

**GOVERNMENT MEDICAL COLLEGE  
NANDURBAR  
MAHARASHTRA STATE**



**Welcomes....**

The students joining  
in this institute, in the  
academic year 2024-25

Contact number: 02564-210444

Nodal Officer Dr. Ashish Nimje :- 9579582551

**(Contact between 10:00 to 5:30 PM only)**

**STUDENTS AND PARENTS ARE REQUESTED TO CALL ONLY ON**



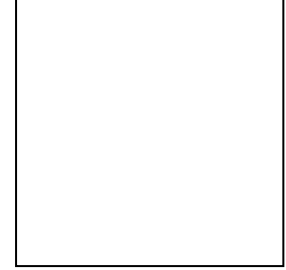
महाराष्ट्र शासन

**Government Medical College Nandurbar**

Form No.

Date - / /20

**Application form for admission to PG/DNB Courses**



**To,  
The Dean,  
Govt. Medical College,  
Nandurbar.**

**Sub. :- Joining in PG/DNB\_\_\_\_\_ course at Govt. Medical College,  
Nandurbar (Maharashtra)Academic Year 2024-25.**

**Ref.:-** Selection Letter/ List : (Printout attached).

Respected Sir,

I the undersigned Shri./Kum, (Full Name in Capital)\_\_\_\_\_has been selected for **PG/DNB** \_\_\_\_\_Course in Govt. Medical College, Nandurbar as per the selection letter of AllIndia / State List.

Kindly enroll me in your college as **PG/DNB** Student for the Academic Year 2024-25. I am submitting herewith following All Concern original Document/Certificate (Hard copy & Scan Soft copy in pen drive) & two set of attested Xerox copies.

Please allow to join the same.

Thanking You

Yours faithfully,

Name & Signature of Candidate

**GOVT. MEDICAL COLLEGE, NANDURBAR- 425412**

**ADMISSION FOR THE YEAR 2024-25**

**STUDENT INFORMATION**

01	Name of the Student as mentioned on HSC Mark sheet (in Capital)	
	Guardian / Father's Full Name	
	Name of Mother	
	Full Name of the Candidate in Devanagari (Marathi/Hindi)	
02	Residential Address with PIN code	
	Whatsapp Mobile No. of Student	
	Whatsapp Mobile No. of Parent	
03	E-mail Address of Student	
	E-mail Address of Parent	
04	a) Date of Birth	
	b) Place of Birth	
05	Aadhaar No.	
06	Gender (Male / Female)	
07	Marital Status (Married / Unmarried)	
08	a) Category	
	b) Caste	
	c) Sub-Caste	
	Category of Admission	
09	Non Creamy layer Certificate valid up to March 2025	Yes/ No/Not Applicable
10	Domicile State (belongs to which state)	
11	Allotment Date	
12	a) Neet Roll No	
	b) Marks	
	c) AIQ	
	d) State Rank	
	e) Round	
13	<b>Academic Record</b>	<b>Furnish Details</b>
	Date of admission to 1 <sup>st</sup> MBBS Course	
	Whether you have been admitted to MBBS Course through All India Entrance Examination or as Govt. of India Nominee or nominee on seat of dispute Border. If yes furnish details	
	Name of Medical College from which graduate	
	Name of the University from which graduate	
	Registration number with MCI/MMC/Relevant State Medical Council	
	Have you obtain any PG/DNB Qualification. If yes give details.	

	State if you are Registered now for any PG/DNB Course in any Medical College. If any give details.	
	State if you are employed. If yes state the name of employer and the post held OR state whether you have completed Govt. service as per rules. If yes give the details.	
	Whether you have cancelled admission to any PG/DNB course or your admission has been cancelled by the Dean/university. If yes, give details	
	Date of starting and completion of internship	
15	Blood Group	
	Mark of Identification (two)	1)
		2)
16	Guardian/Father's Occupation	
17	Tuition Fees Demand draft Bank Name :-	D.D. No. _____ of Rs. Dt.    /    /2024
18	Other Fees Bank Name :-	D.D. No. _____ of Rs. Dt.    /    /2024

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 HOD/Dean/Director, I understand that, I am at risk of getting deregistered if do not diligently pursue my **PG/DNB** 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.

Date:        /        /2024

Place: - NANDURBAR

Name & Signature of Candidate



महाराष्ट्र शासन

शासकीय वैद्यकीय महाविद्यालय, नंदुरबार

जिल्हा सामान्य रुग्णालय परिसर, साक्री रोड, नंदुरबार ४२५४१२

Email:- [deangmchnandurbar@gmail.com](mailto:deangmchnandurbar@gmail.com) Website: <http://gmchnandurbar.com> कार्यालय दुरध्वनी क्र 02564-210444

शा.वै.म.नं./विवि/प्रवेशप्रक्रिया/

/२०२

दिनांक /

/२०२

## SCRUTINY FORM

This is to certify that Shri/Kum. \_\_\_\_\_ is

admitted on / /2024 to PG/DNB ----- subject at this College for the

Academic Year 2024-25. His/her following **ORIGINAL CERTIFICATES** are retained in this College.

Sr. No.	Original Documents List	Available Yes / No
01	Nationality Certificate OR Valid Passport	
02	Domicile Certificate	
03	Aadhar Card(Photo copy)	
04	SSC (10th) Passing Certificate (Only if DOB Not available)	
05	HSC (10+2) Mark sheet	
06	HSC (10+2) Passing Certificate	
07	1 <sup>st</sup> ,2 <sup>nd</sup> ,3 <sup>rd</sup> & Final Year MBBS mark Sheets	
08	MBBS Degree/Passing Certificate	
09	Internship completion Certificate (15 <sup>th</sup> August 2024)	
10	MCI/MMC Registration Certificate (15 <sup>th</sup> August 2024)	
11	MCI UG College Recognition Letter	
12	Admit Card NEET-PG/DNB-2024	
13	Selection Letter (College Allotment Printout)	
14	NEET-PG/DNB-2024 Mark sheet	
15	Caste Certificate	
16	Caste Validity Certificate / For outside Maharashtra students (OMS) Letter from Magistrate that your state does not issue caste validity certificate...	
17	Non Creamy Layer Certificate... Valid up to 31/03/2025	
18	EWS Certificate as per the Central Govt. norms (in the format as specified in the information bulletin)	
19	OBC certificate issued by the competent authority. The sub-cast tally with the central list of OBC	
20	School Leaving OR Transfer Certificate	
21	Defense Certificate (for D1, D2, D3 ... (for State quota students only)	
22	Disability Certificate.... (If applicable from competent Authority)	
23	Hilly Area Certificate.....(for State quota students only)	
24	Medical Fitness Certificate in prescribed Performa	
25	Migration Certificate ....for outside Maharashtra state (OMS) candidates only	
26	Self-Education Gap Certificate	
27	Affidavit for change in Name (A copy of Government gazette / Marriage reg.)	
28	Bond Release certificate(If Applicable)	
29	Affidavit For Service Bond	
30	Other if Any	
Tuition Fees Demand draft: D.D.No: _____ Rs. _____ Dt. / /2024		
Other Fees: D.D. No: _____ Rs. _____ Dt. / /2024		
<b>(Document Sets to be prepared exactly as per above sequence)</b>		<b>(Please write-down YES/No carefully)</b>

Clerk

Scrutiny Officer

Professor & Head  
of Concerned Dept GMC  
Nnadurbar

Dean  
Government Medical College,  
Nandurbar



महाराष्ट्र शासन

शासकीय वैद्यकीय महाविद्यालय, नंदुरबार

जिल्हा सामान्य रुग्णालय परिसर, साक्री रोड, नंदुरबार ४२५४१२

Email:- [deangmchnandurbar@gmail.com](mailto:deangmchnandurbar@gmail.com) Website: <http://gmchnandurbar.com> कार्यालय दुरध्वनी क्र 02564-210444

शा.वै.म.नं./विवि/प्रवेशप्रक्रिया/

/२०२

दिनांक / /२०२

### DOCUMENT HOLDING CERTIFICATE

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30	Other if Any	
Tuition Fees Demand draft: D.D.No: _____ Rs. _____ Dt. / /2024		
Other Fees: D.D. No: _____ Rs. _____ Dt. / /2024		
(Document Sets to be prepared exactly as per above sequence)		(Please write-down YES/No carefully)

Dean  
Government Medical College,  
Nandurbar

**GAP CERTIFICATE FORMAT**

**ANNEXURE**

**SELF DECLARATION**

I ..... Son / Daughter of .....  
.....aged .....occupation..... resident of  
..... With UID No.....  
Hereby declare that, I have passed..... course from  
..... College during the  
Year..... and I hereby state that, I have not taken admission during  
the period of gap from ..... to.....period, hence, the gap arises in my  
education.

The information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information is found to be false, I shall be liable for prosecution and punishment under Indian Penal Code and / or any other law applicable thereto.

Place : .....

Applicant's Signature .....

Date : .....

Applicant's Name.....

**ANNEXURE - 1**

**PG/DNB Admission 2024-25 Details Fees Structure.**  
**All India/State Quota**

<b>Sr. no.</b>	<b>Particulars of Fees</b>	<b>Open/Reserve Category</b>
<b>(A)</b>	<b>Tuition Fees :</b>	<b>Rs.1,38,300/-</b>
	<b>Total (A)</b>	<b>Rs.1,38,300/-</b>
<b>(B)</b>	<b>Other Fees :</b>	
1.	Development Fees : Annual	Rs.5000/-
2.	Library Deposit	Rs.2000/-
3.	Library Fees : Annual	Rs.1000/-
4.	Caution Money Deposit (CMD)	Rs.2000/-
5.	Gymkhana Fee : Annual	Rs. 500/-
6.	Admission Fee (Non-Refundable)	Rs.1500/-
	<b>Total (B)</b>	<b>Rs.12,000/-</b>
	<b>Total Fees (A) + (B)</b>	<b>Rs.1,50,300/-</b>
<b>Rs. One Lack Fifty Thousand Three Hundred Only.</b>		
<b>Demand Draft in Favor of :- DEAN, GOVERNMENT MEDICAL COLLEGE, NANDURBAR (Payable at Nandurbar)</b>		
(A) As on D.D.Rs. 1,38,300/- (B) As on D.D.Rs. 12,000/- (Each D.D. should be drawn on <b><u>Nationalized Banks Only</u></b> )		
<b>PG /DNB In-Service Candidates has to pay Collage Fee Rs.12,000/- (Rs. Twelve Thousand Only)</b>		
	<b>Hostel Fee Annual (To Be Paid By Cash)</b>	<b>Rs.4000/-</b>

**NOTE:**

1. Please Note cash/ cheque will not be accepted.
2. No errors or spelling mistakes in the D.D. will be accepted
3. D.D.ONLY from NATIONALISED will be ACCEPTED.
4. The demand draft will be deposited in the accounts only after cutoff date of admission process.

\*If student are allotted another college in subsequent rounds of All India / State, in such situation, D.D. will be refunded back to the student.