

**GOVT. MEDICAL COLLEGE
JALGAON
Maharashtra State**



**Welcomes
Postgraduate (MD/MS) students joining
this Institute for the academic
year 2024-25**

Contact Number for query:(between 10:00 to 5:00 PM)

Landline Number : 0257- 2222917



रक्तदान जीवनदान



महाराष्ट्र शासन

शासकीय वैद्यकीय महाविद्यालय, जळगाव
GOVERNMENT MEDICAL COLLEGE, JALGAON
(अधिष्ठाता यांचे कार्यालय)



Jilhapeth, Government Hospital Campus, Jalgaon- 425 001, M.S. (INDIA)

Telephone & Fax No. 0257- 2232390

Email- deangmcjalgaon@gmail.com

No.GMCJ/ACAD/PG Admi./2024-25/

/2024

Date: / /2024

DOCUMENT HOLDING CERTIFICATE

This is to certify that Shri/Kum. _____ is admitted for PG Course in subject of MD/MS _____ at this college on / /2024 for the academic year 2024-25. His/her following **ORIGINAL CERTIFICATES** are retained in this College. (Sets to be prepared in the following sequence)

Sr. No	Original Documents Required	Write YES/NO
1	Nationality Certificate OR Valid Passport	
2	Domicile Certificate	
3	Aadhar Card (Photocopy)	
4	SSC (10 th) Passing Certificate (Only if DOB Not Available)	
5	HSC (10+2) Mark sheet & Passing Certificate	
6	1 st , 2 nd , 3 rd & Final Year MBBS Mark sheets	
7	MBBS Degree/ Passing Certificate	
8	Internship Completion Certificate	
9	MCI/MMC Registration Certificate	
10	MCI UG College Recognition Letter	
11	Online Admit Card NEET-PG-2024	
12	Selection Letter (College Allotment Printout)	
13	Online NEET-PG-2024 Mark sheet	
14	Caste Certificate	
15	Caste Validity Certificate/For outside Maharashtra Students(OMS) Letter from magistrate that Respective state does not issue caste validity certificate... <u>COMPULSARY</u>	
16	Non-Creamy Layer Certificate... Valid up to 31/03/2025	
17	College Leaving OR Transfer Certificate	
18	Physically Handicapped Certificate (If applicable from Competent Authority)	
19	Medical Fitness Certificate in prescribed Format	
20	Migration Certificate (For OMS candidates only)	
21	Self Education Gap Certificate (Affidavit on Rs.100/- Bond)	
22	Bond Release Certificate (If Applicable)	
23	Affidavit For Service Bond	
24	Other if Any	
Demand Drafts of Fees as Applicable:-		
Tuition Fees:	D.D.No: Rs.	Dt. / /2024
Other Fees:	D.D.No: Rs.	Dt. / /2024
Admission Receipt Rs.1500/- No.		

DEAN

Govt.Medical College, Jalgaon

To,

Dr. _____ Govt Medical College, Jalgaon



रक्तदान जीवनदान



महाराष्ट्र शासन

शासकीय वैद्यकीय महाविद्यालय, जळगाव
GOVERNMENT MEDICAL COLLEGE, JALGAON
(अधिष्ठाता यांचे कार्यालय)

Jilhapeth, Government Hospital Campus, Jalgaon- 425 001, M.S. (INDIA)

Telephone & Fax No. 0257- 2232390

Email- deangmcjalgaon@gmail.com

SCRUTINY FORM

Sr. No	Original Documents Required	Write down YES/NO
1	Nationality Certificate OR Valid Passport	
2	Domicile Certificate	
3	Aadhar Card (Photocopy)	
4	SSC (10 th) Passing Certificate (Only if DOB Not Available)	
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23	Affidavit For Service Bond	
24	Other if Any	
Demand Drafts of Fees as Applicable:-		
Tuition Fees:	D.D.No: _____ Rs. _____	Dt. / /2024
Other Fees:	D.D.No: _____ Rs. _____	Dt. / /2024
Admission Receipt Rs.1500/- No. _____		

Sign: _____
Verifying Clerk
GMC, Jalgaon.

Sign: _____
Verifying Officer
GMC, Jalgaon

Sign: _____
Professor & Head of Concerned Dept.
GMC, Jalgaon

DEAN
Govt. Medical College, Jalgaon



रक्तदान जीवनदान



महाराष्ट्र शासन

शासकीय वैद्यकीय महाविद्यालय, जळगाव
GOVERNMENT MEDICAL COLLEGE, JALGAON
(अधिष्ठाता यांचे कार्यालय)

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No.GMCJ/ACAD/PG Admi./2024-25/

/2024

Date: / /2024

OFFICE ORDER

**Subject:- Govt. Medical College, Jalgaon
Admission to MD/MS Course for the year 2024-25**

Ref:- PG Seat Allotment Letter No. _____
Date:- / /2024

With reference to above subject, you are hereby provisionally admitted to MD/MS _____ course Through _____ Quota _____ Round on / /2024 at Govt. Medical College, Jalgaon, for the year 2024-25 subject to the following conditions.

You will have to pay prescribed fees (Demands Draft only) as per rules before joining the course.

1. College registration Number 2024/ _____
2. You will have to obtain Eligibility Certificate from the **Maharashtra University Of Health Sciences, Nashik.**
3. Your admission is provisional & Subject to final confirmation from **Maharashtra University Of Health Sciences, Nashik.**
4. You should report to this College as per Notification issued by MCC/State For 2024-25.

DEAN
Govt. Medical College,
Jalgaon

To,

Dr. _____

Through Prof. & Head of concerned Department, Govt. Medical College, Jalgaon.

Copy To:- Prof. & Head of Concerned Department, Govt. Medical College, Jalgaon.

Copy To:- Account Section, Govt. Medical College, Jalgaon for information & necessary action.

FORM NO.

RECEIPT NO.

DATE:

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NEET(PG) – 2024 SML / RANK NO. _____, NEET Marks : _____ (Out of _____)

**Application Form for admission to Post-graduate (Degree / Diploma)
Courses at Govt. Medical College, Jalgaon.**

INSTRUCTIONS

1. Incomplete application form will not be accepted in any circumstances.
2. Two sets of attested photocopies of all certificates to be submitted by the Candidate along with required all original certificates for the admission.
3. As per directives of R.B.I., validity of Demand Draft is only for 03 months hence, Demand Draft as submitted by you to this College for Prescribed Fees, it is sole responsibility of concerned candidate to re-validate the same (*if, validity expires*) in due course of time otherwise, suitable action will be taken against him / her for the same.

Those students are going to Retain the PG seat in this College then, immediately he / she has to submit Demand Draft(s) of prescribed fees i.e. For (MD/MS): Rs.1,38,300/- & Rs.12,500/- in favor of "THE DEAN, GOVERNMENT MEDICAL COLLEGE, JALGAON" along with "Status Retention" Form to this Office for the confirmation of his / her PG seat.

Note : PG In-service student(s) has to pay College Fee Rs. 12,500/-

4. Admitted Candidate should have visit to Websites of DMER, Mumbai www.dmer.org.com , NMC, New Delhi www.mcc.nic.ac.in , and MUHS, Nashik – www.muhs.ac.in time-to-time for new updating, new circulars, notifications etc.
5. Those Candidate(s) admitted for Degree Course should have to submit his / her Title & Synopsis with DD of prescribed fees within six months along with signatures of allotted P.G. Guide and concerned HOD and after successfully completion of the said course in time, he / she should submit his / her Thesis as per rules and regulations laid down by the University time-to-time.

6. Concerned students are hereby directed / instructed to submit his / her any type of application or representation through proper channel i.e. through its; Prof. & HOD of respective dept., application without proper channel will not be entertained.
7. Applicants must specify if any, of his / her original certificate is Bonafide Certificate or DUPLICATE certificate issued by the Competent Authority.
8. Candidate desires to cancel his / her admission after the cutoff date of admission process or admission cancelled due any other reason like; any lapses / abscond /breach of Residency Rules; he / she will have to pay penalty as per rules prescribed in Information NEET-PG Brochure vide Rule No. 21.1 and Rule No. 21.2, 21.3 , 21.4 & 21.5 respectively.
9. All Concerned PG Students have to submit their required all original certificate(s) for the completion of Eligibility to be done by the MUHS, Nashik within 03 (three) months from the date of joining of the said PG course. *What soever reason if, any CERTIFICATE remains for submission then, it will be the sole responsibility of Candidate to complete all the formalities in due time-limit sothat his / her eligibility could be done by MUHS, Nashik [Like ; penalty charged for eligibility purpose by MUHS, Nashik for delay in submission of any original certificate(s) / document(s).]*
10. To avoid penalty of MUHS, Nashik, Enrollment / Eligibility Form with prescribed fee of MUHS has to submit by the concerned candidate, admitted for respective P.G. Course to this Office within 10 days after the cut-off date of University admission (*Form is available on MUHS, Nashik Website*).
11. All post-graduate students should have to complete their course without any absentee in their respective dept(s) during his / her academic session. Due to shortage of course duration / period (prescribed term) i.e. needs minimum attendance of Theory / Practical 80% and above if, any P.G. Student detain from the MUHS exam (Summer / Winter) then, he / she will be fully responsible for the loss of academic term and further consequences arises, if any.
12. Candidate should have to submit his / her Log-book and Post Residency Completion Certificate of Concerned HOD along with MUHS, Nashik Examination Form.
13. Applicant is required to pursue progress of Registration / Eligibility process by diligently observing notifications issued by the Dean as displayed on notice board time-to-time. No individual correspondence will be made for the same.
14. All Original Documents enlisted in the Holding certificate to be **scanned individually & to be submit in a folder**. The folder to be re- named with your complete name And Department. The scan should be in PDF format ONLY and each file **not beyond 400 KB**. **Don't use cam scanner/mobile scan** for scanning. Soft copy submission of Documents submission will be mandatory. (In Pen drive)

“ I have read all above instructions carefully and is abide to complete all formalities for the Eligibility of my admission to this course and if, I fail to do the same within time then, I will be held fully responsible for further consequences arises, if any. “

Jalgaon.
Date: / /2024.

Signature : _____
Name of Student :
Address, Mobile & Ph. No.
and E-mail ID:

9. OTHER INFORMATION :

SR.NO.	INFORMATION TO BE FILLED	FURNISH DETAILS
a.	Date of admission to 1 st MBBS Course	
b.	Whether you have been admitted to MBBS course through All India Entrance Examination or as Govt. of India Nominee or nominee on seat of disputed Border. If yes, furnish details	
c.	Name of Medical College from which graduated.	
d.	Name of the University from which graduated.	
e.	Registration Number with MCI/ Maharashtra Medical Council / Relevant State Medical Council.	
f.	Have you obtain any Post-graduate qualification. If yes, give details.	
g.	State if you are Registered now for any Post-graduate course in any Medical College. If any, give details.	
h.	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.	
i.	Whether you have cancelled admission to any post-graduate course or your admission has been cancelled by the Dean / University. If yes, give details.	

10. Date of starting and completion of Internship _____.

Contd.03/....

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, I do not diligently pursue my post-graduate 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.

I will not participate in any strike as per Residency Rules.

Signature: _____

Name of Applicant: Correspondence Address:

Phone (Res.)/ Mobile _____

and E-mail. _____

Note: Applicants are requested to note that; they must fill relevant information in every column or Para given above. All columns should be filled appropriately otherwise; it will amount to suppression of facts and would be eligible for disciplinary action including rejection of application form.

U N D E R T A K I N G .

I the Undersigned _____ R/o
(Permanent / Address for Correspondence) _____

_____ admitted
for Post graduate course in the subject of _____
through (1st / 2nd & 3rd or Final) _____ round through NEET-PG at Govt. Medical
College, Jalgaon, do hereby take oath as follows ;

1 That, If I got admission in another Medical College, through Common Entrance Examination of Other-state or through AIQPG, I will take necessary prior permission to leave this college within a stipulated period as decided by the Govt. of Maharashtra for the cancellation of admission and I will follow the rules & regulations laid down by the Govt. of Maharashtra for the same.

2. That, I will be vigilant about the cut-off date declared by the Govt. of Maharashtra as per the directives of Hon'ble Supreme Court of India as well as by the Maharashtra University of Health Sciences, Nashik for the Post-graduate admissions time to time.

3. If, I want to cancel my present admission of this institution, I will cancel it before cut-off date declared by MUHS, Nashik and Govt. of Maharashtra and in any case I will not cancel my admission in such a way that, my seat will go lapse in any way and If I do so, I will be liable for penalty as per rules and regulations laid down by govt. of Maharashtra and will pay full requisite fees i.e. Tuition as well as College fees with the penalty towards the cancellation of respective course (Degree / Diploma) from your College.

Signature _

Name & Address

with Resident Phone

Nos. & Mobile No.

SERVICE BOND.

Date:

[AFFIDAVIT TO BE EXECUTED ON RS.100/- STAMP PAPER]

I, _____ (Name)

Admitted to _____ Post-graduate Course at
Government Medical College in the year 2024-25 do solemnly affirm and admit that, I shall be
Serving the Government of Maharashtra or Local Self Government or Defense Services for a
period of ONE year, failing which, I will pay to Government of Maharashtra a sum of
Rs.50,00,000/- (In words Rs. Fifty lacs only) for the default.

Signature _____

Name & Address with-

Resident Phone Nos. -

& Mobile No.-

MEDICAL FITNESS

A candidate must be medically fit to undergo the professional course applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed proforma, as given below on a Letterhead :

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Mr./Ms who is desirous of admission to Health Science Courses.

He/she has not given any personal history of any disease incapacitating him/her to undergo the professional course. Also, on clinical examination it has been found that he/she is medically fit to undergo the professional course.

Certified that he/she fulfills the following criteria.

- (1) Absence of any incapacitating and /or progressive systemic disease/disorder/condition,
- (2) Absence of any disability of upper limb/s.
- (3) Absence of any major visual/ auditory disability.
- (4) Absence of psychosis/neurosis/mental retardation,
- (5) Ability to maintain erect posture,
- (6) Reasonable manual dexterity.

Though, following deviations have been revealed, in my opinion, these are not impediments to pursue a career as a Medical / Dental / Ayurved / Unani / Occupational Therapy / Physiotherapy / Audiology & Speech, Language Pathology / Prosthetics & Orthotics / BSc Nursing. **(Strike, which is not applicable):**

1.
2.
3.

Address of the Registered Medical Practitioner

Signature

Name

Registration No.

Seal of Registered Medical Practitioner

Date :

**DETAILS OF FEES TO BE PAID BY POST GRADUATE STUDENTS AT THE TIME OF ADMISSION TO
GOVT. MEDICAL COLLEGE, JALGAON FOR THE YEAR 2024-25.**

SR. NO.	PARTICULARS	FOR OPEN / RESERVE
01.	Admission Fee (to be paid by Cash) (Non Refundable)	Rs.1500=00
02.	Tuition Fees	Rs.1,38,300=00
03.	College Development Charges- Annual	Rs.5000=00
04.	Library Fees – Annual	Rs.1000=00
05.	Gymkhana Fees – Annual	Rs.500=00
06.	College Caution Money – Security Deposit	Rs.4000=00
07.	Library – Deposit	Rs.2000=00
	FOR All India / Maharashtra Quota : FOR Open / Reserve : FOR MD/MS : 1) Rs. 1,38,300=00 2) Rs. 12,500=00 Note : PG In-service Candidate(s) has to pay College Fee Rs.12500/- only. Two separate D.D. should be prepared as above in favor of; " THE DEAN, GOVERNMENT MEDICAL COLLEGE, JALGAON. "	

All types of Fees are to be paid at the College Cash Counter, G.M.C., Jalgaon, from 11.00 a.m. to 01.30 p.m. and from 02.30 p.m. to 04.00 p.m.

University Enrollment and Eligibility Fees are to be paid later on as per the Instructions received from MUHS, Nashik or for the same Please watch website of WWW.MUHS.AC.IN.

For Bonafide Certificate, students has to pay Rs.100/-at Cash Counter, GMC, Jalgaon, from 11.00 a.m. to 01.30 p.m. and from 02.30 p.m. to 04.00 p.m.

JOINT UNDERTAKING

(For all newly admitted students)

Name of the Student : _____

Roll No.: _____

Govt. Medical College, Jalgaon

We have read Maharashtra Provision of **Anti Ragging act 1999 (Maharashtra XXI III of 1999)** and relevant instructions against ragging. We are well aware of punishment under this act.

If my son / daughter / myself have been found guilty, he shall be punished for appropriate action under the act including imprisonment for a term which may extend to two years with **fine upto Rs 10,000/-** (Rs ten thousand) or dismissal from the institute and suspension of student for various periods during inquiry period.

I am also aware of the fact that it will be mandatory for the institute to file First Information Report (FIR) to Local Police Authorities in case Victim of ragging or his / her parents / Guardian is not satisfied with the action taken by the Head of the institution or where head of the institution is of the opinion that the incident ought to be reported.

Place: _____

Name & Signature of Student

Date : _____

Name & Signature of Parent

Signature of
Member Secretary
Anti Ragging Committee

Signature of
Vice Dean, GMC, Jalgaon

Note: Student shall submit this undertaking on Rs.100/- stamp paper at the earliest