

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare) भारत सरकार/ Government of India

### REGISTRAR OFFICE, ACADEMIC SECTION

### **NOTICE REGARDING MBBS ADMISSION**

AIIMS Deoghar would conduct the MBBS admission for the year 2021 through the NEET UG Examination following the guidelines of the online counseling process by the Medical Counselling Committee. The selected candidates should report to the institute as per the following schedule (subject to modifications as per MCC notification):

### \* Admission is closed on Sundays and Holidays.

Round	Date (Barring Sundays/ Holidays)	Time of reporting	Place of reporting
First 2 <sup>nd</sup> February 2022 to 5 <sup>th</sup> February and		9 AM to 5 PM on	Office of Medical
	7 <sup>th</sup> February, 2022	Weekdays	Superintendent OPD Building
Second	To be later notified by MCC	(Lunch break	AIIMS Devipur Permanent
Mop- Up	To be later notified by MCC	1 PM – 2 PM)	Campus and then proceed to
Online Stray	To be later notified by MCC		Auditorium PTI Temporary
Vacancy	-	9 AM to 1 PM on	Campus Daburgram Jasidih
		Saturday	AIIMS Deoghar Jharkhand.

The candidates are advised to go through go through the NEET UG 2021 prospectus and MCC website carefully regarding the documents necessary for reporting the Institute.

No candidates would be allowed for reporting without original certificate and any other requirements as prescribed by the Medical Counselling Committee. The Candidates are also advised to bring one set of self-attested Photostat copies of all original certificates/ Documents.

Note: Candidates and accompanying Parents/ Legal Guardians are notified to comply with using Proper Face Mask covering Both Nostrils and Mouth and to maintain Social Distancing during the entire Admission Process of their Wards inside the Institute premises.

**Important:** Please note that the Institute will not reimburse any expenditure incurred by any student because of travel and maintenance in connection with their joining in Institute. It is mandatory for students to stay in the hostel during the tenure of their course.

### **Enquiries and Clarifications regarding admission:**

**Contact No.: (9AM-5PM Monday to Saturday)** 

Mr. Kumar Keshab, LDC Registrar Office- 9576115293/ 7061918177 for Assistance in AIIMS PTI Jasidih (Temporary Campus).

Mr. Rajan Kumar, LDC, MS Office OPD Building (Permanent Campus) -9990205265 for Assistance in AIIMS Devipur (Permanent Campus)

For regular updates <a href="https://www.aiimsdeoghar.edu.in/">https://www.aiimsdeoghar.edu.in/</a> (Running Column in Red Line in website)

\*Nodal Officer MBBS Admission AIIMS Deoghar - Dr. Arpan Haldar, Registrar AIIMS Deoghar (Email: registrar@aiimsdeoghar.edu.in) - Regarding Grievance regarding Admission Process (if any)



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### REGISTRAR OFFICE, ACADEMIC SECTION

### **INSTRUCTIONS FOR CANDIDATES FOR MBBS ADMISSION BATCH 2021**

- Admission for MBBS 2021 Batch 1<sup>st</sup> Round of Counseling at MCC will start from 2<sup>nd</sup> Feb 2022 from 9AM till 7<sup>th</sup> Feb 2022 up to 5 PM. The admission will remain closed on 06-02-2022 (Sunday). Admission will remain open on 05-02-2022 (Saturday) from 9AM to 1PM.
- Candidates selected are advised to see the Forms/Documents/Drafts in the Notice Section of AIIMS Deoghar Website. Candidates are to attend physically for the admission process. The Enclosed Documents has been put up in the Notice Section Student Column of the AIIMS Deoghar Website. Candidates who are COVID positive as on 1st Feb 2022 or found positive on the date of TRUNAT Testing in OPD AIIMS Deoghar are to send E-mail request to Registrar AIIMS Deoghar with Authorization Letter for participating in document verification process at AIIMS Deoghar (Draft Enclosed) to their 1st Degree Relatives/ Parents/ Legal Guardians who are reporting at AIIMS Deoghar along with all the original documents, Affidavits, DD mentioned in the checklist and one set of self-attested duly signed copies of each originals by the candidate. The 1st Degree Relatives/ Parents/ Legal Guardians has to carry negative COVID Report along with their Aadhar Card at the time of reporting AIIMS Deoghar. E-Mail request of such candidates are accepted subject to approval by Executive Director AIIMS Deoghar and necessary reply will be given at the earliest.
- Candidates for MBBS Admission 2021 Batch are required to bring along with them the original documents as in the Checklist of MBBS 2021 Admission along with one xerox of self-attested documents in sequential order as in the Checklist.
- Candidates are advised to download and fill up all the enclosed forms of MBBS Admission which will ensure the admission process hassle free.
- No accommodation will be provided because of the current pandemic situation. The Circular regarding classes will be issued in due course of time.
- Admission process may spill over to the next day and candidates are required to do the needful before their arrival at Deoghar. They are also advised to come before the last date of admission i.e., 04.02.2022.

### Sequence of Admission (Annexures I to Annexure III)-

- 1. Report at OPD Building AIIMS Devipur Permanent Campus at 9AM for TRUNAT Testing of Candidate and Parent/ Legal Guardian and then go to the Office of Medical Superintendent AIIMS Devipur Permanent Campus at 9AM for Medical Examination with Medical Examination Format of AIIMS Deoghar available in Institute website.
- 2. Do the Three Demand Drafts as mentioned in the Checklist along with the Four Notarized Affidavit Annexures I, II, III, IV as per Format of the Affidavit available in AIIMS Deoghar website.
- 3. Take the AIIMS Deoghar College Bus available at OPD Area AIIMS Deoghar Devipur Permanent Campus which will depart at 11 AM and come to Auditorium Panchayat Training Institute Daburgram Jasidih Deoghar (AIIMS Deoghar Temporary Campus) for completion of Admission Process.
- 4. Complete the process of Admission, Take Computer Generated Provisional Allotment Letter duly signed by Registrar & Executive Director, Original Document Submission Receipt and Fee Receipts after completion of Admission process.
- 5. Visit the Hostel for completion of the Hostel Allotment process after Completion of the Admission and also visit the Mess Facility in Ground Floor Guest House PTI Daburgram Jasidih Deoghar before Leaving Deoghar (Hostel Application Form enclosed)
- 6. Fee Structure of AIIMS Deoghar is as per Annexure 9 [Scholarships can be applied by eligible students in various Schemes in National Scholarship Portal subject to submission of applications in prescribed Performa (Undertakings and Declarations in **Annexures a to Annexures f**) and subsequent verification by Institute Nodal Officer for NSP-Registrar]



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### MBBS ADMISSION-2021 Batch (CHECKLIST)

- 1. Medical Examination done from Standing Medical Board in the Performa enclosed.
- 2. Current Passport Size Photographs (Front facing) (Min 5)
- 3. All Original Documents and self-attested Xerox Copies mentioned as-
- a) Class 10 Mark Sheet
- b) Class 10 Passing Certificate
- c) Class 12 Mark Sheet
- d) Class 12 Passing Certificate
- e) Migration Certificate issued by University/ Board last attended
- f) Transfer Certificate issued by School/ College last attended
- 4. Registration cum Confirmation sheet (Provided by NEET)
- 5. Admit Card (Provided by NEET)
- 6. Rank Letter (Provided by NEET)
- 7. Allotment Letter (Provided by NEET)
- 8. Relieving Letter In Original from earlier Institutions where allotted and reported. (If applicable)
- 9. Caste Certificate- Govt. of India Format attached (in case of SC/ST/OBC/EWS Candidates) issued by competent authority for admission in Central Govt. College/Institute. The OBC certificates issued from 1<sup>st</sup> April, 2020 (inclusive) and start of reporting for Round I of MBBS counselling (as per Medical Counselling Committee for MBBS admission) will be considered valid for admission for NEET (UG) 2021 as per minutes of meeting held by MCC, DCHS on 23-09-2021.
- 10. **Disability (PwBD Certificate)** (wherever required) by a duly constituted and authorized Medical Board from Centers identified as per MCC.
- 11. Admission fees: Rs 5,856 (Demand Draft/NEFT in favour of "All India Institute of Medical Sciences DEO" payable at AIIMS Patna) [Account No. 579310110009737 IFSC Code: BKID0005793]
- 12. Mess fees: Rs 10,500 (Demand Draft/NEFT in favour of "Mess Account AIIMS Deoghar" payable at Deoghar) [Account No: 39793052571 IFSC Code: SBIN0000064]
- 13. Hostel fees: Rs 1,000 (Demand Draft/ NEFT in favour of "Student Welfare Account AIIMS Deoghar" payable at Deoghar) [Account No. 39830735409 IFSC Code: SBIN0000064]
- 14. **Signed Notarized Affidavit regarding Gap Certificate** by parent and student (soft copy is available at AIIMS Deoghar websites)
- 15. Undertakings and Declarations Annexure A to Annexure J (copy is available at AIIMS Deoghar websites)
- 16. **Signed Notarized Affidavit regarding anti-ragging** by parent and student (soft copy is available at AIIMS Deoghar websites)
- 17. Aadhar Card and Domicile Certificate of Candidate; Aadhar Card and PAN Card of Parent.
- 18. Annexures 1 to Annexure 8 Draft Formats of MCC.

**Note:** Declaration/ Undertaking not signed (Thumb Impression where applicable) by Candidate and Parent will be rejected. False Information/Suppression of Facts in declaration/ Undertaking / Documents may lead to cancellation of Admission. Please write your Name. Mobile No., All India Rank and E-mail ID (In Capital Letters) at the reverse of the Bank Drafts.



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### REGISTRAR OFFICE, ACADEMIC SECTION

### ELIGIBILITY CRITERIA FOR MBBS ADMISSION IN AIIMS DEOGHAR

### 1. <u>CATEGORY-</u>

### A. CRITERIA FOR OTHER BACKWARD CLASSES (NON-CREAMY LAYER) [OBC]

Reservation for OBC (Non-Creamy Layer) shall be according to the rules of the Government of India. Applicants are required to ensure that he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of India, Department of Personnel & Training O.M. No. 36012/22/93-Estt. (SCT) dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt. (Res.) dated 09/03/2004 or the latest notification of the Government of India (i.e., Central list). A format is provided at the end of the Prospectus. The OBC certificates issued from 1st April, 2020 (inclusive) and start of reporting of Round-1 of MBBS counselling schedule to be notified by (Medical Counselling Committee for MBBS admission) will be considered valid. \*

### B. CRITERIA FOR SCHEDULED CASTE / SCHEDULED TRIBE (SC /ST)

Reservation for SC/ST candidates will be according to the rules of Government of India. Applicants will be required to produce the necessary certificate in the format provided. During counseling the certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated the 28.1.1952, as revised in Dept. of Per-& A.R. letter No. 36012/6/76-Est. (S.CT), dated the 29.10.1977, to be produced by candidate belonging to a Scheduled Casteor a Scheduled Tribe in support of his/her claim.

### C. CRITERIA FOR PERSONS WITH BENCHMARKDISABILITY (PWBD)

In accordance with the provisions of the Rights of Persons with Disabilities Act, 2016, 5% seats of the annual sanctioned intake capacity shall be filled up by candidates with benchmark disabilities, based on the merit list of Entrance Examination 2021. For this purpose, the Specified Disability contained in the Schedule to the Rights of Persons with Disabilities Act, 2016. The candidate must possess a valid document certifying his/her physical disability. The disability certificateshould be certified by a duly constituted and authorized Medical Board of the State or Central Govt. Hospitals/Institutions. All PWBD candidates shall be evaluated by a Medical Board of the Institute to determine eligibility.

### D. CRITERIA FOR ECONOMICALY WEAKER SECTION (EWS)

Reservation for EWS shall be according to the rules of the Government of India. Applicants will be required to produce the necessary certificate in theformat provided at the end of the prospectus in support of his/her claim. The EWS certificates issued from 1<sup>st</sup> April, 2020 (inclusive) and start of reporting of Round-1 of MBBS counselling schedule to be notified by (Medical Counselling Committee for MBBS admission) will be considered valid. \*

As per minutes of meeting held by MCC, DGHS on 23.09.2021

### 2. AGE-

• Should have attained or will attain the age of 17 (seventeen) years as on the 31<sup>st</sup> of December of the year of admission (2021). *Candidates born on or after 1st January*, 2004 are NOT eligible to apply.

### 3. ESSENTIAL ACADEMIC QUALIFICATION-

• Candidate Should have passed the 12<sup>th</sup> Class under the 10+2 Scheme/ Senior *Sch*ool Certificate Examination (CBSE) or Intermediate Science (I.Sc.) or an equivalent Examination of a recognized University/ Board of any Indian State with ENGLISH, PHYSICS, CHEMISTRY and BIOLOGY as



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subject. The candidates who have passed 10+2 level with Biology as an additional subject will also be eligible for MBBS Entrance Examination (as per Hon'ble High Court Order No.2341/-W/DHC/WRITS/D-1/2019 dated 24/09/2019 in the Writ Petition (C) No. 6773/2019)

- Candidates who have appeared or are appearing at the qualifying Examination with English, Physics, Chemistry and Biology as main subject and expect to pass the Examination with required percentage of marks are also eligible to apply and appear in the Competitive Entrance Examination. However, their candidature will be considered only if they provide documentary evidence of having passed the qualifying Examination with the required subjects and percentage of marks.
- If the institute has to consider an examination of an Indian university or of a foreign/university to be equivalent to the 12<sup>th</sup> class under 10+2 scheme/intermediate science examination, the candidates shall have to produce a certificate from the concerned Indian university/Association of Indian Universities to the effect that the examination passed by him/her is considered to be equivalent to the 12<sup>th</sup> class under 10+2 scheme/intermediate science examination.

**Note:** The Essential Academic Qualifications for AIIMS are different from those prescribed by MCC for other Medical Colleges (Note: Page 17 of NEET (UG) 2021 Information Bulletin and minutes of meeting of MCC held on 23.09.2021)

### 4. MINIMUM MARKS-

- The **minimum aggregate** of the marks in ENGLISH, PHYSICS, CHEMISTRY and BIOLOGY obtained in the qualifying examination required for appearing in this examination are:
- General and OBC candidates: 60% SC/ST candidates: 50% & PWBD candidates: 45%
- Those with CGPA grades only will have to apply the conversion factor in the application form. The conversion factor should be as approved by their respective examination board.

Note: The Minimal Marks in essential qualification for AIIMS are different from those prescribed by MCC for other Medical Colleges (Note: Page 17 of NEET (UG) 2021 Information Bulletin and minutes of meeting of MCC held on 23.09.2021)

### BREAK UP OFADMISSION TUITION FEES Rs 5856-

Sl. No.	ACADEMIC & OTHER FEES	Amount in Rs	HOSTEL & OTHER FEES	Amount in Rs
1	Registration Fee	25.00	Hostel Rent*	990.00
2	Caution Money	100.00	Gymkhana Fee	220.00
3	Tuition Fee	1350.00	Pot Fund	1320.00
4	Laboratory Fee	90.00	Electricity Charges	198.00
5	Student Union Fee	63.00	Mess Security (Refundable)	500.00
6			Hostel Security (Refundable)	1000.00
	TOTAL	1628.00	TOTAL	4228.00
			5856.00	

- OTHER FEES DEPOSITED AT THE TIME OF ADMISSION-
- 1. MESS FEES= Rs 10,500/- (Rs 7000 SECURITY DEPOSIT REFUNDABLE + 3500/- FOOD CHARGES)
- 2. HOSTEL CAUTION FEES= Rs 1000/- REFUNDABLE



## REGISTRAR OFFICE, ACADEMIC SECTION

	STUDENT WELFARE DIVISION					
1	Name of the Course	M.B.B.S.				
2	Name of the Student in English (in Capital letter)					
3	Name of the Student in Hindi					
4	Father's Name, Occupation & Contact No					
5	Date of Birth DD/MM/YYYY					
6	Full Permanent Address					
7	Correspondence Address					
8	Nationality					
9	Religion					
10	State of Domicile					
11	SC/ST/OBC/General					
12	Telephone No., Mobile No. Including STD Code, Mobile No.					
13	Hobbies/extra -curricular activities					
14	E-mail id of the Candidate *					
		,				

<sup>\*</sup> Preferred communication mode for future correspondence.

### SIGNATURE OF THE CANDIDATE

<sup>\*</sup> This form has to duly filled and submitted to Asso. Dean/ Asst. Dean Student Welfare along with 1 Passport Size Photograph.



## REGISTRAR OFFICE, ACADEMIC SECTION

### FORMAT TO BE FILLED IN FOR BONAFIDE CERTIFICATE APPLICATION

NAME OF THE STUDENT IN	
ENGLISH (IN CAPITAL LETTERS)	
NAME OF THE STUDENT IN HINDI	
Father's Name (Occupation)	
<u> </u>	
Mother's Name (Occupation)	
D 11 ( ) A 11	
Full permanent / Mailing Address	
D ' t t' N ' 11 MCC	
Registration No. issued by MCC	
Allotment Letter issued by MCC	
Admit Card of Exam issued by NTA	
•	
Result/rank Letter issued by NTA	
Date of Birth Certificate (if Matric	
certificate does to bear the same)	
Nationality Daliaian State of dominile	
Nationality, Religion, State of domicile	
Category (Gen/OBC/SC/ST/EWS)	
Category (Geni ober Ser Str Ews)	
Whether PWBD (Yes/No)	
,	
Signature of Candidate	
Current E- Mail ID	
Mobile Number	
D ' '1 .' 'C' .	
Domicile certificate	



## REGISTRAR OFFICE, ACADEMIC SECTION

### FORM FOR STUDENT IDENTITY CARD

1.	Name	
2.	Course	
3.	Academic Section	
4.	Roll No. and Batch	
5.	Date of Joining	
6.	Contact No.	
7.	Emergency Contact No.	
8.	Email Id	
9.	Date of Birth	
10.	Blood Group	
11.	Mark of Identification	
12.	Father's Name /Guardian's Name	
13.	Permanent Address	
14.	Local Address	
15.	Date:	Signature of Applicant:
16.	Verification by Establishment concerned	Above content verified/not verified
-	T. 0.00	Y. 0.1

### For Office Use Only

17.	Id Card No.
18.	Date of Issue
19.	Valid up to
20.	Student Id
	SIGNATURE OF ADMINISTRATIVE OFFICER

<sup>\*</sup>This form has to duly filled and submitted to Office of Administrative Officer along with 2 Passport Size Photograph.



## REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-A

# **UNDERTAKING**

I	
Son /daughter of Shri	
have passed MBBS Entrance Examination NEET UG,2021 held on	_, 2021.
My Rank in the Entrance Examination was	
I certify that all my <b>Originals Certificates</b> (i.e., 10 <sup>th</sup> Passed/Age proof, 12th	Passed
Marks Sheet and Scheduled Caste/Scheduled Tribe (SC/ST)/Other Backward Class (Ol	BC) are
authentic. If any found false, then my candidature may be treated withdrawn/ cancelled	d at any
time during the course.	
Name	
Signature of the Candidate	
Signature of the Parent/ Guardian	
Address	



## REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-B

# **UNDERTAKING**\*

I		S/c
D/o		
Roll. No.		
(Rank No.)	Category	hereby undertake that I will submit
the Medical Certificate in presc	ribed Performa of AIIN	MS Deoghar within 10 days of reporting
in Allotment center i.e. Today.	(By Post /Hand)	
*Applicable on in COVII	O Positive Candidates	
Signature of candidate:		Signature of Parent:
	Signature of wit	eness



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Annexure-C

### **DECLARATION**

This is to certify that I have received a copy of the rules pertaining of all Professional MBBS Examinations, Supplementary Examinations, reassessment & Teaching Schedule for MBBS Students along with the Institutional Goals.

I submit to the disciplinary jurisdiction of the Executive Director and several authorities of the AIIMS Deoghar who may be vested with the authority to exercise discipline under the Acts, the Statius, states the Rules and the rules that have been framed there under by competent authorities of AIIMS.

I further declare that I will abide by these rules & regulations.

Signature of the student:
Full Name of the student.
Permanent Address.
Ph. No. /Mobile No.:
Date:
Signature of Parent/ Guardian:
Full Name of Parents/Aadhar card No./ Pan No/Guardian



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Annexure-D

### **DECLARATION BY THE CANDIDATE**

(Not to fill by General category candidate) I...... Son /daughter of ..... Village/Town/City..... District ..... State ...... hereby declare that I belong to the ...... community which is recognized as a backward class by the Government of India for purpose of Reservation in Service as per orders contained in Department of Personnel and Training office Memorandum No. 36012/22/93. Estt. (SCT) dated 8.9.1993. It is also declared that I do not belong to persons/Section (Creamy Layer) mentioned in Column 3 of the Scheduled to the above referred Office Memorandum dated 8.9.1993. Signature of the Candidate..... Name.....

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### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-E

### **DECLARATION TO BE SUBMITTED BY THE STUDENTS**

1	J.	Α	N	Æ.	OF	THE	STI	ID	EN	$1T\cdot$
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### **ROLL NO & BATCH:**

- 1. I am not residing in any containment zone
- 2. I am not suffering from any fever/cough/any respiratory distress
- 3. I am not under quarantine (OR) I am under quarantine, but having a negative RT-PCR test report within 96 hours prior to undertaking the journey
- 4. If I develop any of the above-mentioned symptoms, I shall inform/ contact the concerned health authorities immediately
- 5. I am not COVID- 19 Positive or I was diagnosed with COVID- 19 and after having treatment recovered
- 6. I understand that, if I join the Institute without meeting the eligibility criteria, I will be liable to penal action
- 7. I undertake to adhere to the Institute protocol prescribed by the destination State/Institute
- 8. I, my Parents/ Legal Guardians accompanying me during reporting after MCC Counselling at AIIMS Deoghar had undertaken the TRUNAT Test at AIIMS Deoghar and all are COVID Negative. (Attach COVID Negative report)

Si 4	
Signature of candidate:	Signature of Parent:



ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR (स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare) भारत सरकार/ Government of India

## REGISTRAR OFFICE, ACADEMIC SECTION

# **AUTHORIZATION LETTER FOR REPORTING FOR MBBS** ADMISSION AT AIIMS DEOGHAR

Resident of			
Roll No.		Rank	Category
	MBBS		declare that I as on
	is COVID Positiv	<del></del>	
• I have also	enclosed the COVII	Positive report generate	ed Online and Email
request sent to l	Registrar AIIMS De	oghar at <u>registrar@aiim</u>	sdeoghar.edu.in for
consideration.			
• I am hereby	authorizing Mr./Mrs.		
Aadhar Card No.		who is my Par	ent/ Legal Guardian/
Sibling/ 1st Degree	e Relative and is relate	ed to me as	·•
• He/ She is h	ereby authorized on m	ny behalf to report for MB	BS Admission on my
behalf at AIIMS I	Deoghar along with the	eir Aadhar Card.	
• I also decla	re that I have self-atte	sted one set of originals a	and all the documents
as per the Checkli	st of MBBS 2021 Bate	eh.	
• I hereby als	so undertake that all o	locuments are originals a	nd any discrepancies
during admission	process/ any time du	ring the MBBS course o	r at a later stage my
candidate will be	cancelled.		
• I declare that	t I will/had also sent a	ll the Affidavits, Drafts ar	nd other Undertakings
and Declarations	according to Checklis	st duly signed by E-mail	to Registrar AIIMS
Deoghar at registr	ar@aiimsdeoghar.edu	<u>.in</u>	
	* *	ressed any fact and I subr	•
•		d several authorities of the	_
•	•	cise discipline under the A	
	rules that have been f	ramed there under by cor	npetent authorities of
AIIMS.			
ature of the Student		Signature of	the Reporting Person
e of the Student		Name of the Reporting	
		Relation with Candida	
	Signature	of Witness	
	· ·	Witness:	
d:	Relation wi	th Candidate:	



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### **BONAFIDE CERTIFICATE**

This is to certify	that Mr. / Miss	
Son/Daughter of		.Aadhar ID No
has been provisionally adn	nitted to this institute fo	or MBBS course for the academic year 2021-
22		

His/ her following certified Xerox copies have been retained at this institute.

- 1. 10<sup>th</sup> class passing certificate
- 2. 12<sup>th</sup> Class passing certificate
- 3. Mark sheet of qualifying certificate i.e., 12<sup>th</sup> Mark sheet showing more than 60% marks.
- 4. Migration certificate from the university / Board last attended.
- 5. SC/ST certificate issued by the competent authority.
- 6. OBC certificate issued by the competent authority for central Govt. job/for admission in central Govt. College/ Institute.
- 7. Disability Certificate issued from a duly constituted and authorized Medical Board.
- 8. EWS Certificate issued by the competent authority.



## REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-F

# **UNDERTAKING FOR THE CHANGE OF INSTITUTE**

I	S/o/ D/	/o
have taken admission for	MBBS course at AIIMS Deo	ghar 2021 batch, and I am interested
for the 2 <sup>nd</sup> counselling at 1	MCC NEET. Please do the nee	edful.
Date		Signature of Student
		Signature of Parent
<u>(</u>	CERTIFICATE OF STA	TEMENT
The above candidat	te had been given admission a	at our Institute AIIMS, Deoghar 2021
batch, allotted through 1st	round of counselling held by	MCC NEET. The original certificate
and Course Fee are depo.	sited with us. He/ She is allow	ved to participate for the $2^{nd}$ round of
counselling from	at MCC NEET.	



## REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-G

# **UNDERTAKING FOR THE CHANGE OF INSTITUTE**

I	S/o/ D/o
have taken admission for MBBS course at AIII	MS Deoghar 2021 batch, and I am interested
for the Mop-up round of counselling at MCC N	EET. Please do the needful.
Date	Signature of Student
	Signature of Parent
CERTIFICATE O	F STATEMENT
The above candidate had been given of	admission at our Institute AIIMS, Deoghar
2021batch, allotted through 2 <sup>nd</sup> round of cou	nselling held by MCC NEET. The original
certificate and Course Fee are deposited with	us. He/ She is allowed to participate for the
Mop-up round of counselling from	at MCC NEET.

Registrar

AIIMS, Deoghar



## REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-H

# **UNDERTAKING**

Affix Coloured Photograph with White Background with Name and Date written below the photograph

A.	I				
	Have qualified & secured (Rank)	gory			
	in NEET Entrance held on				
В.	I undertaking that I have personally appeared in the above said examination.				
C.	I also undertake that all my <b>Originals Certificates</b> (i.e., 10 <sup>th</sup> Passed/Age proof, 12th Passed Marks S and Scheduled Caste/Scheduled Tribe (SC/ST)/Other Backward Class (OBC)/ EWS and PV Certificate photograph, Left Thumb impression and Signature are genuine.				
D.	If any Certificate/ declaration or any issue of my personal appearance in the examination/ identification found to be false, then my candidature may be treated as cancelled at any time during the course.	on is			
		)			
Ca	didate's Signature  Left Thumb Impression	on			
Na	ne:				
Ac	lress:				
 En	ail ID & Mobile Number:	••••			
	*Declaration/ Undertaking not signed by Candidate will be rejected.				



## REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-I

# **UNDERTAKING FOR DOCUMENT DEPOSITION**

I	o/ D/o
with entrance examination Roll Number	Rank
Category for MBBS course a	at AIIMS Deoghar 2021 batch, will submit
following documents within 07 days/Second /N	Mop-up round of counselling date, which so
ever is earlier, failing to which my admission wi	ll be cancelled.
1	•••••
2	•••••
3	•••••
4	
5	
Signature of Parent/Guardian	Signature of Student
Dated:	Dated:



(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare) भारत सरकार/ Government of India

### REGISTRAR OFFICE, ACADEMIC SECTION

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Annexure-J

# UNDERTAKING OF CODE OF CONDUCT AT AIIMS DEOGHAR

I/ we hereby after understanding give an undertaking to maintain "Code of conduct" for students at AIIMS Deoghar and fully understand that-

- All powers relating to discipline and disciplinary action are vested in the Executive Director, AIIMS Deoghar
- The Executive Director, AIIMS Deoghar may delegate all such powers, to the Dean/other person, He/ She deems proper.

I/we understand that ACTS OF INDISCIPLINE can be any of the following-

- 1. Fake Identity: On Police verification of credential of new admission as per the address given History of criminal offence/ penalized/ convicted in the past.
- 2. Fake Certificates /Forgery in Certificate/ False information submitted: On verification/Scrutiny of educational qualification documents.
- 3. Adverse Entry in Character Certificate from Pervious Institution
- 4. Not observing dress code during working hours.
- 5. Keeping 4 wheeled vehicles in the campus.
- 6. Absent from hostel/ Classes without any reason/Permission.
- 7. Involved in any kind of promotion of company products/business/selling articles/Lottery etc. among the campus inhabitants and hostel inmates.
- 8. Permitting any stranger/ friend/ relation/unauthorized person to live in their room in the hostel without permission.
- 9. Creating repeated nuisance in classroom despite verbal or written warning.
- 10.Possession of liquor/drugs- addictive or hallucinogenic drugs/banded substances or their consumption in the campus.
- 11. Using abusive/ vulgar language/disturbing others/nuisance to other.
- 12. Any act of theft/stealing institutional belongings.
- 13. Any act of intentionally damaging hostel, hospital & institute property.
- 14. Any act of physical assault on colleagues/subordinates/staff and faculty.
- 15.Instigating students/staff to commit deviance against the rules and regulations of the institute or participating in any political/group & union activities.
- 16. Mass bunking of classes and instigating others for mass bunking.
- 17. Violation of institute rules.
- 18.Involved in Act of Gambling/Betting or such similar act.
- 19. The possession or use of nay firearms or lethal weapons.

Signature of Candidate

Signature of Parent/Guardian



(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare) भारत सरकार/ Government of India

### REGISTRAR OFFICE, ACADEMIC SECTION

- 20. Smoking cigarette, cigarettes, chewing tobacco, pan masala and any other noxious substance.
- 21.Use of Music system/mobile or any other accessories in high volumes disturbing others in hostel/institute/hospital premises.
- 22. Possession/involved in circulation of pornographic material.
- 23. Entry of female in the boy's hostel/and male in the girl's hostel without permission of competent authority.
- 24. Any act of indiscipline/commission leading to non-boilable warrant.
- 25. Any act or Ragging.
- 26. Any act leading to criminal intimidation or offence/tendency for violent behaviour of provocation causing injury liable for lodging FIR.
- 27. Sexual offence/sexual harassment.
- 28.Offences related to IT act.
- 29. Violation of the status, dignity and honour of other caste.
- 30. Any attempt of bribing or corruption in any manner.
- 31. Creating ill- will or intolerance on religious or communal grounds.
- 32. Using unfair means in examination
- 33. Pasting any notices/paper within the Institution without the prior permission.
- 34. Communicate with any outside authority directly print/ electronic media without permission.

I/we Understand and hereby give an undertaking that to maintain discipline and academic environment in the institute, if I/my ward is involved in any such act of indiscipline, appropriate disciplinary action (Penalty) can be taken against me/ my ward.

Penalty as applicable upon the seriousness and gravity of offence (s):

- 1. Warning Letter
- 2. Suspension from classes for a certain period
- 3. Fine as appropriate for the proven act of indiscipline
- 4. Expulsion from hostel
- 5. Permanent expulsion from hostel
- 6. Expulsion from the institution
- 7. FIR/Police action

Signature of Candidate	Signature of Parent/Guardian
Name:	Name:
	Address:
Witness:	
Name:	
Address:	

## REGISTRAR OFFICE, ACADEMIC SECTION

**ANNEXURE-I** 

## **ANTI-RAGGING AFFIDAVIT BY THE STUDENT**

(ON Rs.10/-STAMP PAPER)

	I		
S/o D	/o of Mr. /Mrs		
Resid	ent of		
Do H	ereby solemnly affirm decl	are as under:	
2.	Deoghar, Jharkhand. That I Have received Regulation/Directive for I with the AIIMS vide its let the menace of Ragging, to I hereby solemnly affirm to I will not indulge of the definition of rage.  I will not participate.  I will not hurt anyon I have fully understood the or outside AIIMS Campulations/Directive men	r involve myself in any behavior aging.  e in or abet or propagate ragging in the physically or psychologically of at if found indulging or guilty of a sus, I may be punished as per the and shall not claim and compense.	anderstood the AIIMS's ng Measures in accordance 24 <sup>th</sup> May,2012, on curbing the AIIMS.  or act that may come under any form.  or cause any other harm.  any aspect of ragging within the provision of the AIIMS aw in force and for which I
		Verified at20	
	Name:	Address & Contact No:	Deponent
			Signature of the Student

## REGISTRAR OFFICE, ACADEMIC SECTION

**ANNEXURE-II** 

## **ANTI-RAGGING AFFIDAVIT BY THE PARENT**

(ON Rs. 10/-STAMP PAPER)

S/o/D/o of Mr.	./Mrs		_
Resident of			
Do hereby solo	emnly affirm and declare as under:		
<ol> <li>Student of Jharkhand.</li> <li>That I hav Banning Raits letter Not to be follow</li> <li>I assure your agging that</li> <li>I have fully involved in appropriate solely respect.</li> </ol>	e gone through and fully understonaging and Ant-Ragging Measures o.F.8-1/2012.Acad-II dated 24 <sup>th</sup> -Manued by all the students of AIIMS. Ou that my son / daughter/ ward with the may come under the definition of a understood that in case my son / on Ragging within or outside the puly punished Accord to supreme comosible. I or my son/ daughter shall any loss (s), damage (s) and shall not	of Medical Sciences (AIIMS), Deogher of Medical Sciences (AIIMS), Deogher ood the AIIMS Regulation /Directive for an accordance with the AIIMS order visus 2012, on curbing the menace of Ragging ill not be involved or indulge in any act ragging.  daughter /ward will be found indulging premises of the AIIMS, he/ She shall ourt guidelines for which he/ she shall all not hold liable the AIIMS or any of not claim any compensation from the AIIM	or de g, of or oe ts
		Depone Signature of Parent/Guardi	
VERIFICAT	ION: Verified at	on thisday	
	_2022, that the above affidavit is tr	rue and correct.	of



## REGISTRAR OFFICE, ACADEMIC SECTION

**ANNEXURE-III** 

GAP	CERTIFICATE AFFIDAVIT BY THE PARENT	

Ι	(ON Rs. 10/-STAMP PAPER)				
Age.	years, Indian inhabitant, residing at				
1.	I say that I have passed	nce then I did not enroll my			
2.	I say that now I wish to continue my further studies. I understand the for cancellation in case the above information is found to be incorrect.	•			
3.	for cancellation in case the above information is found to be incorrect.  3. I say that I am executing this affidavit to product the same before the concerned University/College authority to prove my gap period in Education and enable them to condone the gap period and give me admission in their University so that I continue my further studies.				
	I was not indulged in any criminal activity during this period.				
	Not any criminal case is charged or pending against me in any cour	•			
	What is stated above is true and correct to the best of my knowledg I is/will be present at time of admission process in AIIMS Deogh Deoghar)				
	Solemnly Affirmed at Deoghar.	Signature of the applicant			
	Thisth day of (month)(year)	Deponent.			
	Explained & identified by me.	Before Me.			

Signature of Notary



## REGISTRAR OFFICE, ACADEMIC SECTION

**ANNEXURE-IV** 

GAP (	CERTIF	<b>ICATE</b>	<b>AFFIDAV</b>	IT BY	THE PARENT

	(ON Rs. 10/-STAMP PAPER)				
	nt/Guardian of (name of candidate) who is an Indian				
	do hereby state and declare on solemn a				
1.	I say that my son/daughter has passed				
	from	• /			
	(month)(year) and since then I did not enroll				
	college/Institute/University and /or elsewhere as a regular student dur	ring my gap due to			
2	(state reason)	1.1 4			
2.	2. I say that now he/ She wishes to continue further studies. I understand that my candidature is				
2	liable for cancellation in case the above information is found to be incorred.				
3.	I say that I am executing this affidavit to product the same be University/College authority to prove my gap period in Education and ena				
4	the gap period and give her/him admission in their University so that I continue further studies.  4. He/ She was not indulged in any criminal activity during this period.				
	Not any criminal case is charged or pending against him/ her in any court	of justice			
	What is stated above is true and correct to the best of my knowledge and b	3			
	He/ She is/will be present at time of admission process in AIIMS Deog				
, •	Jasidih Deoghar)	nur (i ii bucurgium			
	Solemnly Affirmed at Deoghar.				
	· ·	Signature of Parent			
		Signature of Farent			
	Thisth day of (month)(year)	Deponent.			
		•			
	F. 1 . 10 .1				
	Explained & identified by me.				
		Before Me.			

Signature of Notary



## REGISTRAR OFFICE, ACADEMIC SECTION

### **MEDICAL EXAMINATION REPORT**

Photo box

Front facing, **Holding name &** date of Birth against white **Background** 

NAME OF THE CANDIDATE:	
NAME OF THE COURSE:	
ENTRANCE EXAMINATION ROLL NO.:	
RANK:	•••••
CATEGORY:	
ADDRESS (PERMANENT):	
SESSION:	

26 | Page

Candidate's Signature



# REGISTRAR OFFICE ACADEMIC SECTION

आरायम् परम सुक्षम्	
Name of the Candidate:	
<b>CANDIDATE'S STATEMENT AND DECLARATION</b>	
The candidate must make the Statements required below prior to his	Medical
Examination and must sign the Declaration appended there to his attention is	specially
directed to the warning contained in the note below:	
1. State your Name in Full (In Block Letter):	•••••
2. Father's Name:	••••••
3. State your DOB and Birth place:	•••••
4. Are you? Single/Married/Widow/Widower:	•••••
5. Name any major disease you have suffered from:	••••
6. Are you being treated for any disease at present	?
7. Have any of your near relations been afflicted with insanity, tuberculosis,	diabetes
	leeding:
8. Are you allergic to any substance /drug:	
9. Have you ever had small pox intermittent or any other fever, enlarge	
suppuration of glands spitting of blood, asthma, heart disease, fainting	
Rheumatism	
10. Any other disease or accident requiring confinement to bed and medical or	surgical
treatment?	
11. Heave you suffered from a degree of deafens:	
12. Have you suffered from any form of nervousness due to over work or an	ny other
cause?	
13. Furnish the following particulars concerning your family. (Disease trend in	n family
and premature death if any	
14. Have you been immunized against the mentioned diseases (strike off which	hever is
not applicable)?	

a) History of Vaccination: \_\_\_\_\_



# REGISTRAR OFFICE, ACADEMIC SECTION

b) He	patitis B: Yes/No
c) Pol	io: Yes/No
d) Dip	ohtheria: Yes/ No
e) Tet	tanus: Yes/ No
f) Tu	berculosis: Yes/ No
g) An	y Other Vaccination:
All the above	answers are to the best of my belief, true and correct.
	Candidate's Signature
Note: T	he candidate will be held responsible for the accuracy of the above
statement. By	willfully suppressing any information it will incur the risk of losing
admission.	
	Signed in the presence of Chairman of the Board



(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare) भारत सरकार/ Government of India

### REGISTRAR OFFICE, ACADEMIC SECTION

Name of the Candidate:		
<b>DEPARTMENT OF GENERAL MEDICINE:</b>		

Physical Examination (Tick wherever appropriate)

General Appearance	Good	Fair	Poor
Height (without shoes) (in cm)		·	
Weight (without shoes) (in kg) Pounds			
Pulse (rate/minute)			
Blood Pressure (mmHg) Systolic /Diastolic			
Oral Hygiene	Good	Fair	Poor
Cyanosis	Present		Absent
Pallor	Present		Absent
Icterus	Present		Absent
Pedal Edema	Present		Absent
Clubbing	Present		Absent

•	Chest circumference:	
	After full inspiration	cm Expiration
•	Respiratory system	
•	Circulatory system	

• Heart any organic lesions: \_\_\_\_\_

• ECG (Please attach) date \_\_\_\_\_

• Please mention please \_\_\_\_

**General Examination:** 

• Nervous system \_\_\_\_\_

• Loco Motor system (Any obvious abnormality): \_\_\_\_\_

Remarks (if any)

**Signature, Name and Stamp of Faculty General Medicine** 



## REGISTRAR OFFICE, ACADEMIC SECTION

	ndidate: <u>DEPART</u>	EMENT OF C			• • • • • • • • • • • • • • • • • • • •	•••••
Vision	Distant vision Near Vision		Colo	Color vision		
	Without glasses	With glasses	Without glasses	With glasses	Normal	Abnorma
Left Eye				1		
Right Eye						
	y)		_			
		Signature, Na	ame and Stai	mp of Fac	ulty Ophth	almology
	<u>D</u>	Signature, Na DEPARTMEN		mp of Fac	ulty Ophth	nalmology
Ears Inspection	<u>D</u>	<u>DEPARTMEN</u>		mp of Fac	ulty Ophth	nalmology
	_	DEPARTMEN	T OF ENT	•		nalmology
	Right E	DEPARTMEN	T OF ENT	•		nalmology
Hearing	Right Ea	DEPARTMEN	T OF ENT	•		nalmology
Hearing Glands: Thyroi	Right Ea	DEPARTMEN	T OF ENT	•		nalmology
Hearing Glands: Thyroi Remarks Angle- Squint a	Right Ea	DEPARTMEN	NT OF ENT	•		G.
Hearing Glands: Thyroi Remarks	Right Ea	DEPARTMENar	NT OF ENT	•		G.

Signature, Name and Stamp of Faculty ENT



## REGISTRAR OFFICE, ACADEMIC SECTION

Name of the Candidate:
<b>DEPARTMENT OF GENERAL SURGERY</b>
(a) Abdomen
• Tenderness
• Hernia
• Palpable Liver
• Spleen
• Kidneys
Any other
(b) Genito Urinary system
Hydrocele
• Varicocele
• Fistula
<ul> <li>Hemorrhoids</li> </ul>
• Varicose vein
(c) Lymphadenopathy (palpable)
Remarks

Signature, Name and Stamp of Faculty of General Surgery



## REGISTRAR OFFICE, ACADEMIC SECTION

Name of the	e Candidate:	
	DEPARTMENT OF OBSTRETRICS AND GYNAECOL	<b>LOGY</b>
Gynecology	History and Examination (for Female candidates):	
•	Status- Single/married/widow	
•	Age at menarche:	
•	LMP:	
•	History of Polycystic ovarian syndrome (PCOS):	Yes/ No
•	Last visit to gynecologist and reason of visit:	Yes/ No
•	Last whole abdominal ultrasound done and indication:	Yes/ No
•	Past history of tuberculosis intake of /ATT:	Yes/ No
•	Past history of gynecologic surgery / intake of chemother	apy: Yes/No
•	Any obvious gynecological abnormality	Yes/ No
•	Associated dysmenorrhea:	
•	<b>Examination:</b>	
(1) Ly	ymphadenopathy/ Scars/ other deformities:	
(2) Br	reasts and axilla for any evidence of Mass/abnormal disch	arge:
(3) At	bdomen examination	
•	Menstrual cycle:	
Lengt	th: Duration of flow: Regu	larity:

Signature, Name and Stamp of Faculty of Obstetrics and Gynecology



# REGISTRAR OFFICE, ACADEMIC SECTION

Name of the Candidate: .		•••••
<b>DEPARTMENT OI</b>	F BIOCHEMISTRY/ PATHOLOGY	// MICROBIOLOGY
Investigation (Attach All	Reports and TRUENAT Report)-	
<ol> <li>Ref. No. for Urine s</li> <li>Ref. No. for Blood s</li> <li>Ref. No. for Chest S</li> </ol>	•	
Hematology:	•	
Blood. Sugar	:	
• Blood group	and Rh factor- (if known)	
Remarks (plane mention Signature, Name and Sta	if any major abnormalities) mp of-	
Biochemistry	Pathology/ Lab Medicine	
Two Identification mark		
1		••••••



# REGISTRAR OFFICE, ACADEMIC SECTION

Name of the Candidate:
FINAL ASSESSMENT OF THE STANDING MEDICAL BOARD
(The Board should record their findings under one of the following three categories)
1. Fit: Fit/ Unfit
2. Unfit on the following reasons
•••••••••••••••••••••••••••••••••••••••
3. Temporarily Unfit on account of
•••••••••••••••••••••••••••••••••••••••
Special medical board opinion (if required)
Signature, Name and Stamp of-
Member Secretary Standing Medical Board (Deputy Medical Supt.)
Chairman Standing Medical Roard (Medical Superintendent)

## REGISTRAR OFFICE, ACADEMIC SECTION

# ORIGINAL DOCUMENT SUBMISSION RECEIPT

The candidate S/o/D/o
with NEET Entrance examination Roll no for provisional admission to
MBBS course at AIIMS Deoghar, 2021 batch, on Following Origina
Documents of the Candidate are submitted in the Registrar Office, Academic section of AIIMS
Deoghar.
1. 10 <sup>th</sup> Mark sheet
2. 10 <sup>th</sup> Passing Certificate
3. 12 <sup>th</sup> Mark sheet
4. 12 <sup>th</sup> Passing Certificate
5. Caste/Tribe/OBC/PwBD/EWS Certificate (for reserved category)
6. Migration Certificate issued by Board
7. Transfer Certificate issued by School
8. Character Certificate
9. Notarized Gap Certificate Affidavit by Parent
10. Notarized Gap Certificate Affidavit by Student
11. Notarized Anti-Ragging Affidavit by Parent
12. Notarized Anti-Ragging Affidavit by Student
13. Demand Draft/ NEFT of Rs 5856/- (One Time Admission Fees)
14. Demand Draft/ NEFT of Rs 10,500/- (Mess Fees)
15. Demand Draft/ NEFT of Rs 1,000/- (One Time Refundable Security Deposit)
16. Relieving Letter from earlier institutions where allotted and reported.
17. Other Certificates (if any)
Note: Student has to collect the above original documents after completion of their course.
Date:
Registra
AIIMS, Deogha
Signature of Student Signature of Parent



# REGISTRAR OFFICE, ACADEMIC SECTION

No:	Date:
	<b>Candidate Copy</b>
	Affix Coloured
PROVISIONAL ADMISSION LETTER	Passport Size Photos
TROVISIONAL ADMISSION LETTER	Here (Front face
Signature of the Candidate:	against white back
Left Thumb impression:	ground) Name & DOB
Lett Thumb impression.	DD/MM/YYYY
This is to certify that	
resident of having	NEET Rank (NEET UG
Entrance held on Number	under
UR/OBC/SC/ST/PH/EWS category has been provisionally admitted in ME	BBS branch for the year
2021 session at AIIMS Deoghar.	
/Mop-up Round/Stray Round of MCC) for the year 2021-2022 on the terms as in Information Brochure which is available on MCC NEET Website.  The admission is subject to verification of the documents provided of the information/ certificate is found false/ incorrect the admission may be Medical (Submitted/Pending):	by the candidate. If any
Fee (Submitted/Pending):	
Signature of Student	
Signature of Parent	
Signature of Farent	
	Registrar
	AIIMS Deoghar
Date:	
Copy to –  1. Executive Director, AIIMS Deoghar	
2. Associate Dean (Academics), AIIMS Deoghar	
3. DDA/AO, AIIMS Deoghar	
4. FA/AO, AIIMS Deoghar	
5 Provost Hostels AIIMS Deoghar	

### REGISTRAR OFFICE, ACADEMIC SECTION

MBBS Admission AHMS Deoghar 2021 Batch

	(For Administrative/ Official Use Only)									
Name of	Candidate:		37							
Entrance	Exam Roll no	Rank	Category							
1. Docum	nent check List									
1. 1	0th Mark sheet									
2. 1	0 <sup>th</sup> Passing Certificate									
3. 1	2 <sup>th</sup> Mark sheet									
4. 1	2 <sup>th</sup> Passing Certificate									
5. (	Caste/Tribe/OBC/Handicap/	EWS Certificate (for rese	rved category)							
6. N	6. Migration Certificate issued by Board									
	ransfer Certificate issued by	School								
	Character Certificate									
	Notarized Gap Certificate A	•								
	otarized Gap Certificate Af	-								
	otarized Anti-Ragging Affi									
	otarized Anti-Ragging Affi									
	emand Draft/ NEFT of Rs 5	`	sion Fees)							
	emand Draft/ NEFT of Rs 1									
	emand Draft/ NEFT of Rs 1	,	* * *							
	elieving Letter from earlier	institutions where allotte	d and reported.							
17. O	other Certificates (if any)									
_		Signature of	Members of Admission Comm	ittee for MBBS						
2. Docur	nent Deposited									
1.	. 10 <sup>th</sup> Mark sheet									
	. 10 <sup>th</sup> Passing Certificate									
	. 12 <sup>th</sup> Mark sheet									
4.	. 12 <sup>th</sup> Passing Certificate									
	. Caste/Tribe/OBC/Handic	ap/EWS Certificate (for r	eserved category)							
6	. Migration Certificate issu	ed by Board	<b>U</b> ,							
7.	. Transfer Certificate issue	d by School								
8	. Character Certificate	·								
9.	. Notarized Gap Certificate	e Affidavit by Parent								
1	0. Notarized Gap Certificate	e Affidavit by Student								
1	1. Notarized Anti-Ragging A	Affidavit by Parent								
1.	2. Notarized Anti-Ragging	Affidavit by Student								
1.	3. Demand Draft/ NEFT of	Rs 5856/- (One Time Add	mission Fees)							

### 3. Medical Examination (Fit/ Unfit)-

17. Other Certificates (if any)

- 1. General Examination:
- 2. Investigation (Blood, Urine & X-ray chest):

14. Demand Draft/ NEFT of Rs 10,500/- (Mess Fees)

15. Demand Draft/ NEFT of Rs 1,000/- (One Time Refundable Security Deposit)

16. Relieving Letter from earlier institutions where allotted and reported.

Signature of Chairman Medical Board/ MS/DMS

Signature of Registrar

### REGISTRAR OFFICE, ACADEMIC SECTION

For Official Purpose (Not to be filled by Candidate)										
This	is	to	certify	that	the	candidate	Mr./Ms		Roll	No
Rank			_Catego	ry		has produce	ed the follow	wing documents in original	at the	time of verification

	nkCategoryhas produced the following documents in original at the ti	ı	1
Sl.	Particulars/Certificates	Checked	Query/
No.			Remarks
1.	Allotment letter issued by MCC		
2.	Registration cum Confirmation Slip by MCC		
3.	Admit Cards of Exam issued by NTA		
4.	Result/Rank Letter issued by NTA		
5.	Relieving Letter in original from earlier Institutions where allotted and reported		
6.	10 <sup>th</sup> Passing Certificate		
	Eligibility: He/ she has completed 17 years of age at time of admission or will		
	complete that age on or before 31st Dec of the year of his/ her admission to the 1st year		
	MBBS. The lower age limit for UR/ UR-EWS/SC/ST/OBC-NCL/PWD is born on or		
	before 31.12.2004. Candidates born on or before 1st January 2004 are not eligible to		
	apply. Upper age limit for NEET is 25 years as on date of examination with relaxation		
	of 5 years for candidates of SC/ST/OBC-NCL and PWBD Candidates.		
7.	(12 <sup>th</sup> ) Class Certificate and Mark sheet		
	Subject: English, Physics, Chemistry& Biology (Marks obtained out of		
	=%		
	Minimum Marks: The UR, EWS and OBC candidate must have passed in Physics, Chemistry, Biology and English individually and must have obtained a minimum of 60% marks taken together in Physics, Chemistry and Biology. The candidates belonging to Scheduled Castes and Scheduled Tribe, the minimum marks obtained in Physics, Chemistry and Biology taken together in qualifying examination shall be 50% marks and have to pass individually in all subjects. The candidates belonging to PWBD candidates, the minimum marks obtained in Physics, Chemistry and Biology taken together in qualifying examination shall be 45% marks and have to pass individually in all subjects.		
8.	SC/ST/OBC*/EWS (Copy enclosed)  Validity of OBC & EWS Certificate: *OBC/EWS certificate should be valid as per the list of OBC central Govt. He/ She does not person/ Section Creamy Layer/ EWS and certificate should be issued from 1st April, 2020 (inclusive) and start of reporting of Round-1 of MBBS counselling schedule to be notified by (Medical Counselling Committee for MBBS admission) will be considered valid.		
9.	Migration Certificate issued by University/ Board last Attended		
10.	Transfer Certificate issued by School/ College last Attended		
11.	Disability certificate issued from duly constituted and authorized medical board from centers of Disability as mentioned in the MCC.		
12.	Admission Fees Rs 5856/-, Mess Fees Rs 10,500/- and Hostel Fees Rs 1000/-		
13.	Notarized Affidavits of Gap Certificate and Anti-Ragging by Parents and Students		
* A	bove mentioned original certificate has been verified alone with one set of photocopies	of all above	



### ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)
(An Institution of National Importance under Ministry of Health & Family Welfare)
भारत सरकार/ Government of India

### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure 1

### CERTIFICATE OF DISABILITY

(As per Gazette Notification No. MCI-18(1)/2018-Med./187262 dated 5<sup>th</sup> Feb 2019/13<sup>th</sup> May 2019 for Admission to Medical Courses in All India Quota)

Recent Passport size Photograph of the candidate (same as given in the online Application Form) duly attested by the

Certific	ate No	Date Date Date Date Date Date Date Date	sted
Name o	of the Designated Centre (as per	Appendix-VIII-B):	
This is t	to certify that Dr. /Mr. /Ms		
Aged_	Years Son/Daughter o	f Mr.	
R/o_			AX V
	Application No.		
			e Specified Disability) in
(percer	ntage) of		_ (in words) (in
[(Asses	Please tick on the "Specified Dis	ith the Gazette Notification No.	. S.O76 (E) dated 4th January 2018 of the Department stice & Empowerment ] :
S/No.	Disability Type	Type of Disability	Specified Disability
1	Physical Disability	A. Locomotor Disability*  B. Visual Impairment*  C. Hearing Impairment*  D. Speech & Language Disability	Leprosy cured person, b. Cerebral Palsy, c. Dwarfism, d.     Muscular Dystrophy, e. Acid attack Victims, f. other such as Amputation, Poliomyelitis     a. Blindness     b. Low Vision     a. Deaf     b. Hard of hearing
2.	Intellectual Disability		Specific Learning Disabilities (Perceptual disabilities, Dyslexia, Dysgraphia, Dyscalculia, Dyspraxia & Development Aphasia     b. Autism Spectrum Disorders
2	Mental Sehaviour		a. Mental iliness
4	Disability caused due to	a. Chronic Neurological Conditions b. Blood Disorders	i. Multiple Sclerosis ii. Parkinson's disease i. Haemophilia, ii. Thalassemia, iii. Sickle Cell Disease
5.	Multiple Disability including Deaf- blindness		More than one of the above-specified disabilities
N	lotification(s) subject to his being	otherwise medically fit.	edical/Dental courses as per the aforesaid Gazett of Locomotor*/Visual*/Hearing* Impairment, if ar
	n. & Name ncerned Specialist)	Sign. & Name (Concerned Specia	Sign. & Name alist) (Concerned Specialist)



### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-2

### PROFORMA FOR OTHER BACKWARD CLASS (OBC-NCL) CERTIFICATE

(Certificate to be produced by Other Backward Class applying for admission to Central Educational Institute (CEIS) under the Government of India)

This	is	to	certify	that	Shri/Smt./Kum./Dr		Son/Daughter of
Shri/D						District/Division	
State	belon	s to t	he		Community wh	ich is recognized as a back	ward dass under:
(1)	Rex	olution	No. 1201	1/68/93-	BCC(C) dated 10/09/93	published in the Gazette	of India Extraordinary part I Section I
	No.	186 da	sted 13/09	9/93.			
(iii)	Rex	olution	No. 1201	1/9/94-8	ICC dated 19/10/94 pub	olished in the Gazette of In	ndia Extraordinary part I Section I No.
	163	dated	20/10/94				
(iii)	Rex	olution	No. 1201	1/7/95-B	ICC dated 24/05/95 pub	olished in the Gazette of Ir	ndia Extraordinary part I Section I No.
	88 d	ated 2	25/05/95.				
(iv)	Rex	olution	No. 1201	1/96/94-	BCC dated 09/03/96.		
(v)	Rex	olution	No. 1201	1/44/96-	BCC dated 06/12/96 pu	blished in the Gazette of I	ndia Extraordinary part I Section I No.
	120	dated	11/12/96				2V.
(vi)	Rex	olution	No. 1201	1/13/97-	BCC dated 03/12/97.		
(vii)	Rex	olution	No. 1201	1/99/94-	BCC dated 11/12/97.		
(viii)					BCC dated 27/10/99.		
(ix)					BCC dated 06/12/99 pu	blished in the Gazette of I	ndia Extraordinary part I Section I No.
			06/12/99				
(x)	Rex	olution	No. 1201	1/36/99	BCC dated 04/04/2000	published in the Gazette	of India Extraordinary part I Section I
			ed 04/04/				
(xi)					BCC dated 21/09/2000	published in the Gazette	of India Extraordinary part I Section I
			sted 21/09				
(xii)					00-BCC dated 06/09/200		
(xiii)					01-BCC dated 19/06/200		
(xiv)					02-BCC dated 13/01/200		
(xv)					04-BCC dated 16/01/20	06 published in the Gazett	e of India Extraordinary part I Section
			dated 16/0				
(xvi)						3/2014 published in the (	Gazette of India Extraordinary Part I
			no. 63 dat	400			
					The second secon	ordinarily reside(s) in the	
			60.	70. 70.	State.		
			* (0.				ayer) mentioned in Column 3 of the
					•	•	No. 36012/22/93-Estt. (SCT) dated
				d vide O	M No. 36033/3/2004	tstt. (Kes.) dated 09.05.2	004 or the latest notification of the
Gover	100	t of In	dia.				
Dated							
	100	pistrati	e/Compet	ent Auth	ority Seal		
NOTE:			andinania .		will have the came mean	sina as in Castian 30 aftha (	Secretarios of the Benefit Act 1959
(b)						-	Representation of the People Act, 1950.
(c) (i)					ssue Caste Certificates a		te/Sub-Divisional Magistrate/Taluka
17			-		•		nk of 1st Class Stipendiary Magistrate.)
(ii)	_					cy Magistrate/Presidency n	
(iii)					rank of Tehsildar.	, your and it is a second in	-3
(iv)			-			and/or his family resides.	
(4)				-			financial year ending March 31, 2021



### ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

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### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-3

### PROFORMA FOR SCHEDULED CASTE AND SCHEDULED TRIBE CERTIFICATE

Form of the certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated the 28.1.1952, as revised in Dept. of Per- & A.R. letter No. 36012/6/76-Est. (S.CT), dated 29.10.1977, to be produced by a candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.

### CASTE CERTIFICATE

This is to certify that Shri/Smt./Kur	n.*	son/daughter* ofof
village/town*in	district/Division*of the	State/Union Territory*
belongs to theCaste/1	ribe which is recognized as a Schedu	uled Caste/Scheduled Tribe*under:

- · The Constitution (Scheduled Caste) Order, 1950
- The Constitution (Scheduled Tribe) Order, 1950
- The Constitution (Scheduled Caste) (Union Territories) Order, 1951
- The Constitution (Scheduled Tribe) (Union Territories) Order, 1951
- (as amended by the Scheduled Caste and Scheduled Tribe Lists (Modification) order, 1956, the Bombay Reorganization Act, 1960, the Punjab Re-organization Act, 1966, the State of Himachal Pradesh Act, 1970 the North-Eastern Areas (Re-organization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1976).
  - The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.
  - The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
  - The Constitution (Dadra and Nagar Haveli) Scheduled Caste Order, 1962.
  - The Constitution (Dadra and Nagar Haveli) Scheduled Tribes, Order, 1962.
  - The Constitution (Puducherry) Scheduled Caste Order, 1964
  - The Constitution (Uttar Pradesh) Scheduled Tribes, Order, 1967.
  - The Constitution (Goa, Daman & Diu) Scheduled Caste Order, 1968.
  - The Constitution (Goa, Daman & Diu) Scheduled Tribes, Order, 1968.
  - The Constitution (Nagaland) Scheduled Tribes Order, 1970.
  - The Constitution (Sikkim) Scheduled Caste Order, 1978.
  - The Constitution (Sikkim) Scheduled Tribes Order, 1978.

2. Applicable in the case of Scheduled Caste	/Schedule Tribe persons who have migrated from one State/Union									
Territory Administration:										
This certificate is issued on the basis of the Sch	eduled Caste/Scheduled Tribe* certificate issued to Shri/Smt*									
	of the State/Union Territory*									
	(name of prescribed authority) vide their No									
- date										
3. Shri*/Smt.*/Kum*and/or	his/her* family ordinary reside (s) in village/town*of									
the State/Union Territory of										
Signature										
PlaceState/Union Territory	** Designation									
Date (With a seal of Office)										

- Please delete the words which are not applicable.
- Please quote specific Presidential Order.
- Delete the paragraph which is not applicable.
- \*\* Should be signed by the Authorities empowered to issue Scheduled Caste/Scheduled Tribe certificates as specified above.



### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-4

### EMBASSY CERTIFICATE OF FOREIGN CANDIDATE

(For NRI Candidates)

(ON THE LETTERHEAD OF CONCERNED INDIAN DIPLOMATIC MISSION)

F. No. :					
то wномя	DEVER IT MA	AY CONCERN	5	C	
This is to certify that Mr. /Mrs. /	Ms		(2)	S/o / W/	/o /
D/o holder of Passpo	ort No		ssued on		_ at
valid	upto _	$\Delta$	presently	residing	at
	0 1	has :	stayed abroad	for more	than
182 days during the last financial year and enj	oys the state	us of Non-Resid	dent Indian (NI	RI) for the p	eriod
from till date. He may be e	extended all	courtesies and	facilities, as a	dmissible t	o the
Non-Resident Indians (NRIs).	0				
This certificate is issued for h	is Son/	Daughter/	Daughter-in-	-Law/ Sp	ouse
, for seeking	admission in	n India under N	IRI Quota.		
The validity of this Certificate is for six month	ns only.				
PLACE:	SIGNA				
DATE:	NAME				
		NATION:			
	SEAL:				

(OF THE ISSUING AUTHORITY)



### REGISTRAR OFFICE, ACADEMIC SECTION

**Annexure-5** 

### SELF-DECLARATION BY MINORITY COMMUNITY CANDIDATE FOR SUPPORT FROM GOVERNMENT SCHEME

### Declaration

ι,	Son/Daughter	of		А	resident	of
	hereby declare	that I b	elong to the (Muslims/Sikhs	s/Christian/Bu	ddhists/Jains	and
Zoroastrians (Parsis) which	ch is a notified mi	nority co	ommunity as per Section 2	(c) of Nationa	l Commissio	n for
Minorities Act, 1992).					101	
				3V)		
Date:			. 20,			
Place:			4///			
	2		Signature of Candidate:	t		
	Ur.		Name of the Candidate:			<b>-</b>
			Application no. of NEET	(UG) 2021:		<b>.</b>
610			Roll no. of NEET (UG) 20	21.		



Father's Name: Mother's Name:

Address:

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### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-6 SELF-DECLARATION PROFORMA FOR CANDIDATES BELONGING TO UT OF J&K Application no: Photo Son/Daughter of . hereby solemnly affirm and state as follows: That I am not eligible to appear for the Undergraduate Medical Courses seats in the UT of J&K and hence not eligible to seek admission in Medical/Dental/Ayurveda/Siddha/Unani/Homeopathy Colleges of UT of J&K. That I am not domiciled in the UT of J&K. 3) That I further declare that the said declaration is made by me on my own after knowing and understanding all the rules and their implications. That if the above statement of mine is found incorrect at any time, my candidature/ admission in NEET (UG) - 2020, Undergraduate Medical Courses be cancelled and legal action as the deemed fit may be initiated against me. Left-hand thumb Signature of Candidate impression Name:

This declaration will be auto-generated and submitted online only at the time of filling the online application form by the candidates belonging to UT of J&K and Ladakh and claiming 15% seats under All India Quota.



### REGISTRAR OFFICE, ACADEMIC SECTION

**Annexure-7** 

AFFIDAVIT FOR SINGLE GI	RL CHILD
Must Be on Rs. 50/- Stamp	o Paper
I (father/mother of candidate) son/wit	fe of
resident of	
do hereby make oath and state as under:-	
That the Deponent is the father/mother of	(candidate name)
an applicant of NEET (UG)-2021 vide Application no	Roll no
2. That the deponent's daughter is a Single Girl Child/Twin	n Daughter/Fraternal Daughter of the family and
there is no other male and female child in my family.	0',
Verified at (place) on this	(date-month-year)
that the contents of the above affidavit are true and correct to	o my personal knowledge and belief.
	DEPONENT SIGNATURE
000	NAME
	FULL ADDRESS
19,	
Seal & Signature of  SDM/First Class Magistrate/Gazetted Officer (not below the ra	ank of Tehsildar)
Certifying the aforesaid declaration.	
Date:	



### REGISTRAR OFFICE, ACADEMIC SECTION

				Annexure-8
(Name	Government & Address of the auth		_	-
INCOME & ASSEST CE SECTIONS	RTIFICATE TO BE	PRODUCED BY	ECONOMICALLY	WEAKER
Certificate No			Date:	· · · · · · · · · · · · · · · · · · ·
	VALID FOR THE Y	EAR		
<ol><li>Residential plot of 10</li></ol>	ions, since the gross a only) for the financial y a assets***: al land and above; 100 sq. ft. and above;	nnual income* of rear h	lis/her family does	not own or
<ol> <li>Shri/Smt./Kumari _ recognized as a Scheduled</li> </ol>	Caste, Scheduled Tribe	belongs to the and Other Backwa	e caste ward Classes (Central	rhich is not List)
			n seal of Officesignation	
Recent Passport size attested photograph of the applicant				

Income covered all sources i.e. salary, agriculture, business, profession, etc.

<sup>&</sup>quot;Note 2:The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

<sup>\*\*\*</sup>Note 3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.



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### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure-9

# अखिल भारतीय आयुर्विज्ञान संस्थान, देवघर

ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

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भारत सरकार/ Government of India

Ref No.: 86 /AIIMS/Deoghar/2019

Date: 18/11/2019

### FEE STRUCTURE

The fees payable for MBBS at AIIMS Deoghar is as below:A. Payable to AIIMS

S. No	Fee details	Amount Payable
1.	a. Tuition Fees: b. Pot Money: c. Hostel Rent; Payable at the time of admission d. Caution Money (Only one time) e. Hostel Security:	₹ 5,856/-
2.	Exam Fee: For each Professional Examination (Annual or Supplementary) irrespective of number of subjects	₹ 1,000/-
3.	Mess Expenses: (Per Annum) Approx.	₹50,000/-

B. Miscellaneous Expenses (borne by the students)

S. No	Details	Amount
1.	Books: (i)1 <sup>st</sup> & 2 <sup>nd</sup> semester (1 <sup>st</sup> Prof) (ii) 3 <sup>rd</sup> , 4 <sup>th</sup> & 5 <sup>th</sup> semester (2 <sup>nd</sup> Prof) iii)6 <sup>th</sup> & 7 <sup>th</sup> semester (3 <sup>rd</sup> Prof Part-I) (iv)8 <sup>th</sup> & 9 <sup>th</sup> semester (3 <sup>rd</sup> Prof Part-II)	₹ 10,000/- approx. ₹ 10,000/- approx. ₹ 10,000/- approx. ₹ 10,000/- approx.
2.	Add: Laptop: (to be bought by students) Approx. (Optional)	₹ 50,000/-

To be paid as per actual Bill & Voucher.

Aupan Haldare 3/9/21

क्षेण इलवर/Dr. Arpan iaktar कुलसक्षित/Angletar अखिल पारतीय **अधुनियम संस्था**न,वेवघर ALL NOA MSTITUTE OF NOTION AND MEMORA DECOMAR Nodal Officer
AllMS Deoghar Singh
Nodal Officer
AllMS DEOGHAR
(Jharkhand)

Deoghar, Jharkhand 814152



### REGISTRAR OFFICE, ACADEMIC SECTION

No.:		Date:
	FEE RECEIPT	
,	This is to certify that Mr./ Ms	
	D/O	Resident of
	Round of Counselling under	
	and Roll No.	in MBBS Batch
	of AIIMS Deoghar has deposited Rs.5856/-	as Admission cum Tuition
Fees, R	Rs. 10,500/- as Mess Fees and Rs. 1,000/- as One Time	Refundable Hostel Security
Deposi	t at the time of admission in AIIMS Deoghar.	
Note: S	Students should claim their security money deposit of Rs	1000/- within 3 years after
comple	etion of tenure, failing which it will be forfeited.	
	This has the approval of the Competent Authority.	
		Registrar
		AIIMS Deoghar
	Signature of Student Signature of Parent	



NO:

### ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

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### REGISTRAR OFFICE, ACADEMIC SECTION

# ACADEMIC SECTION FORM SHOULD BE FILLED IN BLOCK LETTERS ONLY

To,			

To, The Provost Hostels, AIIMS, Deoghar- 814142 AFFIX
PASSPORT SIZE
PHOTOS HERE
Color Front face
against white
back ground

DATE:

### SUB: APPLICATION FOR ALLOTMENT OF HOSTEL ACCOMMODATION

Respected Sir,		
I have joined as M.B.B.S. Stud	dent in the Academic Session	vide
A.I.I.M.S Joining Letter No.		It is
requested that I may be allotted hostel a	accommodation in the A.I.I.M.S. Hostel. My brie	of particulars are below:
1. Name of the Student		
3. Date of Admission		
4. Contact No	.5. Email ID	
6. Aadhar No		
7. Blood group8. Allergy (If a	ny)	
9. Father's Name	Contact No	
10. Mother's Name	Contact No	
11. Permanent Home Address &Tel. No		
12. Local Guardian's Name & Address in	Deoghar & Tel. No	
13. Two Marks of Identification (a)		
(b)		
14. Whether married / unmarried/ divorc	ed/ separate/window	
15. Source of financial support (e.g., Scho	olarship/Stipend etc.) during stay in the Hostel .	
16. Hostel Security of Rupees		
17. DD/NEFT No	Dated	



### REGISTRAR OFFICE, ACADEMIC SECTION

Students should claim their security money deposit of Rs 1000/- within 1 years after completion of tenure, failing which it will be forfeited."

This application should be forwarded by the Provost Hostels along with the joining report (duty signed by the Registrar) should be attached.

### **DECLARATION:**

- A. I Agree to abide by the hostel rules and regulation, in force, regarding the allotment of Hostel Accommodation and the use of the hostel room.
- B. I, further state that I will abide by all such orders as may be issued from time to time by the Superintendent of Hostels and on his behalf by an appropriate authority.

	Yours faithfully,
	()
	Signature of the Student
	Hostel Name
	Room No
	P.T.I Campus,
	AIIMS Deoghar
Signature of Parent/Guardian	
Aadhar Number	_
Signature & Stamp of Registrar (Academic Sec	tion)
FOR REGIST	RAR OFFICE USE ONLY*
Hostel Name is to be submitted to	ost and Asst. Provost Hostels with Room No. and Office of Registrar in the Academic Section for the to Student by Registrar AIIMS Deoghar
Mr./Mrs	has been allotted Room No.
in Boys/Girls Hostel	w.e.f.
Signature of Asst. Provost Hostels	
Signature & Stamp of Provost Hostels	_



### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure a

### **DECLARATION BY PARENT**

1,	do	here	by	declar	e that	my	ward	Mr./Ms.
	ha	.S	tak	en	admiss	ion	in	MBBS
Batch in AIIMS	Deog	har. I	do h	nereby (	declare	that no	other 1	nembers/
Siblings/first degree relative of my family	is tak	king a	ny S	Scholar	ship in	NSP/	other st	ate Govt.
Signature by Parent	••							
Name of the Parent								
Data								



### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure b

### **DECLARATION BY STUDENT**

I, Mr./Ms	S/O D/O
MBBS Batch	do hereby declare that no other members/Siblings/first
degree relative of my famil	y is taking any Scholarship in any in NSP/ other State Govt.
Signature by Student	
Name of the Student	
Roll No	
Batch	
Rank	
Category	
Date	•••••



### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure c

### **DECLARATION BY STUDENT**

I, Mr.	/Ms				
admitted in M	BBS	Batch d	lo hereby	declare tha	t I had/ had not
not taken	earlier	applied	for	Scholars	hip Scheme
		under		Ministr	y of
	<del>-</del>		or	any Educ	cation Loan or
Financial Ass	sistance till d	date. (State	reasons	if earlier	applications of
Scholarships/	Education	Loan/ Fir	nancial	Assistance	was rejected)
				(state rea	sons). Hence, I
want to	apply	now	for	Scholarsh	ip Scheme
				_under	Ministry of
				/ ot	her State Govt.
or other Educ	ation Loan in	which I am	eligible	for Scholar	rship/ Financial
Assistance as	per Guideline	s of the Scho	olarship S	Scheme in N	ISP/ other Govt.
agencies etc. (	details of Scho	olarship Sch	eme to be	e attached).	
I hereby	also declare t	hat I am at	present ı	under no fii	nancial debts or
liabilities as of	f now.				
Signature by S	Student	• • • • • • • • • • • • • • • • • • • •	•		
Name of the S	tudent	• • • • • • • • • • • • • • • • • • • •			
Roll No	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •			
Rank	•••••	•••••			
Batch	•••••	•••••			
Category		•••••			
Date					



### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure d

### **UNDERTAKING BY STUDENT**

I, Mr./Ms	S/O I	0/0
Roll No	Rank	Category
Batch	do hereby dec	clare that I am not availing any
Scholarship under any M	inistry, Education L	oan, Financial Assistance from
other agencies till date.		
Signature by Student		_
Name of the Student		
Roll No		
Batch		
Rank		
Category		
Date		



### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure e

### UNDERTAKING BY PARENT

I,	hereby declare that my wa	ard, Mr./Ms.
	admitted in MBBS Batch	is
not availing any Scholarship under any	y Ministry, Education Loan, Financial Ass	sistance from
other agencies till date and is under no	financial debt or financial liabilities as of	`now.
Signature of parent		
Name of Parent		
Date		

### REGISTRAR OFFICE, ACADEMIC SECTION

Annexure f

<b>DECLAR</b>	ATION BY	STUDENT
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I, Mr./Ms			S/O	D/O	
MBBS Batch		Rank	Catego:	ry	do hereby declare that I will
					s in Registrar Office for final
Verification 1	by Institute Nodal C	Officer (Regi	strar) and Atte	station by Co	ompetent Authority (Executive
Director) thro	ugh Asso. Dean/ Ass	t. Dean Stude	ent Welfare for	application of	Scholarships/ Education Loan/
any Financial	Assistance-				
1. Bonafide C	ertificate issued by R	egistrar offic	e.		
	_		_	more than 50%	% marks (if the student is in 1st
	ied Fresh application		. ,		
			_		Professional Exam accordingly
of the student or Final year)		Examination	(if student is ap	plying for ren	ewal of Scholarship in 2nd, 3rd
	rtificate from Office i		_	re employed a	nd Income Certificate of Parent
5. Aadhar Ca	•	Caste Certific	ate, Domicile C	Certificate of S	Student, Class 10 and Class 12
	,	•		00/- Mess Fee	es and Rs 1,000/- Hostel Fees.
-					nowing Mess fees, Examination
	Hostel fees, Tuition fe			•	
• I decla	are that I will give the	Grant In Aid	l (General) Acc	ount of AIIM	S Deoghar- Name of Account-
	ū		` ′		AIIMS Patna [Account No.
57931	0110009737 IFSC C	ode: BKID0	005793] in any	Scholarship A	pplications/ Education Loan for
receiv	ing any form of Finai	ncial Assistan	ice.		
• I also	declare that I will sub	mit my Scho	larship/ Educati	on Loan/ Fina	ncial Assistance application for
Final	verification in Regist	rar Office ald	ong with all deta	ils of the Sch	olarship Scheme through Asso.
Dean/	Asst. Dean Student	Welfare be	fore 20 days f	rom last dat	e of verification in National
Schola	arship Portal/ State	Govt. Schola	rship Schemes		
• I also	hereby declare that I	will be abide	by the detailed	guidelines and	d FAQs of Scholarship in NSP/
other	Govt. agencies	etc, I am	n applying v	which show	that I am eligible for
		Scholars	hip Scheme und	er Ministry of	· 
• I also	undertake that the a	bove docume	ents which I wil	l deposit alon	ng with Online Application are
auther	ntic which will be u	iploaded in 1	NSP/ Other sta	te Govt. Port	al. I understand that and any
discre	pancies in above mei	ntioned docur	nents, inadequa	te online fillir	ng of scholarship application in
NSP c	r suppression of actu	al facts can le	ead to non-verifi	cation of my	Scholarship Application.
• I also	declare that at any po	int of time if	it is found that	I am taking tw	vo Financial Assistance through
NSP S	scholarship/ State Go	vt. Scholarshi	ip/ Education Lo	oan, my candid	dature is liable for cancellation.
Signature by	Student		Name of the	Student	
Roll No	Rank _		_Category	MBBS Ba	atch
Date					
Counter Signa	ature of Parent				



### REGISTRAR OFFICE, ACADEMIC SECTION

MEDICAL BOARD OF ASSESSMENT OF PWBD CANDIDATES
The candidate (Name
Roll No
by Medical Assessment Board of AIIMS Deoghar constituted for PwBD Candidates.
The Assessment of the Board is as follows –
The Board after examining the candidate found the Certificate issued by vide letter no NEET
for Disability of is true and the board agrees to allow the student to
tale admission under the PH Category in AIIMS Deoghar.
Percentage of Disability:
Fit/ Unfit to join MBBS Course in PH Category: Yes/ No.
Signature of the Assessment Board-
1. Dr. Manoj Kumar Saurabh, Addl. Prof. Pharmacology- Deputy Medical Superintendent
(Chairman)
2. Dr. Deepak Kumar, Asso. Prof. Physical Medicine & Rehabilitation (Member
Secretary)
3. Dr. Rashmi Kumari, Asst. Prof. Ophthalmology- Member
4. Dr. Saroj Kumar Tripathy, Asst. Prof. Pediatrics- Member
5. Dr. Vikash Raj, Asst. Prof. Orthopedics- Member
6. Dr. Shashank, Asst. Prof. ENT- Member
7. Dr. Santanu Nath, Asst. Prof. Psychiatry- Member

8. Dr. Mona Lisa, Asst. Prof. Pathology/ Lab Medicine- Member \_\_\_\_\_



### REGISTRAR OFFICE, ACADEMIC SECTION

### Annexure-I

### Admission Committee AIIMS Deoghar upon Arrival at PTI Daburgram

Sl. No.	Name of the Faculty	Designation	Department	Remarks
1.	Dr. Ranwir Kumar Sinha	Assistant Professor	Pathology	Making of Personal Files of Students and checking of [Registration cum Confirmation Letter, Admit Card, Rank Letter and Allotment Letter (All Provided by NEET)] ( <b>Table 1</b> ) assisted by LDC Registrar Office Kumar Keshab.
2.	Dr. Anirban Ganguly (Assistant Provost Hostels)	Assistant Professor	Biochemistry	Making students fill up the all the forms, Hostel Applications form and undertakings and checking of Relieving Letter In Original from earlier Institutions where allotted and reported (if applicable) (Table 2)
3.	Dr. Anup Dadarao Dhanvijay	Associate Professor	Physiology	Checking of Demand Draft/ NEFT Receipt of Admission and Mess and Angi-Ragging and Gap Certificate Affidavits and all Forms ( <b>Table 3</b> )
4.	Shri. Sanjay Kumar	Assistant Controller of Examination	Examination Cell	Checking of Certificates (SC, ST, OBC, EWS, PWBD) (Table 4)
5.	Dr. Richa	Associate Professor	Community and Family Medicine	Checking of all Forms, Demand Drafts, Affidavits, Undertakings, Declarations, Certificates as per Checklist ( <b>Table 5</b> )
6.	Dr. Subhodh Kumar (Assistant Dean Examinations)	Associate Professor	Pharmacology	Final Checking of Complete Forms with Originals and Medical Certificate as per Checklist (Table 6)
7.	Dr. Arpan Haldar ( <b>Registrar</b> )	Assistant Professor	Anatomy	Final Verification in MCC Portal and Provisional Admission Letter ( <b>Table 7</b> ) assisted by LDC Exam Section Mr. Rajkumar
8.	Dr. Manoj Kumar Saurabh (Deputy Medical Superintendent)	Additional Professor	Pharmacology	Enquiries of the candidates and parents regarding counselling and admission process in regard to further rounds- 2nd/Mop-Up/Stray Round and Student Welfare activities ( <b>Table 8</b> )
9.	Prof. Vanita Lal (Associate Dean Academics)	Professor & Head	Biochemistry	MBBS Counselling Admission Coordinator regarding Student or Parent queries regarding Affidavit/Certificates or Medical/PWBD Assessment Academic and Examination clarifications (Table 9)



### ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare) भारत सरकार/ Government of India

### REGISTRAR OFFICE, ACADEMIC SECTION

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**Annexure-II** 

# Standing Medical Board of AIIMS Deoghar for Medical Examination of reporting Candidates upon Arrival at AIIMS Devipur Permanent Campus after each MCC counselling round.

Sl.	Name of Faculty	Designation	Department	Remarks
No.				
1.	Prof. Satya Ranjan Patra	Professor	General Surgery	Chairman
	(Medical Superintendent)			
2.	Dr. Rajesh Kumar	Associate Professor	General Medicine	Member
	(Deputy Medical Superintendent)			Secretary
3.	Dr. Sarthak Das	Associate Professor	Pediatrics	Member
4.	Dr. Manish Raj	Associate Professor	Orthopedics	Member
5.	Dr. Abhishek Onkar	Associate Professor	Ophthalmology	Member
6.	Dr. Priyanka Rai	Associate Professor	Obstetrics and	Member
			Gynecology	
7.	Dr. Nikhil Kumar	Assistant Professor	Pathology/ Lab.	Member
			Medicine	
8.	Dr. Shashank	Assistant Professor	ENT	Member
9.	Dr. Anirban Ganguly	Assistant Professor	Biochemistry	Member
10.	Dr. Suman Kumar	Assistant Professor	Microbiology	Member



# ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR (स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय , भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान) (An Institution of National Importance under Ministry of Health & Family Welfare) भारत सरकार/ Government of India

### REGISTRAR OFFICE, ACADEMIC SECTION

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### Annexure-III

### Medical Assessment Board of the AIIMS Deoghar for Verification of Disability Certificate PwBD Candidates from Centers of Disability marked by MCC

Sl.	Name of Faculty	Designation	Department	Remarks
No.				
1.	Dr. Manoj Kumar Saurabh	Additional	Pharmacology	Chairman
	(Deputy Medical Superintendent)	Professor		
2.	Dr. Deepak Kumar	Associate Professor	Physical Medicine	Member
			& Rehabilitation	Secretary
3.	Dr. Rashmi Kumari	Assistant Professor	Ophthalmology	Member
4.	Dr. Saroj Kumar Tripathi	Assistant Professor	Paediatric	Member
5.	Dr. Vikas Raj	Assistant Professor	Orthopedics	Member
6.	Dr. Shashank	Assistant Professor	ENT	Member
7.	Dr. Santanu Nath	Assistant Professor	Psychiatry	Member
8.	Dr. Mona Lisa	Assistant Professor	Pathology/ Lab	Member
			Medicine	