents will be returned till the amount due is paid.

In witness hereof the student and the college sets their hands herein on _____ day of _____.

In presence of witnesses.

Signature &

Name of Candidate & Address

1)

2)

Date: _____

Place:

UNDERTAKING BY STUDENT ON RS. 500 STAMP PAPER AND

NOTARIZED

(Draft 5)

UNDERTAKING

I, _____ Son / Daughter / Wife of Shri
_____ Indian Inhabitant, residing at
_____ do solemnly affirm and state as under:

1. I say that I have appeared for the NEET (PG) 201--- examination conducted by the ----- to secure admission in the academic year 20--- - 20---- in Medical -----.
2. I say that solely on the basis of merit I have been admitted to the _____ college in MD / MS / Diploma _____ etc. Course in ----- Quota in the academic year 20--- -20---.
3. I say that at the time of securing my admission I have paid a sum of Rs. _____/- as fees for MD/MS/Diploma _____ etc. Courses.
4. I say that I am aware that the repeater (failure) fees will be charged as per the rules and guidelines of the concerned authority.
5. I say that I have made a bond with college to serve the college for a specified period of 1 year after passing my PG course and I hereby undertake to submit undertaking / solvency/affidavit/Bond in lieu of bond fees within 15 days.
6. I further agree, admit and undertake to serve the college for a period of 1 year after passing my course. I further agree and undertake to complete the said period of 1 year. I further say that if I fail to complete the said period of 1 year for whatsoever reason, then in that case I will be immediately be liable to pay to the MGMIHS/Trust/Management an amount of Rs 50,00,000/- and the said MGMIHS/Trust/Management will be entitled to invoke the Bond, Indemnity and undertaking and take steps in accordance with law.

This ____ day of _____

Identified by me; _____

Signature &

Name of Candidate & Address

BY STUDENT ON RS. 500 STAMP PAPER AND NOTARIZED

**SOLVENCY TO BE GIVEN BY PARENT OR GUARDIAN AS
APPLICABLE**

(Draft 6)

AFFIDAVIT OF 1ST SURETY

I, _____ S/O, D/O, Sh./Dr.
_____ resident of
_____ do hereby solemnly affirm and
declare as under:

- 1) That I state on oath that I am a permanent resident of
_____ do hereby solemnly
affirm and declare as under:
- 2) That I state on oath that I stand surety for
_____ “the obliger”
whereas the MGMIHS/College has selected the obliger
for post graduate course of (Degree) MD/MS/Diploma for
a period of -----years in the department of _____
at -----Medical College, -----.
- 3) That I state on oath that I have no blood relation with Dr.
_____ S/O, D/O _____ mentioned in
para No.2.
- 4) That I state on oath that I am legal and right full owner of
the property amounting to Rs. _____ in my
possession. I say that the said property is not mortgaged or
encumbered in any manner whatsoever. The details of the
property is as under:
(Description)
- 5) That I state on oath that I will not sell, pledge, transfer,
mortgage, charge or create any kind of charge whatsoever
on the said property till the completion of the bonded
period.

I, further declare that contents of my above affidavit are
true and correct to the best of my knowledge and belief
and nothing has been concealed therein. If the contents are
found to be untrue I shall be laible for further necessary
action.

Verified at _____

Deponent

Dated : _____

VERIFICATION

I, ----- further declared that contents of my above affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Verified at _____

Deponent

Dated : _____

AFFIDAVIT OF CANDIDATE ON RS. 500 STAMP PAPER AND NOTARIZED

(Draft 7)

I, _____ S/O, _____ D/O
_____ resident of _____ do
hereby solemnly affirm and declare as under:

- 1) That I have been provisionally selected for admission to Post-graduation course in the specialty of _____ under ----- Quota / _----- quota (as the case may be) for the AY 20-
--- - 20 ----- at the _----- Medical College, -----
-----.
- 2) That the terms and conditions of admission notice are acceptable. I have not been debarred for doing any Postgraduate course previously.
- 3) That I am a citizen of India. I have not obtained the benefit of residence in any other state other than Maharashtra.
- 4) That I have not joined / doing any PG course at any other medical institute / college in India / abroad.
- 5) That I have not left any Postgraduate Course during the last three years.
- 6) That neither the deponent nor the child / ward of deponent have obtained the benefit of Residence in any other state.
- 7) That I have not joined any government/semi-government / private service.
- 8) That I will appear in Postgraduate Examination after completing three years study period in the same course.
- 9) That after getting admission in -----
----- Medical College, ----- if discontinue / leave the training course, then I will be bound to deposit the required fee of the entire course and the bond amount of Rs 50,00,000/- (Rupees Fifty lacs).
- 10) That if I discontinue the training course after getting the admission or participating in a strike or being made to leave the training course on account of indiscipline or misconduct on his / her part or failing or refusing to serve the college for a minimum continuous period of 1 year after qualifying for full registration on completion of the course or for other reasons, then I shall be liable to deposit the entire bond money of Rs.50,00,000/- (Rupees Fifty Lacs only) with the MGMIHS/MGM Trust/Management.

Place: _____

Dated: _____

Deponent

I, further declare that contents of my above affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein. If the contents are found to be untrue I shall be laible for further necessary action.

Deponent

Self-Declaration

I hereby declare that I, Mr./Ms am a Relative / Family Friend
 / Well-wisher / Others (.....) of Mr./Ms
 who is a candidate applying for
course at MGM

I am remitting the fees of Rs..... (Rupees
) on his / her behalf,
 whole-heartedly, by RTGS/NEFT/DD from my bank account.

Name of the Bank..... Branch.....

Account No:

I hereby confirm that I have no objection for paying the above mentioned fees. In future:

- I shall not hold MGMIHS responsible for any issue regarding the payment made by me.
- I will not claim any refund from MGMIHS regarding the above payment made by me and will not go into any legal action against MGMIHS for the same.
- If there is any problem regarding this payment I shall settle the same between myself & candidate only.

.....
 Signature

Name:

Full Address:

Mobile No.

PAN No:

Adhar Card No:

Place :

Date:

Bank Account details of the candidate

Full Name of the Student:-

NEET All India Rank:-

Program:-

Roll.No:

Allotted College _____

Mode of Payment	Date	UTR No./DD No	Bank Name with Branch	Amount	Name of Account Holder	Relation of the student with Account Holder
RTGS/NEFT /DD						

The above information furnished by me is correct and the entire responsibility solely lies with me and my parents including legal/penal action. NOC from account holder is required, If the account holder is other than student / parents in the prescribed format.

Email ID of the Student: - _____

Mobile No. of student:- _____

Mobile No. of Parent:- _____

Signature:- _____

Signature:- _____