

SCRUTINY FORMAT FOR SUPER SPECIALITY

ADMISSION FOR SUPERSPECIALTY DM /M.Ch. COURSE 2024-2025

Name of the Student: - _____

Date: - _____

Subject : _____

(Note : Candidate should arrange the set of original documents and two sets of attested photocopies separately in the order given below for verification.)

Sr No	Original Documents and Two set of attested Photo copies separately	Yes/No
1	Admission fee payment receipt / Demand Draft	
2	Nationality certificate / Xerox copy of Valid Passport duly attested by Dean /Birth certificate having endorsed with Nationality as Indian on it.	
3	Birth Certificate / Valid Passport	
4	Selection letter. (DM /M.Ch.)	
5	NEET-SS-2024 RANK LEETER	
6	NEET -SS 2024 Hall ticket	
7	Passing / Degree Certificate (M.D./M.S./DNB)	
8	MCI Recognized Certificate (M.D./M.S./DNB)	
9	Attempt certificate. (M.D./M.S./DNB)	
10	Marksheets of MBBS 1st, 2nd and 3rd professional examination	
11	Internship completion certificate	
12	MBBS Degree certificate	
13	Permanent Registration certificate (MMC / MCI / Other State Medical Councils)	
14	Additional Registration Certificate	
15	College leaving certificate / Transfer certificate. (M.D./ M.S. Pass College)	
16	Migration certificate issued by respective University (if applicable).	
17	Self Educational gap (after qualifying Degree) Affidavit by student certified by executive Magistrate /Notary (If the Gap is more than 6 months after Completion (M.D / M.S/DNB)	
18	Medical Fitness certificate as per attached format	
19	Physically Handicapped certificate by appropriate authority (if applicable)	
20	Undertaking of Bond [Rs.2, 00, 000, 00 (Rs. Two Crore)] on Rs.500/- Bond Paper of 2 years	
21	Aadhar Card/Driving License/Pan Card Xerox copy	
22	Voter Id Card Xerox copy	
23	Status Retention Form	

23. Deficiency If Any: _____

Student Sign

Scrutiny officer

Name & Sign

SUPER SPECIALITY ADMISSION 2024-25
PERSONAL INFORMATION

Passport

Size

Photo

ADMISSION FOR DM /M.Ch. COURSE FOR THE YEAR: 2024-25

NAME OF THE STUDENTS: _____
(As per Degree Certificate)

ADMISSION FOR SUBJECT : _____

DATE OF BIRTH : _____

PERMANENT ADDRESS : _____

LOCAL ADDRESS : _____

CONTACT NO : MOBILE NO. _____ E-MAIL ID : _____

CONTACT NO OF PARENTS : _____ E-MAIL ID : _____

NEET-SS CML NO. : _____ Marks _____ Percentile _____

POST GRADUATE COURSE : _____ MARKS : _____ PERCENTAGE : _____

PERMANENT REGISTRATION NUMBER MCI- _____

PERMANENT REGISTRATION NUMBER STATE MEDICAL COUNCIL - _____

NAME OF STATE MEDICAL COUNCIL - _____

RELIGION : _____

SUB CASTE : _____

CATEGORY : _____

DATE OF ADMISSION : _____

DATE :

SIGNATURE OF THE STUDENTS

FOR DM / MCh

MEDICAL FITNESS CERTIFICATE FORMAT

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CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Dr. who is desirous of admission to Medical Super specialty Courses.

He/she has not given any personal history of any disease incapacitating him/her to undergo the professional course. Also, on clinical examination it has been found that he/she is medically fit to undergo the medical super specialty course (NEET-SS 2024).

- (1) Absence of any incapacitating and /or progressive systematic disease/disorder / condition,
- (2) Absence of any disability of upper limb/s,
- (3) Absence of any major visual/auditory disability,
- (4) Absence of psychosis/neurosis/mental retardation,
- (5) Ability to maintain erect posture,
- (6) Reasonable manual dexterity.

Address of the Registered Medical Practitioner	Signature
	Name
	Registration No.
	Seal of Registered Medical Practitioner
Date	

✂.....

Note:

A candidate must be medically fit to undergo the Medical Super specialty Courses (NEET-SS 2024) applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed Proforma, as given above on a **Letterhead**.

GAP AFFIDAVIT FORMAT ON Rs.100/- OR 500/- BOND PAPER

1. I, Dr. _____, S/o _____, age _____
R/o : _____ hereby solemnly affirm and state on oath as
under

i) That I the deponent have passed MD/MS/DNB _____course
Examination in the year _____from _____college.

ii) That after passing the aforesaid examination in that year did not
join any school/college/Institution from year_____.

iii) That the session _____is the gap year of the deponent.

2. I, Dr _____do hereby solemnly affirm that the contents of this
affidavit from paras 1 (i) to 1 (iii) are true and correct to the best of my personal
knowledge and belief, I do understand that if the above affirmation is proved to be
false, my admission in this institute would be cancelled for which I solely will be
responsible.

The above contents are correct to the best of my knowledge and belief. If it is found false
I will be liable for punishment under section 199, 200 of I.P.C.

Date :

Signature of Candidate

SERVICE BOND ON Rs.500/- BOND PAPER

I _____ admitted to _____ post graduate Super Specialty Course at Grant Government Medical College in the year 2024-25 do solemnly affirm and admit that, I shall be serving the Government of Maharashtra or Local Self Government or Defense Services for a period of **TWO** year, failing which, I will pay to Government of Maharashtra a sum of Rs.2,00,00,000/- (In words Rs. Two Crore only) for the default.

Date : / /2025

Place :

Signature :

Name :

Address :

Mobile No :



महाराष्ट्र शासन
GRANT GOVT. MEDICAL COLLEGE &
+ SIR J.J.GROUP OF HOSPITALS,MUMBAI +
(GOVERNMENT OF MAHARASHTRA)

ग्रेट शासकीय वैद्यकीय महाविद्यालय व सर ज.जी.समुह रुग्णालये, मुंबई-४००००८
Tel.No.2373 55 55, 2373 1144 ; Fax No.2373 55 99; e-mail – gmcacad@gmail.com



FEES NOTICE

Subject:- Payment of Fees for Super Specialty Students (Academic Year 2024-2025)

All Super Specialty (DM/MCh) Students who wants to take admission for Super Specialty course through NEET SS 2024-25 must follow the following instructions:

They must bring original set of documents and two self attested photocopies of the same.

- 1) They must bring two separate DD from a Nationalized Bank (i.e. 138300/- & 18010/-) in favour of **Dean Grant Govt. Medical College, Mumbai.** (Payable at Mumbai).
- 2) **Tuition Fees: -138300/- (One Lakh Thirty-Eight Thousand and Three Hundred Only)**
- 3) **Other Fees: -18010/- (Eighteen Thousand & Ten Rupees only)**

Other Fees:-

Admission Fees:-	Rs.1500/-
Vikas Nidhi:-	Rs.5000/-
Resident Deposit:-	Rs.4000/-
Hostel Fees:-	Rs.4000/-
Library Deposit:-	Rs.2000/-
Library Fees:-	Rs.1000/-
Gym Fees:-	Rs.500/-
Rashtriya Seva Yojana	Rs. 10/-
Total	Rs. 18010/-

VICE DEAN

**Grant Government Medical College
Mumbai**