

**OFFICE OF THE DEAN
INDIRA GANDHI GOVT. MEDICAL COLLEGE, NAGPUR.**

AIEE POST GRADUATE ADMISSION – YEAR 2017-18

(FILL ALL INFORMATION IN CAPITAL LETTERS)

ATTACH
STUDENT
LATEST
PHOTO

1. NAME OF STUDENT :-
(As per Last Exam Marksheet/Degree)
2. ADMISSION TO MD/MS/ :-
DIPLOMA IN
3. NATIONALITY :-
4. SEX :- MALE / FEMALE :- Blood Group :-.....
5. CATEGORY :-
6. CASTE :-
7. RELIGION :-
8. QUOTA :- PGM-CET/ AIEE
9. DATE OF BIRTH :-
10. AIEE MERIT NO./SML No. :-
(PGM)
11. LAST EXAM PASSED :-
12. NAME OF COLLEGE FROM:-
WHICH MBBS PASSED
.....
13. NAME OF UNIVERSITY :-
LAST ATTENDED
14. MONTH / YEAR OF FINAL :-
MBBS PASSING
15. INTERNSHIP TRAINING :- to
- PERIOD

16. MMC/MCI Regn. No :-

17. AIEE/PGM-CET MARKS :- MARK OUT OF :-

PERCENTAGE :-% MONTH / YEAR :-.....

GRADE / DIVISION :-

18. PERMANENT ADDRESS :-

OF STUDENT

.....Pin.....

19. STUDENT MOBILE NO :-

20. PERMANENT ADDRESS :-

OF PARENTS

.....

21. PARENTS MOBILE NO. & :-

PHONE NO.

DATE:- / /2017

SIGNATURE OF STUDENT

SIGNATURE OF ACADEMIC
SECTION

SIGNATURE
OFFICER IN-CHARGE

POSTGRADUATE ADMISSION 2017-18

List Of Original Certificate And Two Attested Xerox Copies
Arrange in Following Order Into a File

- 1) Nationality Certificate
- 2) Selection Letter / Allotment Letter (For AIEE)
- 3) Admit Card, Rank Letter
- 4) AIEE Entrance Exam Marksheet
- 5) MBBS Passing Certificate / MBBS Degree Certificate
- 6) Internship Completion Certificate
- 7) MMC/ MCI Registration Certificate
- 8) Caste Certificate (if Applicable)
- 9) Caste Validity Certificate (if Applicable)
- 10) Non Creamy Layer Certificate (if Applicable)
- 11) College Living Certificate (LC/TC)
- 12) Attempt Certificate
- 13) Migration Certificate (if Applicable)
- 14) Self Educational Gap Affidavit (if Applicable)
- 15) Medical Fitness Certificate
- 16) First to Final MBBS Marksheet
- 17) Relieving Letter (For AIEE) (For IInd & IIIrd Round)
- 18) SSC/10th Passing Certificate for date of Birth

NOTE : Student should keep themselves Xerox copies of all above mentioned certificates, no original or Xerox copy of certificates will be issued after admission process completes.

FEE SCHEDULE OF POSTGRADUATE ADMISSION

YEAR-2017-18

ALL INDIA Student Only (AIEE Student)

- | | | |
|----|-----------------------|---------------|
| 1. | Tuition Fee | - Rs. 70800/- |
| 2. | <u>Library</u> | - Rs. 1000/- |

TOTAL - Rs. 71800/-

**D.D. In favor of 'Administrative Officer, I.G.G.M.C.
Nagpur.'**

- | | | |
|----|----------------------------------|--------------|
| 1. | Development Fee | - Rs. 5000/- |
| 2. | Hostel Fee | - Rs. 4000/- |
| 3. | Residency Deposit | - Rs. 4000/- |
| 4. | Library Deposit | - Rs. 2000/- |
| 5. | Gymkhana Fee | - Rs. 500/- |
| 6. | <u>Laboratory Deposit</u> | - Rs. 100/- |

TOTAL - Rs. 15600/-

D.D. In favor of 'Dean, I.G.G.M.C. Nagpur.'

7.

- | | | | |
|----|--------------------------------|--------------|-----------|
| 1. | Admission Fee | - Rs. 1500/- | (By Cash) |
| 2. | Student Association | - Rs. 450/- | (By Cash) |
| 3. | MUHS Development Fee | - Rs. 150/- | (By Cash) |
| 4. | <u>MH-CET Insurance</u> | - Rs. 650/- | (By Cash) |
| | TOTAL | - Rs. 2750/- | (By Cash) |

NOTE:-Reserve Category Students Admitting Through AIEE but Domicile of Maharashtra are not Required to pay Tuition Fee.

OFFICE OF THE DEAN
INDIRA GANDHI GOVT. MEDICAL COLLEGE, NAGPUR

AIEE -2017

Date : / /2017

Name of Student :

AIEE Merit No. Category

Dt. of Birth

Subject : MD/ MS/ Diploma in

Submitted D.D.

- | | | | |
|-------------|----------|----------|----------------|
| 1) Rs. | No. | Dt. | Bank Name..... |
| 2) Rs. | No. | Dt. | Bank Name..... |
| 3) Rs. | No. | Dt. | Bank Name..... |

Receipt of original Certificates

- 1) Nationality Certificate
- 2) PGM-CET / AIEE Marksheet
- 3) Selection Letter / Allotment Letter (For AIEE)
- 4) Admit Card, Rank Letter
- 5) MBBS Passing Certificate / MBBS Degree Certificate
- 6) Internship Completion Certificate
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- 18) SSC/10th Passing Certificate for date of Birth

(Received D.D. & Original Document)

Clerk,
Student Section

IGGMC, Nagpur

1) Admission :- 1500/-
2) MUHS Dev :- 150/-
3) Insurance :- 650/-
4) SAIGMC :- 450/-
Total :- 2750/-

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