

M.B.B.S. ADMISSION BOOKLET
ACADEMIC YEAR 20 ____ - 20 ____



BHIMA BHOI MEDICAL COLLEGE & HOSPITAL, BALANGIR
At-Laltikra, Po- Rajendra College, Balangir, Odisha - 767002

Mobile No – 82801 89600

Website: www.bbmchbalangir.nic.in, e-mail id: gmcbalangir@gmail.com

AIQ: SQ:

[Please tick in the appropriate box]

Name of the Student			
Enrollment No.			
Enrollment / Admission Date		Counselling Round	
Date of Relieve/ Resignation			

BIO-DATA OF THE CANDIDATE:

Affix your
recent Passport
size
photographs
here.

Name of the Candidate: _____

NEET Roll No.: _____ Application No.: _____

NEET All India Rank No.: _____ State Rank _____

NEET All India Category Rank _____ State Category Rank _____

Date of Birth [in numerical DD/MM/YYYY]: _____ Age in year _____

Date of Birth in Words: _____

Admission Category: _____ Candidate's Common Category _____

Gender: _____ Blood Group: _____ Religion _____

Mobile No: _____ Email ID: _____

Father's Name: _____

Mobile No: _____ Email ID: _____

Occupation: _____ Annual Income: _____

Mother's Name: _____

Mobile No: _____ Email ID: _____

Occupation: _____ Annual Income: _____

Present Address with PIN Code:

Permanent Address [if other than present address:

Date: _____

Signature of the student

UNDERTAKING FOR NOT TO BE INVOLVED IN RAGGING ACTIVITIES

FORM I

[See sub-clause (a) of clause (i) and sub-clause (a) of clause (ii) of sub-regulation (2) of regulation 7]

FORMAT OF UNDERTAKING BY THE STUDENT

1. I _____ (Full Name in Block Letters) Son/ Daughter of Mr./Mrs./Ms. _____ (Full Name in Block Letters) admitted to the course of _____ (Name of Course) with Admission No. _____ at _____ (Name of College / Institution) affiliated to _____ (Name of University) have received a copy of the National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, 2021(hereinafter referred to as the said regulations).
2. I have carefully read and fully understood the provisions in the said regulations.
3. I have particularly perused the provisions of regulations 3 and 4 of the said regulations and have fully understood what constitutes “ragging”.
4. I have also in particular perused the provisions of Chapter IV and read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
5. I hereby undertake that—
 - (i) I will not indulge in any behaviour or act that may come under the definition of ragging as may be constituted under regulation 3 of the said regulations;
 - (ii) I will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulation 3 of the said regulations;
 - (iii) I will not hurt anyone physically or psychologically or cause any other harm.
6. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.
7. I also declare that I have never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled / withdrawn.

Signed on this the _____ day of _____ month of _____ year.

Signature

Name: _____

Address: _____

Tel/ Mobile No: _____

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

FORM II

[See sub-clause (b) of clause (i) and sub-clause (b) of clause (ii) of sub-regulation (2) of regulation 7]

FORMAT OF UNDERTAKING BY PARENT / GUARDIAN OF THE CANDIDATE/STUDENT

1. I _____ (Full Name in Block Letters) Father / Mother/
Guardian of _____ Mr./Mrs./Ms. (Full Name of Student in
Block Letters) admitted to the course of _____ (Name of Course) with Admission
No. _____ at _____
(Name of College / Institution) affiliated to _____
(Name of University) hereby declare that I have received a copy of the National Medical Commission
(Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations,
2021(hereinafter referred to as the said regulations).
2. I have carefully read and fully understood the provisions in the said regulations.
3. I have particularly perused the provisions of regulations 3 and 4 of the said regulations and have fully
understood what constitutes “ragging”.
4. I have also in particular perused the provisions of Chapter IV and read and understood the
administrative and penal actions that may be taken against my son/ daughter/ward in case he /she is
found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to
promote ragging.
5. I hereby undertake that my son/ daughter/ ward —
 - (i) will not indulge in any behaviour or act that may come under the definition of ragging as may
be constituted under regulations 3 and 4 of the said regulations;
 - (ii) will not participate in or abet or propagate ragging in any form included but not limited to those
that may be constituted under regulations 3 and 4 of the said regulations;
 - (iii) will not hurt anyone physically or psychologically or cause any other harm.
6. I hereby agree that if my son/ daughter/ ward is found guilty of any aspect of ragging, he/ she may be
punished as per the provisions of the said regulations or as per the applicable law for the time being
in force.
7. I also declare that he/she has never been found to be guilty of ragging or abetting ragging, actively or
passively, or being part of a conspiracy to promote ragging and have never been punished in any
manner for these offences and further affirm that if this declaration is incorrect or false, his/her
admission is liable to be cancelled/withdrawn.

Signed on this the _____ day of _____ month of _____ year.

Signature

Name:

Address:

Tel/ Mobile No.

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

DOCUMENT SUBMISSION & VERIFICATION SHEET:

Sl. No.	Document Submitted (Original & Self-Signed Photocopy)	Found Correct or not	
		Correct	incorrect
1	ID Proof (Original to be returned after verification).		
2	Provisional Allotment Letter issued by MCC/OJEE.		
3	NEET Admit Card.		
4	NEET Rank Letter / Score Card.		
5	Relieving Letter (applicable for second round onwards).		
6	10th Certificate / Birth Certificate <i>for age proof</i> .		
7	+2 Certificate.		
8	+2 Mark Sheet [<i>must have passed in the subjects of Physics, Chemistry, Biology/Bio-technology and English individually & in PCB for UR-50%, SC/ST/OBC – 40%, UR-PwD – 45%</i>].		
9	Transfer Certificate / College Leaving Certificate.		
10	Conduct Certificate / Character Certificate. निरामया:		
11	Reservation Certificate: [ST/SC/OBC/SEBC/EWS/GC/PWD/ES] _____ <i>Mention: Issued by native state</i> _____		
12	Passport Size Photographs. Estd. 2017		
13	Resident Certificate.		
14	Bond as directed by Govt. of Odisha in H & FW Department vide Resolution No. ME-II-19053/H Dated. 21.08.2020.		
15	Gap Certificate, if applicable.		
16	Admission fees of Rs: _____ Receipt No. _____ & Date: _____		
17	Photocopy of Bank Passbook		
18	Online generated Anti-Ragging Undertaking by the candidate & Parents		
19	Other documents if any (mention): _____		

Date: _____

Signature of the student

SELF DECLARATION:

I _____ do hereby undertake that, all the documents and information submitted by me is true to the best of my knowledge and belief. If the same are found to be false at any point of time now onwards, my admission to the course will stand cancelled and I shall be entitled for any legal action as deemed proper under rule.

Signature of Candidate in Full

Place: Balangir

Date: _____

WILLINGNESS FOR UPGRADATION

I _____ do here by express my willingness to **participate** / **not to participate** in the further rounds of the counseling.

Signature of Candidate in Full

Place: Balangir

Date: _____

Eligible for Admission / Not Eligible for Admission [reason there to]:

Signature of Clerk

Signature of the Scrutinizing Officer

**Dean & Principal
BBMCH Balangir**



**OFFICE OF THE DEAN & PRINCIPAL
BHIMA BHOI MEDICAL COLLEGE & HOSPITAL, BALANGIR
At/Po/Dist.- Balangir, PIN- 767002 (Odisha)**



E-mail: gmcbalangir@gmail.com, Website: www.bbmchbalangir.nic.in, Mob No: 82801 89600

**CUSTODIAN CERTIFICATE
[OFFICE COPY]**

This is to certify that, Mr. / Ms. _____
has joined MBBS course at Bhima Bhoi Medical College & Hospital, Balangir on
_____. The following original certificates/documents of the candidate are in the
custody of this Institute.

Sl. No.	Document	Document Sl. No.
1	Provisional Allotment Letter issued by MCC / OJEE.	
2	NEET Admit Card.	
3	NEET Rank Letter / Score Card.	
4	10 th Pass Certificate or Equivalent Certificate for DOB.	
5	+2 Certificate.	
6	+2 Mark Sheet.	
7	Transfer Certificate /College Leaving Certificate.	
8	Conduct Certificate / Character Certificate.	
9	Category Certificate (ST/SC/OBC/SEBC/EWS/GC/PWD/ES).	
10	Resident / Nativity Certificate.	
11	Bond as directed by Govt. of Odisha in H & FW Department vide Resolution No. ME-II-19053/H Dated. 21.08.2020.	
12	Gap Certificate, if applicable.	
13	Online generated Anti Ragging Undertaking	
14	Any Other.	

**Dean & Principal
Bhima Bhoi Medical College & Hospital
Balangir**

Received a copy.

Signature of the Candidate: _____

Date: _____



OFFICE OF THE DEAN & PRINCIPAL
BHIMA BHOI MEDICAL COLLEGE & HOSPITAL, BALANGIR
At/Po/Dist.- Balangir, PIN- 767002 (Odisha)



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CUSTODIAN CERTIFICATE
[STUDENT'S COPY]

This is to certify that, Mr. / Ms. _____
has joined MBBS course at Bhima Bhoi Medical College & Hospital, Balangir on _____.
The following original/photocopy certificates or documents of the candidate are in the custody of this Institute.

Sl. No.	Document	Document Sl. No.
1	Provisional Allotment Letter issued by MCC / OJEE.	
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12	Gap Certificate, if applicable.	
13	Online generated Anti Ragging Undertaking	
14	Any Other.	

Dean & Principal
Bhima Bhoi Medical College & Hospital
Balangir

Date: _____