UNION TERRITORY OF JAMMU & KASHMIR
GOVT. MEDICAL COLLEGE AND ASSOCIATED HOSPITAL, UDHAMPUR

Principal GMC, Udhampur

Phone: 01992358062

Email:principal.gmcudh@jk.gov.in

No. GMC/UDH/2025-26/754-57 Dated: 08.08.2026

ORDER

In order to facilitate the process of admission of MBBS candidates, following Members of GMC Udhampur are assigned to scrutinize the original certificates/ testimonials to ascertain the eligibility and genuineness of the candidates who have been listed in the provisional select list provided by J&KBOPEE & NEET qualified candidates for admission to MBBS course session 2026-27:-

1. Dr. Naveed Gul	Assistant Professor	9018531675
1. Dr. Mehak Paban Mir	Assistant Professor	9596277782
2. Dr. Ravi Kumar	Assistant Professor	7889549042
3. Dr. Anuradha	Assistant Professor	9596812223
4. Dr. Suharshi Gupta	Assistant Professor	9419144478
5. Dr. Veenakshi Bhagat	Assistant Professor	9419149312
6. Dr. Poonam Sharma	Senior Resident	8493944858
7. Dr. Sucheta Gupta	Medical Officer	9419966417
8. Dr. Mala Bharti	Medical Officer	9419221889
9. Mrs. Anita Sharma	Accountant	9419672970
10. Mr. Aayush Pandit	Account Assistant	9796888288
11. Mr. Pranav	Record Keeper	9541049533

The committee shall work under the overall supervision of Dr. Maneesha Sethi (7006478379) Professor, Dept of Ophthalmology, Govt. Medical College Udhampur.

The venue of the same will be at Conference Hall, O/o Principal, Govt. Medical College, Udhampur.

All these staff members will have to remain available from the start date of the admission as notified by the Authorities till the completion of the whole admission process (including Gazzeted holidays and Sundays) till further orders.

Dr. Parmod Kalsotra
Principal
Govt. Medical College
Udhampur

Copy to:

1. Administrator, GMC Udhampur for information.
2. FA/CAO GMC Udhampur for information.
3. Medical Superintendent Associated Hospital Udhampur.
4. All concerned members for compliance.

ANNEXURE-III

Check list of Documents & Undertaking

(Admission to MBBS Course in Govt. Medical College,Udhampur session 2026-27)

S.NO	Attested Documents (Tag with file cover)	Unattested Documents (Stapled only)
1)	Four Passport Size Photographs	1) NEET Admit Card
2)	Demand Draft Rs. 27330/- For JK BOSE & Rs. 28450/- for other than JK BOSE in favour of CAO GMC Udhampur (J&K Bank only, payable at Udhampur)	2) NEET Score Card
3)	Provisional Allotment Letter	3) Date of Birth Certificate
4)	NEET Admit Card (Original)	4) Provisional Certificate of 10+2 (**Original**)
5)	NEET Score Card	5) Transfer Certificate & Migration (**Original**)
6)	Date of Birth Certificate	6) Discharge Certificate, if joined anywhere (**Original**)
7)	Provisional Certificate of 10+2	7) Marks Certificate of 10th(Original)
8)	Transfer Certificate	8) Marks Certificates of 10+2 (Original)
9)	Discharge Certificate, if joined anywhere	9) State Subject Certificate / Domicile (Original)
10)	Marks Certificate of 10th	10) Category Certificate if any
11)	Marks Certificates of 10+2	11) Dak Pad / File Cover (02nos.)
12)	State Subject Certificate / Domicile	
13)	Aadhaar Card	
14)	Category Certificate if any	
15)	Character Certificate from competent authority (Original)	
16)	Medical Fitness Certificate	
17)	Income Certificate of Parent (For EWS Candidate)	
18)	Affidavit regarding abiding rules & regulations of Institution.	
19)	Affidavit regarding Anti Ragging (Annexure IV & V, copy attached)	
20)	Affidavit regarding Gap Period, if required after 10+2)	

ANNEXURE-I

GOVERNMENT MEDICAL COLLEGE UDHAMPUR

Student Profile Form (MBBS Admission- 202)
Applicable for UT Quota Students Only

J&K BOPEE Notification No: _____ Dated: _____ & Notification S. No.: _____

NEET Roll No.: _____ NEET (State) Rank: _____ NEET (National) Bank: _____

Admission Session: _____ Name of Category (Selection): _____ Gender: _____

Aadhar Card No.: _____ Religion: _____ Mother Tongue: _____

1. Name of Student: _____
2. Parentage: _____
3. Date of Birth: _____ (as per Matriculate Certificate).
4. 12th Class Examination Passed Session/Year: _____
5. Name of 12th Class Passing School: _____
6. Name of 12th Class Passing Board: _____ with Roll No.: _____
7. Marks in 12th Class Examination (Min./Max.): _____/_____
8. Combined Marks in Physics + Chemistry + Biology Subjects (Min./Max.): _____/_____
9. Marks in English Subject: (Min./Max.): _____/_____
10. Whether Registered with University of Jammu: (Yes ☐ / No ☐) if, Yes.
    - University of Jammu Registration No.: _____
11. Permanent Address with Pin Code: _____
12. Tehsil: _____ b. District: _____ c. State/UT _____
13. Phone No.: _____ Alt. No.: _____ Email ID: _____
14. Fee Paid: Rs. _____ Transaction ID: _____ Dated: _____

Paste Recent Passport Size Photograph with Name

_____

Signature of Candidate

Note: Keep a copy of checklist attached with this form

ANNEXURE-II

GOVERNMENT MEDICAL COLLEGE UDHAMPUR

Student Profile Form (MBBS Admission- 202_)
Applicable for All India Quota Students Only

Date of Allotment Letter: _____ MCC Round No: _____ & Selection List S. No.: _____

NEET Roll No.: _____ NEET (State) Rank: _____ NEET (National) Bank: _____

Admission Session: _____ Name of Category (Selection): _____ Gender: _____

Aadhar Card No.: _____ Religion: _____ Mother Tongue: _____

1. Name of Student: _____
2. Parentage: _____
3. Date of Birth: _____ (as per Matriculate Certificate).
4. 12th Class Examination Passed Session/Year: _____
5. Name of 12th Passing School: _____
6. Name of 12th Class Passing Board: _____ with Roll No.: _____
7. Marks in 12th Class Examination (Min./Max.): _____/_____
8. Combined Marks in Physics + Chemistry + Biology Subjects (Min./Max.): _____/_____
9. Marks in English Subject: (Min./Max.): _____/_____
10. Whether Registered with University of Jammu: (Yes ☐ / No ☐) if, Yes.
    - University of Jammu Registration No.: _____
11. Permanent Address with Pin Code: _____
    a. Tehsil: _____ b. District: _____ c. State/UT _____
12. Phone No.: _____ Alt. No.: _____ Email ID: _____
13. Fee Paid: Rs. _____ Transaction ID: _____ Dated: _____

Paste Recent Passport Size Photograph with Name

_____

Signature of Candidate

Note: Keep a copy of checklist attached with this form

ANNEXURE-IV

AFFIDAVIT FORMAT
(PRESCRIBED BY COLLEGE ANTI-RAGGING, CANDIDATES)
APPLICABLE FOR ALL CANDIDATES

(To be attested by 1st Class Magistrate)

I, _____ admission No. _____ S/D of _____ having been admitted to GOVT. MEDICAL COLLEGE UDHAMPUR have received a copy of the UGC regulations on curbing the menace of Ragging in Higher Educational Institution 2009 carefully read and fully understood the provisions contained in the said regulations

2. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against My ward in case he/she found guilty of or abetting ragging, actively or passively or being part of a conspiracy to promote ragging.

4. I hereby solemnly aver and undertake that:

a) I will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.

b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5. I hereby affirm that, if found guilty of ragging, my ward liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.

6. I hereby declare that I has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging: and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this _____day of _____ month of _____ year.

Signature of Deponent

NAME

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein. Verified at _____ on ____ day of _____ .

Signature of Deponent

Solemnly affirm and signed in my presence on _____ day of _____after reading the contents of this affidavit.

OATH COMMISSIONER

ANNEXURE-V

AFFIDAVIT FORMAT
(PRESCRIBED BY COLLEGE ANTI-RAGGING, PARENT)
APPLICABLE FOR ALL CANDIDATES

1. I, _____ Father of _____ admission no _____ seeking admission to GOVT. MEDICAL COLLEGE UHAMPUR have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions,2009 (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

2. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against My ward in case he/she found guilty of or abetting ragging, actively or passively or being part of a conspiracy to promote ragging.

4. I hereby solemnly aver and undertake that:

a) my ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.

b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5. I hereby affirm that, if found guilty of ragging, my ward liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.

6. I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging: and further affirm that, in case the declaration is found to be untrue, my ward aware that admission is liable to be cancelled.

Declared this _____day of _____ month of _____ year.

Signature of Deponent

NAME

ADDRESS

M.NO

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein. Verified at _____ on ____ day of _____.

Signature of Deponent

Solemnly affirm and signed in my presence on _____ day of _____after reading the contents of this affidavit.

OATH COMMISSIONER

ANNEXURE-VI

AFFIDAVIT FORMAT
(TIME GAP)

I, _____ **S/o / D/o /** _____ **R/o** _____ do hereby solemnly affirm and declare as under:

1. That I have been selected for MBBS Course in Govt. Medical College, Udhampur by J&K BOPEE (under UT Quota)/ MCC (Under All India Quota) vide Notification No. _____ Dated: _____.
2. That I have passed my 12th class Examination, I have not joined any Professional/ Non-Professional Degree or Diploma Course in any Institution/ College/ University in or outside the UT of J&K.
3. That I will not indulge in any Anti-National / Anti-Social or Anti College activities and will maintain the decorum and discipline of the college.
4. That in case this statement proved incorrect I shall be personally responsible for the consequences arising there upon.

Deponent

Verification: -

Verified today on _____202 at _____ that the averment made in this affidavit are true and correct and nothing has been concealed therein.

Deponent