



**GOVERNMENT MEDICAL COLLEGE & MAHARASHTRA POST- GRADUATE
INSTITUTE OF MEDICAL EDUCATION AND RESEARCH, MUHS, NASHIK.**

Website – <http://mpgimer.edu.in>

Email: - mpgi@muhs.ac.in.



APPLICATION FORM FOR ADMISSION TO FIRST YEAR M.B.B.S. COURSE 2024-25
(Note: Use Capital Letters Only, Use ✓ Mark & Strike out whichever is not applicable, Do not overwrite.)

Paste recent
passport size
photograph
here.

1) CANDIDATE'S NAME (Strictly as per Class XII or Gazette Notification):									
(Surname)			(First Name)			(Father's/ Husband Name)			
2) CANDIDATE'S NAME (in local language i.e Devnagari (Marathi) :									
(Surname)			(First Name)			(Father's/ Husband Name)			
3) MOTHER'S FIRST NAME :									
4) Gender : MALE <input type="checkbox"/>		FEMALE <input type="checkbox"/>							
5) Blood Group (with Rh) :									
6) Type of admission(Quota) :									
7) Category :		Open/ Reserved If Reserved : SC/ ST/ NT(A)/ NT(B)/ NT(C)/ NT(D)/ OBC/ SBC/EWS/SEBC Caste : _____ CVC- Yes/No							
8) NEET-2024 Roll No. :		9) NEET-2024Marks :		Out of		720		Percentile	
10) ALL INDIA RANK-		11) Application Number :							
12) Allotment Date (CET CELL/ AIQ) :									
13) Admission Date at College :									
14) H.S.S.C. Passing Year :									
15) H.S.S.C. Grand Total :									
16) H.S.S.C. Board:									
17) H.S.S.C. Attempts:									
18) H.S.S.C. PCB Marks :		Out of				%			
19) Would you like to apply for Hostel :		Yes/ No							
20) H.S.S.C. PCBE Marks :		Out of				%			
21) Religion :									
22) Last School/ College attended:									
23) Date of Birth :									

24) Place of Birth :									
25) Marital Status :	Married/ Unmarried								
26) Permanent Address :	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">PIN Code</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>	PIN Code							
PIN Code									

State:	District:	Tehsil:
Students' Location Category:	Rural/ Urban/ Tribal	
Contact Details:	Phone No.:	Student Mobile No.:
		Parent's Mobile NO.:
Student E-mail ID :	Parent's Email id-	
Willingness about organ donation after Accidental Death of student	Yes / No	
Occupation of Father/ Mother/ Guardian:	Service/ Business/ Profession/Farmer/Laborer/ Retired	

I hereby declare that, the information filled in by me in this form is true to the best of my knowledge.

I have Attached all the mandatory document as specified in the list documents as specified in the list-

Signature of the Student

List of Documents for Admission

Sr. No.	Name of Document/ Certificate	Attached (Yes/No)	Sr. No	Name of Document/ Certificate	Attached (Yes/No)
1	Nationality Certificate		16	Aadhar Card	
2	Domicile Certificate		17	Migration Certificate (If applicable)	
3	SSC Mark Sheet		18	Leaving/Transfer Certificate	
4	SSC Passing Certificate		19	Defense Certificate	
5	HSC Mark Sheet		20	Physical Handicap Certificate for PWD (Annexure – “D”) (If applicable)	
6	HSC Passing Certificate		21	Hilly Area Certificate (If applicable)	
7	NEET Score Card-2024 - 25		22	Election Card (Annexure-C if less than 18 Years)	
8	Admit Card issued by NEET- UG-2024-25		23	Passport (If applicable)	
9	Selection Letter CET CELL/ AIQ-2024		24	Ration Card	
10	Caste Certificate (If applicable)		25	Student's Haemogram Report (Two Copies)	
11	Caste Validity Certificate (If applicable)		26	D.D. of Requisite Fees	
12	Non- Creamy Layer Certificate (If applicable)		27	Passport size Photographs- 04 Nos.	
13	EWS Certificate (If applicable)		28	Income Certificate 2023-24 (For EWS, EBC Students)	
14	Self-Educational Gap Affidavit by student certified by Executive Magistrate / Notary. (If applicable)		29	MKB Certificate	
15	Physical Fitness Certificate		30	Bonafide / Character Certificate	

[Do not leave any field blank strictly write “Yes” if document attached and “No” if not attached. Write “N.A.” if not applicable. All certificates should be submitted in Original and two sets of attested Xerox copies.]

Admission Status: Admitted/ Cancelled

DATE : _____

DEAN
GMC & MPGIMER, MUHS, NASHIK

<u>Verification of Original Documents</u>		
(Note: Deficit of any original document found should be strictly mentioned below)		
(1)	(2)	(3)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.
Remarks if any :	Remarks if any :	Remarks if any :
Name:	Name:	Name:
Designation:	Designation:	Designation:
Signature:	Signature:	Signature: