GOVERNMENT MEDICAL COLLEGE, SURAT.

Admission Year: 2024-25

Unique ID No.:

For Office Use Only:

First Time Reporting		Admission Category &	
Date of Student		Merit No.	
Date of Admission		Library/Hostel Deposit	
taken		Receipt No. & Date	
Bond/Bank Guarantee Amount submitted	Bond/Bank Guarantee `. 20,00,000 /-	Library/Hostel Fees. Receipt No. & Date	

(Form to be submitted in Duplicate with Certificates Copy)

An Application Form for Admission in First Yr. M.B.B.S. Course for Admission Year - 2024-25

- 1. Please read the instructions carefully before filling up relevant entries in this Form:
- 2. All Information should filled by Student Only, Not by any parent.
- 3. Use CAPITAL BLOCK Letters Only. Give right Code No. where it is given.
- 4. Letters should be CLEAN & READABLE Hand writing.
- 5. Fill up all the information as per Last School Record.
- 6. Don't change any Information.

AFFIX HERE YOUR CURRENT COLOURED PASSPORT-SIZE PHOTOGRAPH Don't Staple.

To, The Dean, Government Medical College, SURAT.

Sir,

I undersigned kindly inform you that I have been provisionally selected as a student of First Year M.B.B.S. at your college through Chairman, Admission Committee, (Admission Cell) C/o. Admission Committee for Professional Under Graduate Medical Education Courses, Gandhinagar. I request you to accept fees & Deposits & give me a Final admission in your college. I have attached the following Certificates/Documents with admission form.

(1) Registration Acknowledgement Slip.	(Attested Xerox Copy)	[]
(2) Provisional Admission Allotment Order Year-2024-25.	(Attested Xerox Copy)	[]
(3) School Leaving Certificate/Transfer Certificate.	(Attested Xerox copy)	[1
(4) Medical Fitness Certificate	(Attested Xerox copy)	[1
(5) Attempt/Trial Certificate of HSC Exam.	(Attested Xerox copy))	[1
(6) Caste Certificate (Only for Reserved Category)	(Attested Xerox copy)	[1
(7) Non-Creamy layer Certificate (Only for SEBC category)	(Attested Xerox copy)	[1
(8) Mark Sheet of 10th Std Examination.	(Attested Xerox copy)	[1
(9) Mark Sheet of H.S.C.(Std.12) Examination.	(Attested Xerox copy)	[1
(10) Mark Sheet of NEET-2024 Examination (by NTA).	(Attested Xerox copy)	[1
(11) Domicile Certificate (if applicable)	(Attested Xerox copy)	[]
(12) Aadhar Card.	(Attested Xerox copy)	[]
(13) Fees Receipt of Axis Bank . `. 25,000/-	(Attested Xerox copy)	[]

My relevant details are as per my school record as under:

	(Surname First)		First Name		Father's Name	
	Candidate's Gender :	Male	e Female			
	_	_				
	Father/Guardian's Occup					
	Full Postal Address of Can Name/Taluka/City & Dist				se No./ Village/S	tre
				· <i>,</i>		
				P	incode :-	
i]	Date of Birth:		-	-		
-	(DD/MM/YEAR)					
[]	Birth Place (With	Dist	rict :-	State :-		
	District & State)					
]	Home Town/ Domicile: (With District & State)	Dist	rict :-	State :-		
	,		4 C(1 F 1 A 11			
-	ontact No. with S.T.D. Code No.:		1. Std. Email Add. :- 2. Student WhatsApp	Number	<u> </u>	
-	\		3. Parents WhatsApp			
			4. Land Line No. :-			
	A 1					
-	Admission Merit No. with abbreviated Category		Category' Name	&	Merit No.	

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(c) O		d Mer	it Ma	arks Atte	(NE	EET	Pero	centag	ge %)	for S.C.	Med Exai	dica	al A	dmi	ssio					:
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-: DECLARATION:-

All the information given in this Admission Form for Admission -2024-25 is correct and true as submitted previously in the Application Form at Chairman Admission Committee for Professional Under Graduate Medical Education Courses, Gandhinagar as per best of my knowledge. We read and understood the rules of Admissions. We agreed/abide to follow all rules of college & University.

Most Important:

Students & Parents are DIRECTED TO KEEP **10 (TEN)** Attested ZEROX COPIES SETS of EACH Under Mentioned ORIGINAL CERTIFICATES/DOCUMENTS For FUTURE REQUIREMENT.

ORIGIONAL CERTIFICATES OR Attested ZEROX COPIES will not be Provided to STUDENT up to the Completion OF ADMISSION/UNIVERSITY REGISTRATION PROCESS..

Date:-		<u></u>
<u></u>		
	Sign. of Father/Mother	Sign. of Student

Dean Government Medical College Surat

Government Medical College, Surat

FOR OFFICE USE ONLY (NOT TO BE FILLED BY STUDENT)

To, The Account Section, G.M.C.,Surat.

Please accept the all necessary Fees & Deposit WITH/WITHOUT HOSTEL, for the admission and issued the receipt.

Fees Structure of Admission								
Sr. No.	Fees Description	Amount	Remarks					
1	Hostel Deposite	1000 /-						
2	Hostel Fee	1200 /-						
3	Library Deposite	500 /-						
4	College Deposite	50 /-						
	Total	2750 /-						

Dean Government Medical College Surat