



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

NOTIFICATION

SUB: ADMISSION NOTICE OF MBBS STUDENTS IN GOVT. MEDICAL COLLEGE UDHAMPUR FOR ACADEMIC SESSION 2023-24.

Pursuant to the directions of National Medical Council vide notification no. **U-1 5029/37/2023-UGMEB dated: 27-07-2023.** The admission process for 1ST MBBS batch for Academic Session 2023-24, will be starting from **31-08-2023** after first round of Counselling (Allotment Process) for NEET-UG (MBBS/BDS/BSC Nursing) and will follow the schedule as prescribed in the notification.

The prescribed format of application form to be submitted at the time of admission is herewith attached as *Annexure I* for State Quota candidates (85%) and as *Annexure II* for All India Quota candidates (15%).

The document checklist attached as **Annexure III** is to be submitted in Original and Xerox at the time of admission. The candidates/parents are also required to submit the affidavits in the prescribed format at the time of admission duly Notarized. **(Annexure IV & V).** In case of candidates with Gap year, they need to submit the affidavit as prescribed in **Annexure VI**.

The admission process will commence from the scheduled date and the information regarding Hostel Accommodation, Hostel fee and other formalities will be facilitated at the Admission Desk (Council Hall) of Govt Medical College Udhampur (Makeshift Building) at Dhar Road Udhampur.

The admission fee (Rs. 27060.00) will be collected at the admission desk in form of *DEMAND DRAFT*. Demand Draft should be made in favour of CHIEF ACCOUNTS OFFICER, GOVERNMENT MEDICAL COLLEGE UDHAMPUR payable at Udhampur.

Fee to be refunded on re-allocation of seat to the candidates in 2nd/3rd Round of Counselling. In case Candidate resigns during Counselling period, the admission fee will not be refunded.

Commencement of Academic Session for 1ST MBBS Courses in GMC Udhampur will be from 01-09-2023.

Yours faithfully

Dr. Mrityunjay Principal Govt. Medical College Udhampur

No. GMC/UDH/2023-24/980-84

Copy to:

- 1. Administrative Secretary, Health & Medical Education Department. Civil Secretariat, UT of JK for information.
- 2. Director coordination, New Medical Colleges, Nursing College and Paramedical Colleges J&K, Jammu for information.
- 3. FA/CAO, GMC, Udhampur.
- 4. Medical Superintendent Associated Hospital GMC Udhampur for information.

Date: 07-08-2023

ANNEXURE-I

GOVERNMENT MEDICAL COLLEGE UDHAMPUR

Student Profile Form (MBBS Admission- 2023) Applicable for UT Quota Students Only

J&K BOPEE Notifica	tion No: Dated:	& Notification S. No.:
NEET Roll No.:	NEET (State) Rank:	NEET (National) Bank:
Admission Session:	Name of Category (Select	tion): Gender:
Aadhar Card No.: _	Religion:	Mother Tongue:
1. Name of St	udent:	
2. Parentage:		
3. Date of Bir	th: (as per Matric	
4. 12 th Class E	xamination Passed Session/Year:	with Name
5. Name of 12	2 th Class Passing School:	
6. Name of 12	2 th Class Passing Board:	with Roll No.:
7. Marks in 12	2 th Class Examination (Min./Max.):	/
8. Combined	Marks in Physics + Chemistry + Biology	v Subjects (Min./Max.)://////
9. Marks in Er	nglish Subject: (Min./Max.):/_	
10. Whether R	egistered with University of Jammu: (Ye	es / No) if, Yes.
≻ Un	iversity 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: R	s Transaction ID: _	Dated:

Signature of Candidate

Note: Keep a copy of checklist attached with this form

ANNEXURE-II

GOVERNMENT MEDICAL COLLEGE UDHAMPUR

Student Profile Form (MBBS Admission- 2023) 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:		Paste Recent
3. Date of Birth:	(as per Matriculat	
4. 12 th Class Examination	. 12 th Class Examination Passed Session/Year: with Name	
5. Name of 12 th Passing S	chool:	
6. Name of 12 th Class Pas	sing Board:	with Roll No.:
7. Marks in 12 th Class Exa	mination (Min./Max.):	_/
8. Combined Marks in Ph	ysics + Chemistry + Biology Sul	ojects (Min./Max.)://
9. Marks in English Subje	ct: (Min./Max.)://	
10. Whether Registered w	ith University of Jammu: (Yes	/ No) if, Yes.
 University of Ja 	ammu Registration No.:	
11. Permanent Address wi	th Pin Code:	
a. Tehsil:	b. District:	c. State/UT
12. Phone No.:	Alt. No.:	_Email ID:
13. Fee Paid: Rs	Transaction ID:	Dated:

Signature of Candidate

Note: Keep a copy of checklist attached with this form

ANNEXURE-III

GOVERNMENT MEDICAL COLLEGE, UDHAMPUR

Documents required for admission to MBBS 1st year at Govt. Medical College, Udhampur Session 2023-24.

Two sets of documents required one attested and one unattested: -

- 1. Admit Card (Original) of NEET.
- 2. NEET Score Card.
- 3. DOB certificate.
- 4. Provisional Certificate 10+2 (Original).
- 5. Marks certificate 10+2 (Original).
- 6. Transfer Certificate / Migration Certificate (Original).
- 7. Domicile Certificate.
- 8. Category Certificate, if any.
- 9. Character Certificate.
- 10. Discharge/Transfer Certificate, if joined anywhere.
- 11. Medical Fitness Certificate.
- 12. Income certificate of parent from all sources in case of EWS.
- 13. Affidavit regarding abiding rules & regulations of Institution.
- 14. Affidavit regarding Anti-Ragging (Annexure -I and II) (copy attached).
- 15. Affidavit regarding gap period, if required.
- 16.TWO Photographs (Passport size).
- 17. Demand Draft Rs 27060/- in favour of **CHIEF ACCOUNTS OFFICER**, **GOVERNMENT MEDICAL COLLEGE UDHAMPUR** Payable at Udhampur. (Students are requested to write their Names, Parentage, Address, Adhaar No. on the back side of the DD.)
- 18.Adhaar card.
- 19. File Cover/Dak Pad two no.'s.

Principal & Dean Govt Medical College Udhampur

ANNEXURE-VI

AFFIDAVIT FORMAT (TIME GAP)

I,S/o / D/o /

do hereby

R/o

solemnly affirm and declare as under:

- 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 _____2023 at _____ that the averment made in this affidavit are true and correct and nothing has been concealed therein.

Deponent

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