

STUDENT INFORMATION
S.R.T.R GOVT.MEDICAL COLLEGE, AMBAJOGAI
BPMT ADMISSION FOR THE YEAR 2024-25

1	Name of the Student as mentioned on HSC Mark sheet (in Capital)	
	Guardian / Father's Full Name	
	Name of Mother	
	Full Name of the Candidate in Devanagari (Marathi/Hindi)	
2	Residential Address with PIN code	
	Mobile No. of Student	
	Mobile No. of Parent	
3	E-mail Address of Student	
	E-mail Address of Parent	
4	a) Date of Birth	
	b) Place of Birth	
5	Aadhaar No.	
6	Gender (Male /Female)	
7	Date of Admission	/ /2024
8	a) Category	
	b) Caste	
	c) Sub-Caste	
	Category of Admission	
9	Domicile State (belongs to which state)	
10	Academic Record	
	S.S.C. Year of Passing:	
	Name of the HSC/12 th Board	
	Marks Obtained in H.S.C.(10+2)	
	(E) English: Marks Obtained	/100
	(P) Physics: Marks Obtained	/100
	(C) Chemistry: Marks Obtained	/100
	(B) Biology: Marks Obtained	/100
	Total marks (Phy+ Chem +Bio)	/300 (P+C+B)
	Name of Board in HSC Exam	
	Seat no HSC and course	
11	Blood Group	
	Mark of Identification (two)	1)
		2)
	Guardian/Father's Occupation	
12	*Willingness about organ donation after Accidental Death.	Yes /No

* As per Maharashtra University of Health Sciences eligibility form.

Date: / /2024

Place: AMBAJOGAI

Signature of Candidate

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Dr. _____ who is desirous of admission to medical MBBS courses.

He/she has not given any personal history of any disease incapacitation him/her to undergo the professional course. Also, on clinical examination it has been found that he/she is medically fit to undergo the medical postgraduate course (NEET UG) in the academic Year _____

1. Absence of any incapacitating and / or progressive systematic
2. disease/disorder/condition.
3. Absence of any disability of upper limb/s.
4. Absence of any major visual/auditory disability,
5. Absence of psychosis/neurosis/mental retardation.
6. Ability to maintain erect posture.
7. Reasonable manual dexterity.

Address of the Registered Medical Practitioner

Signature

Name

Registration

No.

Seal of Registered Medical Practitioner

Date:

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Note: _____

- ✓ A candidate must be medically fit to undergo MBBS courses applied for. The medical fitness must be certified by registered medical practitioner in the above prescribed format ONLY.
- **If the candidate has claimed PWD seat & allotted a PWD seat** He/She has to submit additionally the Physical handicapped certificate from the authorized agencies only as mentioned in the information available on official websites of mcc & state.

FOR BPMT STUDENTS

NOTIFICATION (For BPMT-2024 Admissions)

All the selected students of allotted seat at **S.R.T.R Govt. Medical College, Ambajogai Dist-Beed** should follow following 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 2 copies of Application Form,
 3. Print and fill 2 copies of Holding Certificate
 4. Print and fill 2 copies of Student information.
 5. All **original documents** enlisted in the holding certificate **and two sets of SELF ATTESTED photo copies** of all original documents.
 6. All original Documents **INDIVIDUAL SCAN in PDF format only** will be compulsory required during admission. Student should scan document properly through computer scanner (Size 500 kb only). **Please don't use mobile scanner for scanning documents.** Individual Original Documents should be scanned and **renamed** appropriately. This submission will be mandatory to be submitted ONLY on pendrive.
e.g. Nationality certificate, after scanning should be renamed as
Nationality- Amol Solanke (Name of Student)
- Prepare Folder and rename it with Name of the student, keep all scan documents in this folder for submission during admission. Scan documents will be accepted only in Pen Drive.
7. 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. **Cash / Cheque will NOT be acceptable.**
 8. Other Letters/undertakings if required will be taken at the time of admission if permissible within the rules thereof.

9. Kindly note.... Admission Process requires verification and approval. No student will be given Joining letters urgently. The office may require 1 day to complete the process.
10. Students are strictly advised NOT TO EDIT ANY FORMATS. All formats should be filled by student in his/her own handwriting.
11. During admission process students & parents are advised to strictly maintain social distancing, wear mask, should have Arogyasetu app installed on mobiles and use sanitizers. Any student found breaking these rules will be liable for legal actions as per the instructions from the Govt.
12. Submit all documents in a simple button file folder asbelow:

SIMPLE BUTTON FOLDER



**Sd/-
Nodal Officer
S.R.T.R GMC
AMBAJOGAI**

chih,eVh izos'kk1kBh fo|kF;kZauk egRokP;k
lqpuk

Lokeh jkekuan frFkZ xzkeh.k 'kkldh; oS|dh;
egkfo|ky;] vacktkSxkbZ ;sFks chih,eVh izos'kk1kBh
;s.kk&;k fo|kF;kZauh [kkyhy lqpukaps dkVsdksji.ks
ikyu djkos-

- 1- ;k ihMh,iQ iQkbZy e/khy **Application Form P;k nksu izrh**
fiazV djQu R;ke/khy ekfgrh vpqd Hkjkoh-
- 2- ;k ihMh,iQ iQkbZy e/khy **Holding CertificateP;k nksu izrh**
fiazV djQu R;ke/khy ekfgrh vpqd Hkjkoh-
- 3- ;k ihMh,iQ iQkbZy e/khy **Student Information P;k nksu**
izrh fiazV djQu R;ke/khy ekfgrh vpqd Hkjkoh-
- 4- loZ eqGizek.ki_ks Holding Certificate e;/s fnysY;k
izek.ki_kkaP;k ;knhuqlkj dzekauh ykokohr o rlsp
R;kpdzekauh Lo Lkk{kkafr (lsYiQvVsLVsM) dsysys
nksu >ksjkWd1 lsV r;kj djkos-
- 5- Holding Certificate e;/s fnysY;k loZ eqG izek.ki_kkaps
Li"V ;srhy (**d=i;k eksckbZy LdWujpk okij djQu**
u;s)vls izR;sd izek.ki_kkaps Lora_k LdWu djkos
(**ihMh,iQ iQkWjeWV e;/s 500 ds-chP;k vkr**) o R;k
LdWu dsysY;k iQkbZyyk R;kizek.ki_kkaps uko o
fo|kF;kZaps uko |kos-

mnk-Nationality Certificate gs izek.ki_k LdWu dsY;kuarj R;k
iQkbZyys uko



Nationality Certificate-Amol Solanke.pdf vls |kos-

v'kkizdkjs loZ izek.ki_ks LdWu dsY;k uarj loZ
ihMh,iQ iQkbZy ,d iQksYMj e;/s Vkdqu R;kiQksYMjyk
fo|kF;kZaps uko |kos o LdWu dsysys izek.ki_ks
isuM!kbZo e;/s lknj djkos-

mnk& **Amol Solanke Documents**

- 6- loZ fo|kF;kZauh vki.kkal ykxq vlysY;k 'kqYdk

dk<kos-

- 7- izos'k izfdz;s njE;ku vko';drsuglkj
fo|kF;kZadMqu izfrKki_k o izek.ki_k ekx.;kr
;srhy-
- 8- izos'kklkBh vkysY;k fo|kFkhZ o ikyd ;kauk lqfpr
dj.;kr ;srs dh] **izos'k izfdz;kiq.kZ dj.;klkBh**
fdeku 1 fnolkapk dkyko/kh ykxq 'kdrks-d=i;k
dks.khgh izos'k fuf'pr >kkysY;k izek.ki_kklkBh
(JOINING LETTER) ?kkbZ djQ u;s-
- 9- izos'k izfdz;snjE;ku fo|kFkhZ o ikyd ;kauh fouk
dkj.k xnhZ djQu u;s-
- 10- loZ eqG izek.ki_ks o nksu Nk;kafdr izrh [kkyhy
fnysY;k cV.k iQksYMj e/;s tek djkos

