



महाराष्ट्र शासन
शासकीय वैद्यकीय महाविद्यालय, गोंदिया

Government Medical College, Gondia

Phone No 07182-238090 E-mail: gmcgstudentsection@gmail.com Website: www.gmcgondia.in
Ref. No. GMCG/SS/ /2025 Date: / 11/2025

INSTRUCTIONS TO THE STUDENTS REGARDING POSTGRADUATE ADMISSION

2025-26

(PRESENTLY TO BE FOLLOWED FOR ALL INDIA QUOTA & STATE QUOTA)

All the students allotted PG seat at Government Medical College, Gondia should follow the instructions given below

1. Students shall write Name, Reporting Date and Time in Entry Register and then follow the step for PG Admission Process.
2. Student must download the Admission form & Submit along with the original documents in the file.
3. Students should arrange the necessary documents in file as per the sequence given in annexure I.
4. Students submit all original documents and 2 set of Xerox copy of all original documents and submit scan copy of original documents in pendrive. (Separate PDF File (under 500Kb) for Each document with Doc. name)
5. Scrutiny officer will verify all original documents of the students according to the token number.
6. Document verification committee will verify the documents and confirm the admission.
7. After verification of original document Student Deposit Rs. 1500/- Admission Fees & DD in cash section
8. Deposit all the fees by DD before Admission as per Annexure II
9. Student collects their College admission letter from student section After Completing of admission process.
10. All important notice should be visible on Student Section Notice Board
11. Hostels facility not provided to the students **during admission process**.
12. Any changes/ amendments in the admission procedures adopted will be notified on the official website www.gmcgondia.in
13. Caste Certificates issued by the competent authority on standard format. should be in English or Hindi language. In case the certificate is in regional language the candidate should carry a Attested translated copy of the certificate in English / Hindi.
14. Student must kept all Scan Copy of original documents till the completion of PG course and also informed that no student get photo copy of any documents till the completion of Bond Service.
15. Student should submit Affidavit/ Undertaking of PG Bond on Rs. 500/- stamp paper **after cutoff date**.

Any kind of Information related to admission Contact to Student Section GMC Gondia.

GOVERNMENT MEDICAL COLLEGE, GONDIA.
Steps for PG Admission Process 2025-26
(Students follow the step I to V for PG Admission Process.)

Step I

Students shall write Name, Reporting Date and Time in The Entry Register and take token number. Available at entry register.

Step II

Scrutiny officer will verify all original documents of the students according to the token number.

Step III

After verification of original document Nodal officer will give confirmation regarding admission to the student.

Step IV

Student will pay Rs. 1500/- cash & Submit Two DD's in cash section.

Step V

Submit fees receipt at student section and collect admission acknowledgment and admission letter from the student section

VENUE

Student Section Dean Office Building


Dr. Apurva Pawade
Nodal Officer

(Admission process Complete)

(If any query regarding admission process contact student section.)


Dr. Apurva Pawade
Vice Dean
Government Medical College
GONDIA


DEAN
Government Medical College,
GONDIA

GOVERNMENT MEDICAL COLLEGE, GONDIA.
FEE SCHEDULE OF POSTGRADUATE ADMISSION
YEAR-2025-26

Tuition Fee	Rs. 1,52,100/-	(Annual)
(Rs. 1,52,100/- DD in favour of - Dean Government Medical College, Gondia)		
Library	Rs. 1000/-	(Annual)
Development Fee	Rs. 5000/-	(Annual)
Gymkhana Fee	Rs. 500/-	(Annual)
Residency Deposit	Rs. 4000/-	
Library Deposit	Rs. 2000/-	
MUHS Development Fee	Rs. 100/-	
<u>MUHS Krida Mahotsav Fees</u>	<u>Rs. 318/-</u>	
Self-Finance Unit Shulk	Rs. 30/-	
Total	Rs. 12,948/-	
(Rs. 12,948/- DD in favour of - Dean Government Medical College, Gondia)		
<u>Admission Fee - Rs. 1500/- (by Cash)</u>		
<u>Tuition fee is exempt to In-Service Candidate</u>		


Vice Dean
Government Medical College
GONDIA


DEAN
Government Medical College,
GONDIA

**OFFICE OF THE DEAN
GOVERNMENT MEDICAL COLLEGE, GONDIA.**

Sr. No.	<u>FILL ALL INFORMATION IN CAPITAL LETTERS</u>		ATTACH STUDENT LATEST PHOTO
	MBBS ADMISSION – YEAR 2025-26		
1	FULL NAME OF STUDENT (As per 12 th Marksheets)		
2	FULL NAME OF STUDENT (Marathi)		
3	MOTHER NAME (ENG)		
4	MOTHER NAME (MARATHI)		
5	NATIONALITY		
6	MOTHER TONGUE		
7	DOMICILE STATE		
8	CATEGORY		
9	BLOOD GROUP		
10	CASTE		
11	RELIGION		
12	SUB CASTE		
13	DATE OF BIRTH		
14	BIRTH PLACE		
15	QUOTA		
16	AIR		
17	PHYSICAL MARK		
18	MARITAL STATUS		
19	GENDER:		
20	NEET ROLL NO.		
21	NEET MARKS		
22	NEET PERCENTILE		
23	PERMANENT ADDRESS OF STUDENT WITH PIN CODE		
24	STUDENT MOB. NO.		
25	STUDENT ADHAR NO		
26	STUDENT PAN NO		
27	STUDENT E-MAIL ID		
28	FATHER MOBILE NO.		
29	MOTHER MOBILE NO.		
30	PARENTS OCCUPATION		
31	PARENTS E-MAIL ID		
32	PARENTS ANNUAL INCOME		
33	STUDENT BANK DATAILS (BANK NAME)		
34	BRANCH NAME		
35	IFSC CODE		
36	ACCOUNT TYPE		
37	ACCOUNT NUMBER		
38	MBBS INSTITUTE NAME:		
39	MBBS INSTITUTE ADDRESS		

40	NAME OF UNIVERSITY		
41	MBBS PASSING MONTH & YEAR		
42	MBBS TOTAL MARKS		
43	MBBS OBT. MARKS		
44	MBBS PERCENTAGE		
45	NEET MARKS		
46	NEET PERCENTAGE		
47	MMC/MCI REGN. No		
48	INTERNSHIP TRAINING PERIOD		
49	DD Rs.	DD NO.	DATE
50	DD Rs.	DD NO.	DATE
<p>SIGNATURE OF STUDENT</p> <p>DATE: - / /2025</p> <p>SIGNATURE OF PARENTS</p> <p>PLACE: GONDIA</p>			

Undertaking
(Only For Non-Essential Documents)

Name of Student :

Permanent Address :

Course : M.D./ M.S./ Diploma in

Admission Year : 2025-26

As per instructions given by the competent Authority, I will submit Following documents within 15 days of time. Otherwise, I will face disciplinary action.

Documents

1.....

2.....

3.....

Date :

Place :

(Name and Signature of Student)

Receipt of original Certificates Annexure-I

OFFICE OF THE DEAN
GOVERNMENT MEDICAL COLLEGE, GONDIA

NEET-PG-2025 Date : / /2025

Name of Student :

Category **Subject :** MD/ MS/ **AIR**

SN	Certificate
1	Online Application Form& Scrutiny form
2	Selection List ((For State) / Allotment Letter (For AIEE)(Essential document)
3	Admit Card, & Rank Latter(Essential document)
4	Any Photo ID proof.(Adhar Card/Pan Card/Pass port/ Driving license)(Essential document)
5	AIEE Entrance Exam Marksheets (Essential document)
6	First to Final MBBS Marksheets (Essential document)
7	Internship Completion Certificate (Essential document) (Before 31/07/2025)
8	MBBS Passing Certificate / MBBS Degree Certificate (Essential document)
9	MMC/ MCI Registration Certificate(Essential document)
10	Attempt Certificate
11	College Leaving Certificate (LC/TC)
12	Nationality Certificate
13	Domicile Certificate
14	Caste Certificate (if Applicable-Essential document)
15	Caste Validity Certificate (if Applicable)
16	Annexure -IV (if Caste Validity Certificate not applicable)
17	Non Creamy Layer Certificate (if Applicable) (Valid upto 31/03/2026)
18	Migration Certificate (if Applicable)
19	Self Educational Gap Affidavit (if Applicable)
20	Medical Fitness Certificate (Annexure -H)
21	Relieving Letter (For AIEE) (For 2nd & 3rd Round)
22	SSC/10 th Passing Certificate for date of Birth (Essential document)
23	HSC/12th Passing Certificate & Marksheets (Essential document)
24	Bond Release Certificate (if Applicable)
25	Disability Certificate (if Applicable)(Essential document)- The format of Certificate of Disability is annexed in the Information Bulletin / Information Brochure)
26	Other Essential Certificate
27	MCI Recognition Certificate (Certificate from head of institute showing that the medical college from which the candidate has passed MBBS examination is recognized by medical council of India)
28	EWS Certificate 2025-26(if Applicable-Essential document) (if Applicable-in the format as specified in the Information Bulletin / Information Brochure)
29	Demand Draft (Essential document)
30	Scan Copy in pen drive

Student Sign

Section Clerk

Scrutiny officer

(Note: Submit After Cut-up Date)On Rs.500/- Stamp Paper

Undertaking / Affidavit

Name of Student :

Permanent Address :

Course : M.D./ M.S.

Admission Year : 2025-26

I the undersigned postgraduate student of Government. Medical College, Gondia hereby submitting an undertaking that I will serve the Government of Maharashtra / Corporation / Defense service for a period of **ONE YEARS**, after completion of Post Graduate Course failing which I will pay **Rs. 50,00,000/- (Rs. Fifty Lac Only)** for the default as per rule.

Additional I will complete 3 year residency tenure at this college, if I fail to complete my residency tenure I will pay **Rs. 10,00,000/- (Rs. Ten Lacs Only)** for the default (i.e. non completion of junior residency tenure) and I will pay **Rs. 10,00,000/- (Rs. Ten Lacs only)** towards the lapse of Postgraduate seat. As per rules mentioned in the NEET PG-2024 information brochure.

Date :

Place :

(Name and Signature of Student)

ANNEXURE - H

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 or on this format with original seal and signature.

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Mr. /Mrs.

..... 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 / Homeopathy / 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.

Date :

Seal of Registered Medical Practitioner

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 नं.

दिनांक: / /

जो कोई भी इससे संबंधित है उसके लिए

प्रमाणपत्र

प्रमाणित किया जाता है की, श्री. / कुमारी इनको,
तहसिलदार / जिल्हा अंजिस्ट्रेट कार्यालयद्वारा निर्मित
किया हुआ जात प्रमाणपत्र क्रमांक दिनांक
वेद्य है।

तथा, राज्यमें अलगसे जात वेधता प्रमाणपत्र निर्मित करने का
कोई प्रावधान नहीं है।

कार्यालयीन घोषणा

तहसिलदार / जिल्हा अंजिस्ट्रेट तथा
संबंधित अधिकारी के हस्ताक्षर