

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

POST GRADUATE ADMISSOIN – YEAR 2017-18

(FILL ALL INFORMATION IN CAPITAL LETTERS)

ATTACH
STUDENT
LATEST
PHOTO

1. NAME OF STUDENT :-
(As per Last Exam Marksheet/Degree)
2. ADMIISION 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-CETMARKS :- MARK OUT OF :-

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

GRADE / DIVISION :-

18. PERMANENT ADDRESS :-

OF STUDENT

.....PIN.....

19. STUDENT MOBILE NO :-

20. PERMANENT ADDRESS :-

OF PARENTS

.....PIN.....

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/ PGM-CET 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)
- 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

- | | | |
|----|-----------------------|---------------------------------------|
| 1. | Tution Fee | - Rs. 70800/- (Only Open/UR Category) |
| 2. | <u>Library</u> | - Rs. 1000/- |

TOTAL - Rs. 71800/-

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

(Note :- Tution fee is exempt to reserve Category student)

- | | | |
|----|----------------------------------|--------------|
| 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)

on Rs.100/- Stamp Paper

Undertaking / Affidavit

Name of Student :

Permanent Address :

Course : M.D./ M.S./ Diploma in

Admission Year : 2017-18

I the undersigned postgraduate 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 will pay **Rs. 50,00,000/- (Rs. Fifty Lac Only)** for the default as per rule.

Additional I will complete 2/3 year residency tenure at this college, if I fail to complete my residency tenure I will pay **Rs. 10,00,000/- (Rs. Ten Lacs Only)** for the default (i.e. non completion of junior residency tenure) and I will pay **Rs. 10,00,000/- (Rs. Ten Lacs only)** towards the lapse of Postgraduate seat. As per rules mentioned in the PGM-CET-2017 information brochure.

Date :
Place :

(Name and Signature of Student)

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

AIEE/PGM-CET-2017

Date : /05/2017

Name of Student :

S.M.L. No./AIEE Merit No. Category

Dt. of Birth

Subject : MD/ MS/ Diploma in

Receipt of original Certificates

- 1) Nationality Certificate
- 2) PGM-CET Marksheet
- 3) Selection Letter
- 4) Admit Card
- 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) SSC/10th Passing Certificate for date of Birth

(Received D.D. & Original Document)

Clerk,
Student Section
IGGMC, Nagpur

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

AIEE -2017

Date : / /2017

Name of Student :

AIEE/PGM-CET 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
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