

**SHRI BHAUSAHEB HIRE GOVT.
MEDICAL COLLEGE, DHULE
Maharashtra State**



**Welcomes.... the undergraduate
students Joining our Institute for
the academic year 2022-23**

Contact Person for query: (between 10:00 to 5:00 PM)

1. Landline number Cet Cell : 02562- 297114

DON'T CALL ON THE PERSONAL NUMBER OF DEAN / NODAL OFFICER

GOVT.OF MAHARASHTRA
SHRI BHAUSAHEB HIRE GOVT. MEDICAL COLLEGE, DHULE- 424311.
TELEPHONE NO. 02562 -297114
e-mail:- studentsectiondhule@gmail.com
deangmcdhule@gmail.com,
www. sbhgmcdhule.org

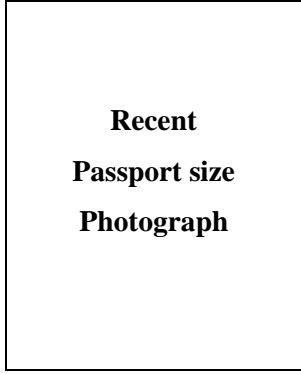
FOR ALL INDIA/STATE QUOTA STUDENTS

NOTIFICATION (For NEET UG-2022 Admissions)

All the selected students of NEET-UG-2022 allotted seat at **Shri Bhausaheb Hire Govt. Medical College, Dhule (M.S.)** should follow instructions and accordingly report with all details required for admission process.

1. Download & print this PDF file. READ ALL DETAILS CAREFULLY
2. Print and fill **two copies** of 'Application for Admission' Form, and Candidate information.
3. Print and fill **1 copy Original & 2 photo copy** of **Medical Fitness** in the prescribed format ONLY.
4. All original documents enlisted in the Application form and two sets of SELF ATTESTED photocopies of all original documents to be submitted in simple spring **office file**.
5. All Original Documents enlisted in the Application form to be **Scanned individually** & submit in a folder in pen drive. The folder should be with your complete name. The scan should be in PDF format ONLY and each file not beyond 500 KB.submission will be mandatory.
6. Students to note that the Demand Drafts (D.D.) of desired Fees should not have any error/spelling mistakes in the name of DD desired. This will not be acceptable. **No cash will be acceptable.**
7. Other Letters/undertakings if required will be taken at the time of admission if permissible within the rules there of.
8. **Kindly note.... Admission Process requires verification and approval. No student will be given Joining letters urgently. The office may require 2-3 days to complete the process.**
9. **For any query please call**
Landline number : 02562- 297114,
Do not call on personal Mobile number of Dean available on mcc website, it is given for administrative use by MCC/DMER ONLY.

Application for admission



Name:- _____

Address (In Capital) :- _____

Mobile No. Student :- _____

E-mail Address of Student :- _____

Mobile No. Parent :- _____

E-mail Address Parents :- _____

Phone No. (Res.) :- _____

Date: :- / /2022

To,
The Dean,
Shri Bhausahab HireGovt.
Medical College, Dhule.

Sub: - Joining in Ist MBBS Course at Shri Bhausahab Hire Govt. Medical College, Dhule.

Ref:- Selection letter/List : (printout attached)

R/Sir,

I the undersigned Shri./Kum. (Full Name in Capital) _____
_____ has been selected for Ist MBBS Course in Shri Bhausahab Hire Govt.
Medical College, Dhule as per the Selection letter of All India / State list.

Kindly enroll me in your college as Ist MBBS student for the Academic Year 2022-2023.

Thanking you.

Yours faithfully,

(Name _____)



Government of Maharashtra

Shri Bhausaheb Hire Govt. Medical College, Dhule

website:- <http://sbhgmcc.org> e-mail:- gmc dhule@gmail.com, deangmcdhule@gmail.com
Phone No.: College :- (02562) 239407, 297114 Fax No. College:- (02562)

APPLICATION FORM FOR ADMISSION TO FIRST YEAR M.B.B.S. COURSE 2022-23

(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-2022 Roll No. :					9) NEET-2022Marks :					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>PIN Code</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></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 (Annexure – “D”)	
6	HSC Passing Certificate (Non Mandatory)		21	Hilly Area Certificate	
7	NEET Score Card-2022		22	Election Card (Annexure-C if less than 18 Years)	
8	Admit Card issued by NEET-UG-2022		23	Passport (if applicable)	
9	Selection Letter CET CELL/ AIQ-2022		24	Ration Card	
10	Caste Certificate (if applicable)		25	Student's Haemogram Report (Two Copies)	
11	Caste Validity Certificate		26	D.D. of Requisite Fees	
12	Non- Creamy Layer Certificate (if applicable)		27	Passport size Photographs-10 Nos.	
13	EWS Certificate		28	Income Certificate 2021-22 (Only Category ,EWS,EBC Students)	
14	Self-Educational Gap Affidavit by student certified by Executive Magistrate / Notary. (If applicable)		29	Copy of Online application form	
15	Physical Fitness 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
Shri Bhausahab Hire Govt.
Medical College, Dhule

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

Shri Bhausaheb Hire Govt. Medical College, Dhule
Admission Year 2022-23 for M.B.B.S.

Fee Structure

Open Category (Maharashtra State Quota) & All India Quota (Open & Reserved Category)			Reserved Category (Only for Maharashtra State Quota)	EWS/EBC (For Maharashtra students only) (General Administration Department Government Resolutionsno.RAD/4019/ C.R 31/16-A, dated12 February, 2019)
Sr. No.	Fee	Amount	Amount	Amount
01	Tuition Fee	114300/-	00	57150/-
02	Library Fee	1,000/-	1,000/-	1,000/-
03	Admission Fee	1,500/-	1,500/-	1,500/-
04	Gymkhana Fee	500/-	500/-	500/-
05	Development fee	5,000/-	5,000/-	5,000/-
06	Library Deposit	2,000/-	2,000/-	2,000/-
07	Caution Money	3,000/-	3,000/-	3,000/-
08	University Pro-rata	500/-	500/-	500/-
09	University Development Fee	100/-	100/-	100/-
Total		1,27,900/-	13,600/-	70750/-
Open Category			Reserved Category	EWS/EBC Category
1) D.D. Rs. 12,600/-			1) D.D.Rs. 12,600/-	1) D.D. Rs. 12,600/-
2) D.D. Rs. 1,15,300/-			2) D.D.Rs. 1,000/-	2) D.D. Rs. 58,150/-

- D.D. of any **Nationalized Bank** may be drawn in favour of “**Dean, Shri Bhausaheb Hire Government Medical College, Dhule**” payable at “**Dhule**” At any cost Cash will not be accepted.
- The demand draft will be deposit in the accounts only after confirmation of the admission /status retention by the students
- If students are allotted another college in subsequent rounds of All india / state In such situation, all the DDs will be refunded back to the student, all such students will be required to pay an amount of **Rs.1500/- as cash** in the cash section of accounts department.
- **Amartya Shiksha Yojana** - The student have to submit D.D. of Rs.797/- to the college, one time installment for the insurance of the student after final admission to the respective college. (National Insurance Company Limited” Payable at Kolhapur.)

MEDICAL FITNESS

A candidate must be medically fit to undergo the professional course applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed proforma, as given below on a **Letterhead** :

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Mr./Ms who is desirous of admission to Health Science 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 professional course.

Certified that he/she fulfills the following criteria.

- (1) Absence of any incapacitating and /or progressive systemic 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.

Though, following deviations have been revealed, in my opinion, these are not impediments to pursue a career as a Medical / Dental / Ayurved / Unani / Occupational Therapy / Physiotherapy / Audiology & Speech, Language Pathology / Prosthetics & Orthotics / BSc Nursing. **(Strike, which is not applicable):**

1.
2.
3.

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

(Only All India Quota Reserve Category Student)
Annexure – III

Office of the -----

Outward No. :-

Date:-

TO WHOME IT MAY CONCERN
CERTIFICATE

This is to certify that, the **Caste 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.

Office Seal / Stamp

Signature of Tahsildar / Magistrate / Issuing Authority

कार्यालय-----

जावक क्र .

दिनांक

जो कोई भी इससे संबंधित है उसके लिए
प्रमाणपत्र

प्रमाणित किया जाता है की, श्री/कुमारी -----

-----इनको, तहसिलदार/जिल्हा मॅजिस्ट्रेट -----

कार्यालयद्वारा निर्गमित किया हुआ जात प्रमाणपत्र क्रमांक -----

-----दिनांक वैध है ।

तथा, -----राज्यमे अलगसे
जात वैधता प्रमाणपत्र निर्गमित करने कोई प्रावधान नही है ।

कार्यालयीन मोहोर

तहसिलदार/जिल्हा मॅजिस्ट्रेट तथा

संबंधीत अधिकारी के हस्ताक्षर

पदवी, पदव्युत्तर पदवी प्रथम वर्ष अभ्यासक्रमास प्रवेश घेणाऱ्या सर्व मुला/मुलींकडून प्रवेशाच्या वेळीच मतदार यादीमध्ये नाव नोंदणी करण्याच्या अनुषंगाने घ्यावयाचे प्रमाणपत्र / हमीपत्र नमुना.

मी....., अभ्यासक्रम :

..... महाविद्यालयाचे नाव:

..... या महाविद्यालयात प्रथम वर्षात प्रवेश

घेतला असून मी दिनांक: ०१/०१/..... रोजी १८ वर्षाचा / वर्षाची झालो / झाले आहे किंवा होणार आहे. १८ वर्ष पूर्ण झाल्याबरोबर मी माझे नाव मतदार यादीत नोंदवून घेणार आहे अशी मी प्रतिज्ञा करतो/करते.

स्वाक्षरी :

नाव :