

Willing for next round- Yes/No

Bankura Sammilani Medical College, Bankura.

Application for admission to Post Graduate Medical Degree/Diploma 2022-2023 Course

APPLICATION SHOULD BE FILLED IN BY THE CANDIDATE.

1 AIQ Rank..... State Rank.....
2. Date of counseling..... Mobile No..... Space for Photo
Colour
3. Course..... Percentile Score
4. Email- Date of Admission.....
5. Exam. Name -..... with Roll.No.....

1. Name in full (in Block letters):-

2. Father's/Husband's Name:-

3. Name, Occupation & address of guardian (if other than father)

4. Permanent address with contact No:-

5. Nationality :-

(6) Sex:-

(7) Date of Birth:-

(8) Blood Group:-

9. Marital Status:-

10. Whether you are belonging to SC/ST/PH/OBC :- a) Yes (b) No
(mark with a tick(/) in the boxes which is applicable)

11. (a) Are you in W.B.H.S:-

(i) Yes

(ii) No

(b) Are you in W.B.M.E.S:-

(i) Yes

(ii) No

If so, state (mark with a tick(/) in the boxes where applicable:- (i) Regular (ii) AD-HOC

12. If in other service, give details :-

13. Name of the University where from obtained M.B.B.S degree:-

14. University Registration No..... of..... University.....

15. Permanent/Temporary Medical Registration No. Year.....

With the name & Medical Council.....

Admission Fees:- Rs- 2000/-

Tuition Fees :- Rs- 6000/-

Caution Money :- Rs- 10000/-

Total Rs:- 18000/-

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16. Academic Qualification(S) :- Details of Total marks in the MBBS Examination.

| MBBS Prof. Wise | Duration Of Course | Name of the University | Month & year Of Admission | Marks Obtained | Percentage Of Marks | Total No. Of time Appearing Including One in Which Passed | No. Of failure(s) | Prize/ Medal & Distinction | Name of College |
|-------------------------------|--------------------|------------------------|---------------------------|----------------|---------------------|---|-------------------|----------------------------|-----------------|
| 1 st Prof. | | | | | | | | | |
| 2 nd Prof. | | | | | | | | | |
| 3 rd Prof. Part-I | | | | | | | | | |
| 3 rd Prof. Part-II | | | | | | | | | |
| MBBS Or any Other Course. | | | | | | | | | |

17. Summary of academic Record:- Statement of total marks obtained in the MBBS Exam.
(All the Prof. Exam. taken together)

| Total marks for which the applicant was examined | Total marks obtained by applicant | Percentage of marks obtained by the applicant | Any other relevant information |
|--|-----------------------------------|---|--------------------------------|
| | | | |

18. Have you passed 1st, 2nd & 3rd, prof. MBBS Exam. in first attempt? Yes/No

If not, state in the specific column, how many attempt(s) you have made to clear the examination(s).

- i) 1st Prof. MBBS. attempt(s) (ii) 2nd Prof. attempt(s)
- (iii) 3rd Prof. (Part-I) attempt(s) (iv) 3rd Prof. (Part-II) attempt(s)
- (to be supported by a certificate from the Head of the Institution)

19. Completion date of Internship/PRCA training with name of the Institution

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20. Are you at present registered for any Post Graduate Diploma/Degree course including Ph.D. of any University? If so, give Particulars:-

21. Have you applied for admission or been admitted to any other course in any institution during this session?

I do hereby declare that all the statements made by me in this application (including additional particulars) are true, complete and correct to the best of my knowledge and below

I do hereby submit attested of all documents as mentioned in my application.

In case it is detected at any point of time that any of the statements made by me in this applications involves suppression of distortion of truth or that the application is not supported by any of the relevant documents as mentioned in this instruction for admission shall be cancelled without further reference to me.

I shall be bound to accept the stipulation laid down by the University for the purpose of admission to the Degree/Diploma course for the session.

Dated:-

Signature in full of the Applicant

Address:- -----

DECLARATION IN RESPECT TO ADMISSION ON POST GRADUATE MEDICAL DEGREE/DIPLOMA OF THE UNIVERSITY OF CALCUTTA BY CANDIDATES WHO ARE NOT IN ANY SERVICE IN ANY CAPACITY IN ANY ORGANISATION.

I do hereby declare that I am not in West Bengal Health Services/ West Bengal Medical Education Service, not in service including Housemanship. In case of suppression of distortion of facts as declared by me my admission to the course, if detected, will be liable to be cancelled outright.

Dated:-

Signature in full of the applicant.

N. B.- Following details must be mentioned for refund of fees (in case of upgradation).
(bank details must be the same from which the fee has been deposited.)

1. Name of the Beneficiary
2. Beneficiary Bank & Branch
3. Beneficiary Bank Account No.
4. IFSC Code
5. E-mail id.

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PG Admission 2022-23

The following documents are required for online reporting for verification by the College authorities.

- 1) Allotment Letter
- 2) Rank Card
- 3) Score Card
- 4) NEET PGAdmit card
- 5) Age Proof
- 6) All MBBS Mark Sheets
- 7) H.S Mark Sheet
- 8) Internship Completion Certificate
- 9) MBBS Degree Certificate
- 10) Permanent Registration
- 11) SC/ST/OBC-A/B/PH/EWS Certificate, if necessary
- 12) Aadhar Card/Driving License/Voter ID/Pan Card
- 13) Fees deposit receipt
- 14) Original Bond with Notary
- 15) Release Order, if applicable

NB:- Candidates are hereby directed to keep photocopies of the original documents which will be kept under the custody of Principal, B S Medical College, Bankura.

-By order