#### Indira Gandhi Government Medical College Nagpur -18

Phone No 0712-2725274,(P)2770929 Fax No (0712)-2728028(College)
PBX-0712-2728621 to 27 E-mail: iggmcnagpuradmission@gmail.com

## INSTRUCTIONS TO THE STUDENTS REGARDING ONLINE POSTGRADUATE ADMISSION 2020-21 (PRESENTLY TOBE FOLLOWED FOR ALL INDIA QUOTA AND STATE QUOTA)

# All admissions made online will be deemed provisional, to be confirmed subjects to verification of documents at the time of physical joining.

All the students allotted PG seat at Indira Gandhi Govt. Medical College, Nagpur should follow the instructions given below

- 1. All the correspondence must be done by email on <a href="mailto:iggmcnagpuradmission@gmail.com">iggmcnagpuradmission@gmail.com</a> and Contact if required on mobile no. to ShriNitinBharsakal 9075992058.
- 2. Student must download the Admission form from College website iggmc.org.
- 3. After complete filling and signing of the admission form and receipt of certificate form. Scan the admission form and receipt of certificate.
- 4. Send Scan copy of following documents to <a href="mailto:iggmcnagpuradmission@gmail.com">iggmcnagpuradmission@gmail.com</a>
  - a. Selection Letter / Allotment Letter ( For AIEE& STATE)
  - b. Admission form and receipt of certificate (pdf)
  - c. Scan the entire requisite document as per the list given below in JPG image (below 400kb)
  - 5. After getting confirmation of admission mail on your personal email, please deposit fees by online transaction in the account of 'Administrative Officer, I.G.G.M.C.

Nagpur.Account number:- 0354000100723111

IFSC Code:-PUNB0035400.

Name of Bank: Punjab National Bank Kingsway, Nagpur

- 5. On cancellation of admission Rs 1500 as Admission fees will be deducted and rest of the money will be returned back in the same account from which the fees was deposited
- 6. Any changes/ amendments in the admission procedures adopted will be notified on the official website www.iggmc.org

All admissions made online will be deemed provisional, to be confirmed subjects to verification of documents at the time of physical joining.

## 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& STATE)
- 3) Admit Card, Rank Latter
- 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& STATE) (For IInd&IIIrd Round)
- 18) SSC/10<sup>th</sup> Passing Certificate for date of Birth
- 19) Aadhar Card Xerox
- 20) Bond Release Certificate
- 21) Disability Certificate (if Applicable)
- 22) Undertaking (hand written & Self Attested)
- 23) Bond Undertaking(Submit after cut off date on 500/- Rs. Stamp Paper)

NOTE: 1) 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.

2) Student Should upload scan copy of all Original certificate in J.P.E.G. image( below 400kb)

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

#### **POST GRADUATE ADMISSION – YEAR 2020-21**

(FILL ALL INFORMATION IN CAPITAL LETTERS)

ATTACH STUDENT LATEST PHOTO

1.	NAME OF STUDENT (As per Last Exam Markshee		e)
	Name of Student in Marathi	:-	Mother Name
2.	ADMIISSION TO MD/MS/	:-	
3.	NATIONALITY	:-	
4.	SEX	:-	MALE / FEMALE :- Blood Group :
5.	CATEGORY	:-	
6.	CASTE	:-	
7.	RELIGION	:-	
8.	QUOTA	:-	STATE / ALL INDIA / GOI
9.	DATE OF BIRTH	:-	
10.	ALL INDIA RANK	:-	
11.	LAST EXAM PASSED	:-	
12.	NAME OF COLLEGE FROM	M:-	
	WHICH MBBS PASSED		
13.	NAME OF UNIVERSITY LAST ATTENDED	:-	
14.	MONTH / YEAR OF FINAL MBBS PASSING	<b>_:-</b>	

15. INTERNSHIP TR PERIOD	RAINING :-		to	
16. MMC/MCI REGN	N. No	:		
17. AIEE/NEET MAI PERCENTAGE		%	MARK OUT OF :  MONTH / YEAR :-	
18. PERMANENT A	DDRESS :-			
19. STUDENT MOB	ILE NO :-			
20. PERMANENT A	DDRESS :-			
21. PARENTS MOBI PHONE NO.	ILE NO. & :-			
22. STUDENT EMA	IL ID :-			
23. STUDENT AADI	HAR NO. :-			
24. STUDENT VOTE	ER ID NO. :-			
DATE:- / /20	020		SIGNATURE (	OF STUDENT

SIGNATURE OF ACADEMIC SECTION

SIGNATURE OFFICER IN-CHARGE **Receipt of original Certificates** 

## OFFICE OF THE DEAN INDIRA GANDHIGOVT. MEDICAL COLLEGE, NAGPUR

NEET-PO	G-2020 Date: / /2020		
Name of Student :			
S.M.L. N	ToDt. of Birth		
Subject: MD/ MS/AIR			
Subject	: MD/ MS/AIR	• • • • • • • • • • • • • • • • • • • •	
Subject Sr. No.	: MD/ MS/AIR	Yes ( ) / NO ()	
<b>Sr. No.</b> 1	Certificate		
<b>Sr. No.</b>	Certificate  Nationality Certificate/ Birth Certificate		

3	Admit Card, Rank Latter	
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 Leaving 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/10 <sup>th</sup> Passing Certificate for date of Birth	
19	HSC/12 <sup>th</sup> Passing Certificate/Marksheet	
20	Aadhar Card Xerox	
21	Bond Release Certificate	
22	Disability Certificate (if Applicable)	
23	Undertaking ( hand written & Self Attested )	

Sign of student Scrutiny officer Nodal officer Vice Dean

### FEE SCHEDULE OF POSTGRADUATE ADMISSION YEAR-2020-21

Tobe submitted only after confirmation given by college via your email

	1. Tution Fee - 1	Rs. 94400/-
	2. Library - l	Rs. 1000/
	TOTAL - I	Rs. 95400/-
1.	Development Fee - F	Rs. 5000/-
2.	Hostel Fee - F	Rs. 4000/-
3.	Residency Deposit - F	Rs. 4000/-
4.	Library Deposit - F	Rs. 2000/-
<b>5.</b>	Gymkhana Fee - F	Rs. 500/-
6.	<b>Laboratory Deposit</b> - F	Rs. 100/-
	TOTAL - R	s. 15600/-
1.	Admission Fee	- Rs. 1500/- (Non Refundable)
2.	<b>Student Association</b>	- Rs. 450/-
3.	<b>MUHS Development Fee</b>	- Rs. 150/-
4.	MH-CET Insurance	- Rs. 650/-
	TOTAL	- Rs. 2750/-

### Grand Total fees Rs. 1,13,750/-

Online paymentshould be made in account of 'Administrative Officer, I.G.G.M.C. Nagpur.'

Account number: - 0354000100723111

IFSC Code:-PUNB0035400.

Name of Bank: Punjab National Bank Kingsway, Nagpur On cancellation of Rs 1500 as Admission fees will be deducted.

(Note: Submit After Cut-up Date)

#### on Rs.500/- Stamp Paper

#### **Undertaking / Affidavit**

Name of Student	:	
Permanent Address	:	
Course	: M.D./ M.S./ Diploma in	
Admission Year	: 2020-21	
I the undersigned postgra	duate student of Indira Gandhi Govt. Medical College,	
Nagpur hereby submitting an undertaking that I will serve the Government of Maharashtra /		
Corporation / Defence service for	a period of ONE YEARS, after completion of Post	
Graduate Course failing which I w	vill pay Rs. 50,00,000/- (Rs. Fifty Lac Only) for the	
default as per rule.		
Additional I will complet	e 2/3 year residency tenure at this college, if I fail to	
complete my residency tenure I w	vill pay Rs. 10,00,000/- (Rs. Ten Lacs Only) for the	
default (i.e. non completion of junior residency tenure) and I will payRs. 10,00,000/- (Rs.		
Ten Lacs only) towards the lapse of Postgraduate seat. As per rules mentioned in the		
PGM-CET-2018 information brochure.		
Date:		
Place:		

(Name and Signature of Student)

(Hand Written & Self Attested Undertaking	Undertaking	
Name of Student	:	
Permanent Address	:	
Course	: M.D./ M.S./ Diploma in	
Admission Year	: 2020-21	
I hereby declare that all the information given/uploaded by me in the application is factually correct and true to the best of my knowledge and belief. I undertake that in the event of any information being found false or incorrect at any stage, my candidature is liable to be cancelled and I will have no claim on the seat allotted to me by the competent authority.		

(Name and Signature of Student)

Date:

Place: