

## **Government Medical College, Baramulla**

193101-Kanth Bagh, Baramulla Kashmir (Phone No. 0195-2238140 & Email: <a href="mailto:registraracademicsgmcbaramulla@gmail.com">registraracademicsgmcbaramulla@gmail.com</a> & Website: <a href="www.gmcbaramulla.com">www.gmcbaramulla.com</a> (Academic Section)

#### <u>Student Profile Form (MBBS Admission – 2025)</u> <u>Applicable for UT Quota Students Only</u>

J&K BOPEE Notification No.:	Dated:	& Notific	ation S. No.:
NEET Roll No.:, N	IEET (State) Rank:	, NEET (Nationa	l) Rank:
Admission Session:	, Name of Category (Sel	ection):	Gender:
Aadhaar Card No.:	, Religion:	Mother Tongı	ıe:
1. Name of Student:			
2. Parentage:			Paste a Recent Passport Size
3. Date of Birth: / /	(as per Matricul	ate Certificate)	Photograph with Name
4. 12th Class Examination Pass	sed Session/ Year:		
5. Name of 12 <sup>th</sup> Class Passing S	School:		
6. Name of 12 <sup>th</sup> Class Passing I	Board:	with Reg. No	
7. Marks in 12 <sup>th</sup> Class Examina	tion (Min. /Max.):	/with Roll No	·
8. Combined Marks in Physics	+ Chemistry + Biology S	ubjects (Min. /Max.)	):/
9. Marks in English Subject: (M	Iin. /Max.):/		
10. Whether Registered with U	niversity of Kashmir:	Yes / No	(If, Yes)
University of Kashr	nir Registration No		
11. Permanent Address:		Pi	n Code:
a. Tehsil:	_b. District:	c. State/UT	
12. Phone No.:	_, Alt. No.:	, Email ID:	
13. Fee Paid: ₹	, DD NO	Dated:	
		Signs	ature of Candidate

Note: Keep a copy of Check List attached with this Form.



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#### <u>Student Profile Form (MBBS Admission – 2025)</u> <u>Applicable for All India Quota Students Only</u>

Willianto Doutioinato in M	ovet Down of Councilling.	Voc. / No.	
Willing to Participate in No	_	Yes / No	
Date of Allotment Letter:_	, MCC Round No.	.: & Selection	List S. No.:
NEET Roll No.:	, NEET (State) Rank:	, NEET (Nationa	l) Rank:
Admission Session:	, Name of Category (	Selection):, Gen	der:
Aadhaar Card No.:	, Religion:	, Mother Tong	ue:
1. Name of Student:			
2. Parentage:			Paste a Recent
3. Date of Birth	(as per Matriculate	Certificate)	Passport Size Phot <u>ograph</u> <u>with</u> Name
4. 12th Class Examinat	tion Passed Session/ Year:		
5. Name of 12 <sup>th</sup> Class F	Passing School:		
6. Name of 12 <sup>th</sup> Class F	assing Board:	with Reg. No	)
7. Marks in 12 <sup>th</sup> Class I	Examination (Min. /Max.):	/ with Roll N	No
8. Combined Marks in	Physics + Chemistry + Biology	Subjects (Min. /Max.	):/
9. Marks in English Sul	oject: (Min. /Max.):/		
10. Whether Registered	with University of Kashmir:	Yes / No	(If, Yes)
University of	of Kashmir Registration No		
11. Permanent Address	with Pin Code:		
a. Tehsil:	b. District:	c. State/UT	
12. Phone No.:	, Alt. No.:	, Email ID:	
13. Fee Paid: ₹	, Transaction ID:	Dated:	-
		Signat	ture

Note: Keep a copy of Check List attached with this Form.



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CHECK LIST: List of Documents to be submitted with Student Profile Form (Original as well as Xerox Copy)

S. No.	Name of Document in Original	Checked (√ or NA)
1.	Provisional Allotment Letter (All India Quota)/ Selection Notification (UT Quota)	
2.	Rank Letter/ NEET Result Card	
3.	Admit Card issued by NTA	
4.	04 recent Passport Size Photographs with Name	
5.	Matriculation/ Date of Birth Certificate	
6.	10 <sup>th</sup> Marks Sheet	
7.	12 <sup>th</sup> Marks Sheet	
8.	Domicile/ Residence Proof Certificate	
9.	Category Certificate (Wherever Applicable)	
10.	Proof of Identity by way of Aadhaar Card	
11.	Migration Certificate in case of CBSE/ICSE Students	
12.	Medical Fitness Certificate duly attested by Chief Medical Officer	
13.	Valid Income Certificate in respect of Poor & Backward Category Students	
14.	Discharge/ Transfer Certificate / Provisional Certificate	
15.	Fee Receipt	
16.	Anti-Ragging Affidavits from Student & Parent, prescribed by College (Applicable for all Students)	
17.	Time Gap Affidavit (Applicable for those candidates who have a Time Gap of 01 year or more between passing 12 <sup>th</sup> Class Examination and joining this MBBS Course)	
18.	Service Bond, prescribed by J&K BOPEE (Applicable for the Students of UT Ladakh)	
19.	Any other Affidavit(s)/ Document(s)/ Certificate(s)/ Bond(s) prescribed by J&K BOPPE/ MCC	

#### **Important Instructions:**

- Admission Fee: Rs. 37,636/- (excluding Hostel Fee) to be deposited in shape of Demand Draft pledged in the name of Chief Accounts officer, Government Medical college, Baramulla.
- All the Original Documents are to be submitted at the time of Admission.
- Original Documents are to be provided in a Hard file cover.
- Xerox copies are to be provided in a Plain File Cover.
- Student Profile Form must be written in neat & clear handwriting.

# AFFIDAVIT FORMAT (PRESCRIBED BY COLLEGE ANTI-RAGGING, FROM CANDIDATE)

(To be Attested by 1st Class Magistrate)

1.	1. I,	
	carefully read and fully understood the law pr	ohibiting ragging and the
	directions of the Supreme Court and the Central regard.	/ State Government in this
2.	<ol> <li>I have received a copy of the NMC Regulations Ragging in Higher Educational Institutions 2009 through it.</li> </ol>	_
3.	3. I hereby undertake that: -	
	<ul> <li>a. I will not indulge in any behaviour or act definition of Ragging.</li> </ul>	that may come under the
	b. I will not participate in or abet or propagate	
	<li>c. I will not hurt anyone physically or psy other harm.</li>	chologically of cause ally
4.	4. I hereby agree that if found guilty of any asp punished as per the provisions of the NMC Reg and /or as per the law on the land.	
Sig	Signed on this Day	
	Signatu	are of Candidate
	Name o	of Candidate
	S/o	
	R/o	

# AFFIDAVIT FORMAT (PRESCRIBED BY COLLEGE ANTI-RAGGING, FROM PARENT)

(To be Attested by 1st Class Magistrate)

1. I, _	F/o	R/o
		he law prohibiting Ragging and the
dire	ections of the Supreme Court and th	ne Central / State Government in this
rega		
		egulations on Curbing the Menace of
		tions 2009, and have carefully gone
	ough it. reby undertake that: -	
	•	not indulge in any behaviour or act
	that may come under the definition	•
b	•	rd is found guilty of any aspect of
	Ragging, he/she may be punishe	ed as per the provisions of the NMC
	Regulations and/or as per the law	
C	-	vill not hurt anyone physically or
	psychologically or cause any othe	er narm.
Signed	on this Day	
		Signature of Parent
		Name of Parent
		F/o
		R/o

# AFFIDAVIT FORMAT (TIME GAP)

(To be Attested by 1st Class Magistrate)

I,,
I,, S/o-D/o, R/o, do hereby solemnly affirm and declare as under:
1. That, I have been selected for MBBS Course in Govt. Medical College, Srinagar by J&K BOPEE (under UT Quota) vide Notification No
Dated: or MCC (under All India Quota) in Round No
Date of Allotment Letter
2. That, I have passed my 12 <sup>th</sup> examination in the year under Roll No: From (Board)
3. That, after passing my 12th Examination, I have not joined any
Professional/Non-Professional Degree or Diploma Course in any Institution/College/University in or outside the UT of J&K.
4. That, in case this statement proved incorrect I shall be personally responsible for the consequences arising there upon.
Deponent
ERIFICATION:
Verified on this dayatthat the ontents of the affidavit are true and correct to the best of my knowledge, belief and nothing material has been concealed and no part of it is false.
Deponent