

PHOTOGRAPH : VERIFIED / NOT VERIFIED

Name.....Designation.....
signature..... of Photograph verifying officer

PHOTO (as
on NEET
admit card)

PROFORMA OF SCRUTINY
PARTICULARS & DECLARATION OF THE CANDIDATE
FOR MD/MS BATCH-2024-25

(TO BE FILLED IN BY THE CANDIDATE IN CAPITAL LETTERS)

1. NAME OF THE CANDIDATE _____ SEX _____
2. DATE OF BIRTH _____ BLOOD GROUP _____ NATIONALITY _____
3. PLACE & STATE OF BIRTH _____
4. MOBILE NO _____ E-Mail _____
5. SEAT – STATE / ALL INDIA _____
6. NAME OF COLLEGE WHERE MBBS DONE _____
7. CATEGORY – EWS/ST / SC / OBC / UR _____ ALLOTED CATEGORY _____
8. CLASS – MP (SN) / FF / F / PH / EWS / X (NO CLASS) _____
9. FATHER'S NAME _____ OCCUPATION _____
INCOME _____ MOBILENo. _____ E-Mail _____
10. MOTHER'S NAME _____ OCCUPATION _____
INCOME _____ MOBILENo. _____ E-Mail _____
11. TOTAL ANNUAL FAMILY INCOME _____
12. INCOME CERTIFICATE ISSUING AUTHORITY _____

13. PERMANENT ADDRESS _____
_____ & PHONE NO. _____

DECLARATION

I hereby solemnly declare that the information given by me in this form and enclosures is true and I am solely responsible for its accuracy. I am fully aware that providing incorrect and false information due to any reason at the time of allotment of the seat and / or at the time of admission or subsequently, is an offence and my admission is liable to be cancelled without any notice at any time by the Director, Medical Education / Dean of the Institution.

Name of Parent/Guardian.....
(RELATION).....
Signature
Date :.....

Name of Candidate.....
Signature
Date :.....

FOLLOWING ORIGINAL DOCUMENTS ARE BEING SUBMITTED BY THE CANDIDATE 2024-25

Name of Candidate.....S/o, D/o.....
 Category.....
 Willing for up-gradation (Yes/No).....

S.NO	DOCUMENT	Name of issuing body	Document no.	Documents date	Signing Authority of document	Remark
1	Confirmation Letter (Optional)					
2	*Allotment Letter					
3	*Admit Card of Exam issued by NTA					
4	* NEET PG Result/ Rank letter					
5	*Proof of identity (Photocopy: Aadhar/Pan/ Driving Licence/Passport)					
6	*10'th Mark Sheet & Certificate (DOB Certificate)					
7	*12'th Mark Sheet					
8	*12'th certificate					
9	Mark Sheets of All M.B.B.S.-I Prof.					
10	II Prof.					
11	III Prof. (Part-I)					
12	III Prof. (Part-II) Final					
13	Internship Completion Certificate					
14	Degree of MBBS					
15	Permanent / Provisional Registration					
16	*Domicile certificate (Optional for All India Quota Students)					
17	*Caste Certificate (SC,ST,OBC, Hindi/English) For All India Candidate format as per central format					
18	EWS Certificate (स्टेट कोटे के अभ्यर्थियों हेतु म.प्र. शासन के सक्षम अधिकारी द्वारा 01 जनवरी 2024 या उसके पश्चात् जारी किया गया प्रमाण पत्र)					
19	Certificate – P.W.D./F.F. / M.P. / P.H.					
20	Affidavit of Pro forma -2 (क)					
21	Affidavit of Pro forma -2 (ख)					
22	Proforma-5 Sponsorship certificate (for Asst. Surgeon & Demonstrators)					
23	Proforma-6 Domicile certificate of other state (100 Rs. Stamp)					
24	Proforma-7 (वचन पत्र)					
25	N.O.C. for Asstt. Surgeon/Demonstrators)					
26	Declaration on oath about P.G. course 100 Rs Stamp (for State quota only)					
27	Gap Affidavit if applicable					
28	Migration Certificate					
29	Pen drive of all above documents					
30	15 recent coloured photograph (As on NEET admit card of 2.5 X 2.5 cm and one 4X6 colored photographs write the name, NEET application no. and merit no. and metric no. with ball point pen on the back of photo.1 Set of Self Attested Color photography and 1 set of Self Attested black and white photocopy of all above documents is required.					
	Fees Receipt	Amount.....Transaction ID.....Date.....				
Total No. of documents _____			Signature of the candidate _____			

The above mentioned submitted documents were scrutinized by the committee & found to be correct. Candidate is recommended for E-document verification & depositing the fees for admission.

Name & Signature

Name & Signature

Name & Signature

Name & Signature

Co-Ordinator
Scrutiny Committee
Government Medical College, Ratlam