GRANT GOVERNMENT MEDICAL COLLEGE MUMBAI

Instruction Manual for PG Admission Process 2025-2026



WELCOME

Contact Details for Query: (Between 11.00 to 4.30 PM ONLY)

- 1. For any query, please call during 11:00 AM to 4:30 PM Landline Number: 2373 55 55 Ext: (2202)
- 2. Official Email ID: gmcacadpg@gmail.com
- 3. Official Website:gmcjjh.edu.in

POST GRADUATE- ADMISSIONS PROCESS GRANT GOVT MEDICAL COLLEGE MUMBAI

(All India Quota/ State Quota/ In Service Quota)

All students allotted PG seat at Grant Govt. Medical College, Mumbai (Maharashtra) should follow below mentioned instructions for PG admission:

- 1. <u>Download & print this PDF file. READ CAREFULLY ALL DETAILS</u>
- 2. <u>Student should report to the college in the morning for getting done the</u> admission process on the same day.
- 3. Student should report personally for admission/admission cancellation in case of up gradation. PROXY will not be allowed for admission process/Cancellation of admission.
- 4. Print and fill <u>2 copies</u> of Application Form.
- 5. Print and fill 2copies Scrutiny Form.
- 6. Print and fill <u>1copy</u> of Candidate information.
- 7. Print and fill 1 copy of Medical Fitness in the prescribed format ONLY.
- 8. All **original documents** enlisted in the scrutiny form will be compulsorily required for admission. Additionally, student should submit **2 sets of SELF ATTESTED photocopies** of all original documents.
- 9. All original Documents <u>individually SCANNED in PDF format only</u> will be compulsorily required during admission. Student should scan document properly through computer scanner (Size 500 kb only). **Please don't use mobile scanner for scanning documents.** Individual Original Documents should be scanned and renamed properly.
 - **e.g.** Nationality certificate after scanning should be renamed as **Nationality-Name of Student.**

Prepare Folder and <u>rename it with Name of the student</u>, keep all scan documents in this folder for submission during admission. **Scan documents will be accepted only in Pen Drive.** And also scan the DD in pdf file and mail us to email id - gmcacadpg@gmail.com

- 10. Fees: Demand drafts (DD) of complete fees will be required during admission process. Kindly note that DD should NOT have any errors/spelling mistakes in the name of DD as desired. Error/spelling will not be acceptable, such DD will be rejected. No cash/online transactions will be acceptable. DD should be in the name of "The Dean Grant Govt. Medical College, Mumbai".
- 11. Other Letters if required will be taken at the time of admission (within the rules thereof)
- 12. Submit Recent Passport size photos (3 copies).

- 13. The institute is responsible for only admission of student in respective Quota. We will not be available to guide any students for further rounds or rules & regulations of All India/State/In Service Quota. The student should read information brochure/Notifications/Advisory issued by different agencies on official websites. Please don't contact institute admission cell for any such information's.
- 14. As per the information brochure issued by the State commissioner of Maharashtra for the current academic year, under the clause of Penalty & Bond, non-completion of Junior residency tenure & for lapse of seat, or admission cancellation after cut-off date, the student must pay an amount of Rs.20,00,000/(twenty lacs). In such case, returning of original documents will be done only after receipt of penalty amount. The deposited fees will also be non-refundable.
- 15. Kindly note.... Admission Process requires verification and approval. No student will be given Joining letters urgently.
- 16. For any query, please call during 11:00 AM to 4:30 PM.

Landline number:

Direct Number: 2373 55 55 Ext:(2202)

Don't call on personal Mobile number of Dean available on mcc website, it is given for administrative use by mcc/DMER ONLY.

Λ	DD	LICA ⁻		N EC	JDIV
н	PP	LILA	HUI	N Lr	JRIVI

	Student's Name: Address (In capital):
	Address (III capital)
	••••••
	Phone No (Res.):
	Mobile No:
	Email Id:
	Date:
Го,	
Γhe Dean,	
Grant Govt Medical Coll	lege,
Mumbai.	
Sub: Reporting/Joi	ining as JR-1 in subject of
Through NEET PO	G All India/State Quota/In Service Quota seat allotment.
Ref: NEET PG All	lotment Letter/ ListDated:
Respected Sir/Madam,	
-	Dr(Full
	en selected for the post graduate degree/diploma course in
he subject of	as per the allotment letter/list available
on official website Dated	I
Kindly enroll me i	n your college as JR-1 in the subject of
or the academic year 20	25-2026.
I have informed th	at, I must submit Service Bond of 1Year to Maharashtra
Govt. Once my admissio	on is confirmed in this institute, otherwise I will have to
oay penalty of Rs.50,00,0	000/- (Fifty Lac only) as per the rules PG Admission
egulations of State of M	aharashtra and changes if any issued from time to time in
ha ragnactiva academia	year of admission.
-	
Thanking You.	

(Dr.....)

PG ADMISSION - 2025

SCRUTINY FORM

Name of the Student		_ Date:-	/	/2025
Admission Quota -	Rank			

Sr.No.	Essential Documents Required	Yes/No		
1	Aadhar Card (Xerox Copy)			
2	Nationality Certificate or Valid Indian Passport attested by Dean			
3	Domicile Certificate			
4	NEET PG Mark Sheet			
5	NEET PG Admit Card			
6	NEET PG Allotment Letter/List			
7	MBBS Passing Certificate			
8	MBBS Degree Certificate			
9	Internship Completion Certificate (should not be later than 31/07/2025)			
10	Registration Certificate of MBBS from Maharashtra Medical Council			
11	Caste Certificate (If applicable)			
	Cast Validity (If applicable)			
12	For outside Maharashtra students (OMS) Letter from magistrate that yourstate does not			
	issue caste validity certificate will be compulsory as per attached proforma (Annexure E)			
13	Non-Creamy layer Certificate valid up to 31.03.2026 (NCL) or Later (If applicable)			
	EWS Certificate (If applicable) Produced for the Year 2025-2026.			
14	All India as per format Annexure I / State as per format Annexure -A Ref. State CET			
	Brouchure)			
15	MBBS College Leaving Certificate (T.C.) OR Continuation letter if student is from same			
1.6	college (If not attached Submit the same in 15 Days of admission)			
16	Gazette for Change in Name (If applicable) Microtion Contificate issued by respective University (If applicable)			
17	Migration Certificate issued by respective University (If applicable)			
18	(If not attached Submit the same in 15 Days of admission) Self-Education Gap Certificate after completion of Internship (If applicable)			
19	Medical Fitness Certificate (in prescribed format only)			
1)	Physical Handicapped Certificate from authorized agencies ONLY (If applicable) Refer			
20	MCC Brouchure for All India Quota- Annexure 2			
	Refer State CET Brouchure for State Quota Page 49			
	For state quota seat- Bond Release Certificate/Bond Break payment Govt. receipt (if			
21	applicable) (For candidate who have completed Internship on or Before 11.08.2023 as per			
	State CET Cell Broacher Clause 8.13)			
	1) NOC 2) Reliving letter 3) Deputation Certificate 4) University Approval Certificate for			
22	teacher in concerned subject 5) Experience Certificate from health department for In service			
	state quota students. (This will be Compulsory for In-service candidates)			
23	Other letter if any required will be taken during admission			
24	Orphan Certificate (If Applicable)			
25	Personal Information Certificate			
26	Retention Form (applicable to State Quota Annexure L attached)			
27	Cancellation Form (applicable to State Quota Annexure K attached			
28	50% AIQ students (For all student taken MBBS Admission in 15% AIQ) College Letter.			

Deficiency IF any:

(Please Mentioned) Eligible/ Not Eligible -

UNDERTAKING-NEET-PG ADMISSIONS

(Applicable for All India Admissions only)

I the undersigned hereby confirm that the data submitted during joining

(1st / 2nd /subsequent rounds) for post-graduation through the online

process was done in my presence and with my full consent. It will be my

full responsibility to thoroughly check the data before final submission.

Name & Sign Witness

(Name & Sign of candidate with date)

Contact No.:

Contact No:

Place:- Mumbai

Date:-

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted	clinical examination of
Dr	who is desirous of
admission to medical postgraduate courses.	
He/she has not given any personal history of a him/her to undergo the professional course. Also, has been found that he/she is medically fit postgraduate course (NEET PG) in the academic Ye 1. Absence of any incapacitating and / or prog disease/disorder/condition. 2. Absence of any disability of upper limb/s. 3. Absence of any major visual/auditory disable. Absence of psychosis/neurosis/mental retable. 5. Ability to maintain erect posture. 6. Reasonable manual dexterity.	on clinical examination it to undergo the medical ear 2025-2026. gressive systematic bility,
Address of the Registered Medical Practitioner	Signature Name
Seal of Registered Medical Practitioner	Registration No. Date:

Note:

- ✓ A candidate must be medically fit to undergo PG courses applied for. The medical fitness must be certified by registered medical practitioner in the above prescribed format ONLY.
- ✓ If the candidate has claimed PWD seat& allotted a PWD seat: He/ She must submit additionally the current academic year RECENT Physical handicapped verification certificate (PWD) issued by the authorized centers only as per the instructions of competent authorities of All India/State quota for the current academic year in information brochures/Notifications/Advisory.

SERVICE BOND/ INDEMNITY BOND

To be submitted ONLY after final confirmation of admission/after cut-off date.

- 1. It will be the total responsibility of the student to submit the SERVICE BOND after final confirmation / Cut-off date of admission within one week.
- 2. Any student failing to submit the Bond within the stipulated time will not be eligible for appearing the PG exams. Appropriate action will be initiated against all such candidates and stipend will be withheld till the receipt of Bond.
- 3. Bond Should be prepared on Rs.500/- Bond. (Notarized)
- 4. Service Bond is applicable for All India/State PG Student.
- 5. Matter of Bond is given below.

INDEMNITY BOND

I, Dr
, do hereby take an oath and state solemn affirmation as under:
under:
I the undersigned student in
I the undersignedstudent in
course in Grant Govt. Medical College & Sir
J.J. Group of Hospital, Mumbai through NEET PG 2025 Exam state counselling.
As per NEET PG 2025 brochure clause/Para 21.3, I undertake that on
completion of my PG Course, I will be bound to serve the Government of
Maharashtra or Corporation or Defence Services for a minimum period of ONE
year.
If for any reason I fail to serve the Government of Maharashtra or
Corporation or Defence Services for a minimum period of ONE year, in that event
they will entitled to claim and recover from me or my sureties a sum of
Rs.50,00,000/- (Fifty Lakhs only).
If I have the service Central Government or Government of Maharashtra or
Corporation or Defence for any reason within this service period of One year they
can claim and recovery amount from me.
In the event I fail to comply with condition of this undertaking the whole of
said amount of Rs.50,00,000/-(Fifty Lakhs only) shall become forthwith payable
by Parents/Guardians/Sureties jointly and severally all discretion of the University
and University will be entitled to seek legal remedies against my
Parents/Guardians/Sureties.
I undertake to communicate my address from time to time if there is any
change.
Date: / /2025 Signature:
Place: Name:
Address:
11001000.
Mobile No.
Witnesses:
1)

2)

OFFICE THE		
Outward No:- Date :-		
Juliu III. Juliu I		
	TO WHOME IT MAY CONCERN	
	<u>CERTIFICATE</u>	
Γhis is to certify that, the Caste C	Certificate No	
Dated	issued to Mr./ Miss	
By the Tahsildar / Magistrate /		is Valid.
Further, it is stated	that there is no provision of issuing separate	Caste Validity
Certificate in	State.	

UNDERTAKING

I, selected through All India Quota/
State Quota for Post Graduate admission at Grant Government Medical
College, Mumbai. I have reported on Date:- / /2025.
I undertake to submit the following certificate(s) with 15 days from
the date of admission.
1)
2)
3)
4)
5)
6)

I am aware that if I fail to submit above mentioned documents within 15 days, appropriate action will be initiated against me by the administration. It shall be my responsibility to produce all necessary documents and get eligibility from Maharashtra University of Health Sciences, Nashik.

Name:-Signature of Candidate AIR/Sate Quota:-----Mobile No. E-mail.

STUDENT LIFE CYCLE MANAGEMENT

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 — /
- V

$^{\prime\prime}$ (KINDLY FILL THE FORM IN THE CAPITAL LETTERS ONLY)

QUOTA: STATE/ALL INDIA_____

SEX; M/F	DATE OF A	DMISSION
NEET ROLL NO	AIR N	NO
NAME OF THE STUDENT (in English)		
(AS PER HSC MARKSHEET)		
NAME OF THE STUDENT (in Marathi)_		
LOCAL ADDRESS		-
		PIN:
PERMANENT ADDRESS		
DATE OF BIRTH	PLACE OF	BIRTH
DOMICILE STATE	-	
MOBILE NOS:- SELF	& FATHER/MOTH	IER
LAND LINE NO	AADHAR CARD NO	
BLODD GROUPMOTHER NUMBER		PAN
<u>S.S.C</u> .PASSING MARKS/OUT OF		BOARD NAME
SCHOOL NAME	MONTH &Y	EAR OF PASSING
<u>H.S. C</u> , PASSING MARKS/OUT OF	PERCENTAGE	BOARD NAME
COLLEGE NAME	MONTH	& YEAR OF PASSING

MARKS : PHYSICS	: CHEM:	BIO:	ENG:
PCB TOTAL:	_PCBE TOTAL :	_PCB PERCENTAGE	HSC SEAT NO
MBBS, PASSING N	/IARKS/OUT OF	PERCENTAGE	
UNIVERSITY NAI	ME		
COLLEGE NAME		MONTH & Y	'EAR OF PASSING
NEET MARKS	NEET PERCENTA	AGENEET	PERCENTILE
ADMITTED CATEG	ORY/QUOTA	STUDENT'S CATEGO	DRY
SUB CASTE	(ALSO FOR O	PEN CANDIDATES), SPL	RESERVATION
ANNUAL INCOME	: FATHER	MOTHER	
SIGNATURE:: CAN	DIDATE	FATHER	
EMAIL ID : (IN CAI	PITAL)	МОТ	HER NAME
NON CREAMY LAY	'ER VALID UPTO		
FATHER DETAILS :	<u>:</u>		
FULL NAME			
PERMANENT ADD	RESS		
STATE	DISTRICT	PIN COD	E
MOBILE NO		LANDLINE	·
FATHER EMAIL ID			
MOTHER DETAILS	<u>i:</u>		
FULL NAME			
PERMANENT ADD	RESS		
STATE	DISTRICT	PIN COD	E
MOBILE NO		LANDLINE	
FATHER EMAIL ID			

FATHER OFFICE DETAILS: OCCUPATION_____OFFICE NAME_____ OFFICE ADDRESS STATE DISTRICT PIN CODE MOBILE NO_____LANDLINE_____ FATHER OFFICE EMAIL ID_____ **MOTHER OFFICE DETAILS:** OCCUPATION OFFICE NAME OFFICE ADDRESS_____ STATE DISTRICT PIN CODE MOBILE NO_____LANDLINE____ FATHER OFFICE EMAIL ID______ **STUDENT BANK DETAILS:** STUDENT NAME(as per Bank Account)_____ BANK NAME_____BANK AC NO_____ BANK IFSC CODE BANK ADDRESS STATE DISTRICT PIN CODE

KINDLY ATTACHED COPY OF HSC MARKSHEET, SELECTION LETTER AND CC, CVC & EWS

(Kindly fill 2 copies of the above form and bring along with you at the time of Admission)

FEE STRUCTURE

POST GRADUATE (MD/MS)

ADMISSION YEAR 2025-2026						
JR 1 (First Year) JR 2 (Second Year) JR 3 (Third Year)						
Tuition Fee (A)	152100	152100	152100			
Other Fee (B)						
Admission Fee	1500	-	-			
Vikas Nidhi	5000	5000	5000			
Resident Deposite	4000	-	-			
Hostel Fee	4000	4000	4000			
Librabry Deposite	2000	-	-			
Librabry FEe	1000	1000	1000			
Gymkhana Fee	500	500	500			
Rashtriya Seva Yojana	10	-	-			
Total (B)	18010	10500	10500			
Total (A+B) 170110 162600 162600						

^{*} This Fee Structure is applicable to all category students.

Note: This Fee Structure is applicable to all Three Years for the candidate admitted in the Academic Year 2025-2026.

FEES NOTICE

Subject:- Payment of Fees for Post Graduate Students

(Academic Year 2025-2026)

All Post Graduate (MD/MS) Students who wants to take admission for Post Graduate course through NEET PG 2025-2026 must follow the following instructions:

- 1. They must bring original set of documents and two attested photocopies of the same.
- 2. They must bring two separate DD from a Nationalized Bank (i.e. 1,52,100/- & 18,010/-) in favor of **The Dean Grant Govt. Medical College, Mumbai**. (Payable at Mumbai).
- 1. Tuition Fees:-1,52,100/- (One Lakh Fifty Two Thousand and One Hundred Only)
- 2. Other Fees:-18,010/- (Eighteen Thousand & Ten Rupees only)

•	Tuition Fees:-	Rs.1,52,100/-
•	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/-
		Rs. 18,010/-

ANNEXURE "L" (For State Candidate)

STATUS RETENTION FORM

NEET PG 2025

Candidate name :	SML NO :	ROLL NO :
Institute / College :	Course:	
To, The Commissioner, State CET CELL, 8th Floor, New Excelsior Bldg, A.K. Fort Mumbai 400 001.	Nayak Marg,	
Sir / Madam,		
I Drto me at Grant Govt. Medical College,Course for the academic year 2	· · · · · · · · · · · · · · · · · · ·	o retain the seat alloted
	DECLARATION	
I am fully aware that after subrany subsequent rounds of selection proreconsideration of my name for the fur		
Date :		
Place:	Signature of	Candidate
Submitted for necessary action		
Date:		
Place:	Signature of Dean/	Principal (With seal)

Note: This blank form to be Xeroxed and to be filled in triplicate, one copy to be sent to the competent authority by the college. one copy to be retained by the college, one copy to be retained by the candidate.

ANNEXURE - "K" (For State Candidate)

RESIGNATION OF ADMISSION TO MEDICAL POSTGRADUATE COURSE 2025-2026

To,
The Commissioner,
State CET CELL,
8TH floor, New Excelsior Building, A.K.Nayak Marg,
Fort Mumbai 400 001.

(Through Dean / Principal)

Subject: Resignation of Post Graduate Admission.

Subject Vitesignation of I	obe Gradate Hampston.
Respected Sir,	
	SML NO has been admitted for
course at Grant undercategory.	Govt. Medical College, Mumbai. On
Now, I wish to resign the above me reasons.	entioned PG admission for the following
1) I have secured admission to PG course on under	
I hereby tender my voluntary resign Regulations regarding fees, bond and pen- brochure.	•
Thanking You,	
Yours Faithfully,	
Date:	
Place:	Signature of candidate
Name and address of the candidate :	For Office use only Amount Paid Rs: Amount Deducted Rs: Amount Refunded Rs:
Pin Code:	Cheque No. & Date:
Mobile:	Bank Particulars:

Note:

This blank form to be Xeroxed and to be filled in triplicate, one copy to be sent to competent authority by the college, one copy to be retained by the college, one copy to be retained by the candidate.