

SWAMI RAMANAND TEERTH
RURAL GOVERNMENT
MEDICAL COLLEGE,
AMBAJOGAI DIST-BEED



Contact Number for Admission Process

Landline Number : 02446-248438

DON'T CALL ON THE PERSONAL NUMBER OF DEAN / NODAL OFFICER

FOR ALL INDIA/STATE QUOTA STUDENTS
NOTIFICATION (For NEET UG-2025 Admissions)

All the selected students of NEET-UG-2025 allotted seat at **S.R.T.R Govt. Medical College, Ambajogai Dist-Beed (M.S.)** 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 **INDIVIDUALSCAN 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 pen drive.

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 1-2 days to complete the process.**
10. **Students are advised to read details of admission process in information brochure/FAQs/other notifications available on mcc website and for state admissions (Maharashtra state) on state commissioner admission cell official website. The institute is responsible ONLY for admissions; students are advised to check official websites for any queries.**
11. **Students are strictly advised NOT TO EDIT ANY FORMATS. All formats should be filled by student in his/her own hand writing.**
12. **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.**
13. **Submit all documents in a simple button file folder as below:**



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

एमबीबीएस प्रवेशासाठी विद्यार्थ्यांना महत्वाच्या सुचना

नीट युजी-२०२५ अंतर्गत स्वामी रामानंद तीर्थ ग्रामीण शासकीय वैद्यकीय महाविद्यालय, अंबाजोगाई येथे एमबीबीएस प्रवेशासाठी येणा-या विद्यार्थ्यांनी खालील सुचनांचेकाटेकोरपणे पालन करावे.

१. या पीडीएफफाईल मधील **Application Form** च्या दोन प्रती प्रिंट करुन त्या मधील माहिती अचुक भरावी.
२. या पीडीएफ फाईल मधील **Holding Certificate** च्या दोन प्रती प्रिंट करुन त्या मधील माहिती अचुक भरावी.
३. या पीडीएफफाईल मधील **Student Information** च्या दोन प्रती प्रिंट करुन त्या मधील माहिती अचुक भरावी.
४. सर्व मुळ प्रमाणपत्रे Holding Certificate मध्ये दिलेल्या प्रमाणपत्रांच्या यादी नुसार क्रमांनी लावावीत व तसेच त्याच क्रमांनी स्व साक्षांकित (सेल्फअटेस्टेड) केलेले दोन झेरॉक्स सेट तयार करावे.
५. Holding Certificate मध्ये दिलेल्या सर्व मुळप्रमाणपत्रांचे स्पष्ट फोटो मध्ये येतील (कृपया मोबाईल स्कॅनरचा वापर करू नये) असे प्रत्येक प्रमाणपत्रांचे स्वतंत्र स्कॅन करावे (पीडीएफ फॉरमॅट मध्ये ५०० के.बीच्या आत) व त्या स्कॅन केलेल्या फाईलला त्या प्रमाणपत्राचेनाव व विद्यार्थ्याचेनाव द्यावे.

उदा. Nationality Certificate हे प्रमाणपत्र स्कॅन केल्यानंतर त्या फाईलचेनाव



Nationality Certificate–AmolSolanke.pdf असे द्यावे.

अशा प्रकारे सर्व प्रमाणपत्रे स्कॅन केल्यानंतर सर्व पीडीएफ फाईल एक फोल्डर मध्ये टाकुन त्याफोल्डरला विद्यार्थ्याचे नाव द्यावे व स्कॅन केलेले प्रमाणपत्रे पेन ड्राईव मध्ये सादर करावे.

उदा-  **Amol Solanke Documents**

६. सर्व विद्यार्थ्यांनी आपणांस लागू असलेल्या शुल्का नुसार धनाकर्ष (डी.डी) स्पेलिंगमिस्टेक न करता काढावे.
७. प्रवेश प्रक्रियेदरम्यान आवश्यकतेनुसार विद्यार्थ्यांकडून प्रतिज्ञापत्र व प्रमाणपत्र मागण्यात येतील.
८. प्रवेशासाठी आलेल्या विद्यार्थी व पालक यांना सुचित करण्यात येते की, प्रवेश प्रक्रिया पूर्ण करण्यासाठी किमान १ ते २ दिवसांचा कालावधी लागू शकतो. कृपया कोणीही प्रवेश निश्चित झालेल्या प्रमाणपत्रासाठी (JOINING LETTER) घाई करू नये.
९. तसेच प्रवेशास येण्यापुर्वी राज्य सामाईक प्रवेश परीक्षा कक्ष, यांनी वेळोवेळी दिलेल्या सुचनांचे पालन करावे.
१०. प्रवेश प्रक्रियेदरम्यान विद्यार्थी व पालक यांनी महाराष्ट्र शासनाच्या कोव्हिड संबंधी सर्व सुचनांचे पालन करावे व विनाकारण गर्दी करू नये.
११. सर्व मुळ प्रमाणपत्रे व दोन छायांकित प्रती खालील दिलेल्या बटण फोल्डर मध्ये जमा करावे



STUDENT INFORMATION

S.R.T.R GOVT.MEDICAL COLLEGE, AMBAJOGAI **ADMISSION FOR THE YEAR 2025-26**

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 Student in 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)	
	(1) English: Marks Obtained	/100
	(2) Physics: Marks Obtained	/100
	(3) Chemistry: Marks Obtained	/100
	(4) Biology: Marks Obtained	/100
	Total marks (Phy+Chem+Bio)	/300 (P+C+B)
	NEET-UG-2025 Roll No.	
	NEET-UG-2025 Marks	/720
	NEET-UG-2025 AIR No.	
	Name of Board in HSC Exam	
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: / /2025

Place: AMBAJOGAI

Signature of Candidate



GOVERNMENT OF MAHARASHTRA

SWAMI RAMANAND TEERTH RURAL GOVERNMENT MEDICAL COLLEGE, AMBAJOGAI-431517, DIST. BEED.

(OFFICE OF THE DEAN)

Phone. No. (Office) +91-02446- 245792 (Fax) +91-02446-247132 Website. <http://www.srtrmc.org> E-mail - ugexamsrt@gmail.com, srtrmc@gmail.com

Out.No.SRTRGMC/Admission 2025-26/

/2025

Date. / /2025

HOLDING CERTIFICATE

This is to certify that Shri/Kum. _____ is admitted in this college on / /2025 to 1st MBBS course for the Academic Year 2025-26. His/her following **ORIGINAL CERTIFICATES** are retained in this College.

Sr.No.	Original Documents Required	Available YES/No
1	Allotment letter generated on-line (Issued by MCC- for AI students). For state quota candidates, Allotment letter / Selection list page printout bearing name of candidate.	
2	Nationality Certificate OR Valid Passport	
3	Domicile Certificate	
4	Aadhar Card (Photocopy compulsory)	
5	SSC (10th) Passing Certificate	
6	HSC (10+2) Mark sheet	
7	HSC (10+2) Passing Certificate	
8	Admit card & Marksheet NEET-UG-2025 issued by NTA	
9	Result or Rank Letter NEET-UG-2025 issued by NTA	
10	Proof of identity (PAN/ Adhar/Driving License/ Passport)-XEROX copy	
11	Caste Certificate (In Standard Format as specified in prospectus/ Information bulletin)	
12	Caste Validity Certificate / For outside Maharashtra students (OMS) Letter from magistrate that your state does not issue caste validity certificate	
13	Non Creamy Layer Certificate... Valid up to 31/03/2026 (Not required for SC & ST)	
14	SEBC (Socially & Educationally Backward Classes) Certificate as per the prescribed format by Competent Authority issued for 2025-2026 (If applicable)	
15	EWS certificate as per the prescribed format by Competent Authority issued for 2025-2026 (If applicable)	
16	School Leaving OR Transfer Certificate	
17	Defense Certificate (for D1,D2,D3 .. (for State quota students only)	
18	Physically Handicapped / Disability Certificate.... If applicable (As per the NMC norms & as specified in information Brochure/Bulletin)	
19	MKB Certificate (for State quota students only)	
20	Hilly Area Certificate.....(for State quota students only)	
21	Medical Fitness Certificate in prescribed Performa	
22	Migration Certificate (if applicable)	
23	Self-Education Gap Certificate (Affidavit on Rs.100/- Bond)	
24	Copy of Online Application form (Latest) filled on www.mahacet.org	
Tuition Fees Demand draft:		
D.D.No:	of Rs. Dt. / /2025	
Other Fees:D.D.No:	Rs. Dt. / /2025	
(Document Sets to be prepared exactly as per above sequence)		(Please write-down YES/No carefully)

Documents Verifier Name & Sign

DEAN,
S.R.T.R Govt. Medical
College, Ambajogai.

Application for admission

Recent Passport size Photograph

Address (In Capital):- _____

E-mail Address of Student:-_____

E-mail Address of Student:-_____

Date: :- / /2025

**To,
The Dean,
S.R.T.R Govt. Medical
College, Ambajogai Dist-Beed**

Sub: - Joining in 1st MBBS Course at S.R.T.R Govt. Medical College, Ambajogai

Ref:- Selection letter/List : (print out attached)

Respected Sir,

I the undersigned Shri./Kum. (Full Name in Capital) _____
_____ has been selected for 1st MBBS Course in S.R.T.R Govt. Medical
College, Ambajogai as per the Selection letter of All India / Statelist.

Kindly enroll me in your college as Ist MBBS student for the Academic Year 2025-2026.

Thanking you.

Yours faithfully,

Signature of candidate
(Name: _____)

Detail Information of Candidates

Passport Size
Photograph

S.R.T.R GOVT.MEDICAL COLLEGE, AMBAJOGAI

ADMISSION TO M.B.B.S. COURSE FOR THE ACADEMIC YEAR 2025- 2026.

A) NAME OF CANDIDATE _____
(As Per 12th Marksheet)

EMAIL ID: _____

MOBILE NO. _____

AADHAR NO: _____

VOTER ID NO: _____

B) FATHER'S NAME: Shri _____

EMAIL ID: _____

MOBILE NO. _____

C) MOTHER'S NAME: Smt. _____

D) PERMANENT ADDRESS: _____

_____ PIN CODE: _____

Domicile State : _____

ADDRESS FOR CORRESPONDENCE: _____

_____ PIN CODE: _____

E) DATE OF BIRTH: ____/____/____

PLACE OF BIRTH: _____ TALUKA: _____

DISTRICT: _____ STATE: _____

F) MOTHER TONGUE: _____

G) CASTE: _____ CATEGORY: _____

RELIGION: _____ ALLOTTED QUOTA _____

H) COLLEGE FROM WHICH HSC (10 + 2) PASSED : _____

_____ BOARD : _____

ADDRESS OF COLLEGE: _____

HSC (10+2) PASSING YEAR/ MONTH: _____ SEAT NO : _____

I) NEET UG APPLICATION FORM NO.: _____

J) NEET UG ROLL NO: _____

K) NEET UG MARKS: _____ / 720 , PERCENTILE : _____

L) ALL INDIA RANK: _____ State Rank _____

M) DATE OF COUNSELING BY MCC /MAHACET: _____

N) QUOTA ALLOTTED (All India, State): _____

O) HSC (10+2) AGGREGATE MARKS & PERCENTAGE : _____

P) PCB TOTAL MARKS &PERCENTAGE : _____

PHYSICS : _____ CHEMISTRY : _____ BIOLOGY : _____ ENGLISH : _____

PARENT'S SIGNATURE

STUDENT'S SIGNATURE

VERIFING OFFICER

FEES: To be submitted as Demand Draft Details (DD)

For M.B.B.S. Admission in the year 2025-26
Selected students are instructed to submit the DD as follows
Demand drafts to be drawn from Nationalized banks
(No errors or spelling mistakes in the DD will be accepted)

For All India Quota Candidates & OPEN Category Candidates of State Quota	1.First D.D of Rs.1,52,100/- 2.Second D.D of Rs.19,250/- Above two Demand Drafts In Favor of : DEAN, SRTR GMC AMBAJOGAI (Payable at Ambajogai)
For Reserve Category (For Maharashtra Students Only) VJ, NT,SBC, OBC (Annual Income Less than 8 Lakhs) & SC, ST	1. Rs.19,250/- as one D.D. Above one Demand Drafts In Favor of : DEAN, SRTR GMC, AMBAJOGAI (Payable at Ambajogai)
For Maharashtra Quota Students EWS & EBC Category (Two DDs) For Boys	1.First D.D of Rs.76,050/- 2.Second D.D of Rs.19,250/- Above two Demand Drafts In Favor of : DEAN, SRTR GMC AMBAJOGAI (Payable at Ambajogai)
For Maharashtra Quota Students EWS, EBC & SEBC Category Girls (Annual Income Less than 8 Lakhs)	1. Rs.19,250/- as one D.D. Above one Demand Drafts In Favor of : DEAN, SRTR GMC, AMBAJOGAI (Payable at Ambajogai)

*** Those from VJ, NT, OBC (Including SBC) & SEBC Category with income more than 8 Lakh/yr will have to pay full fees as per OPEN category**

*आर्थिक दृष्ट्या दुर्बल घटक (EBC & EWS) आणि SEBC प्रवर्गातील वार्षिक कौटुंबिक उत्पन्न प्रमाणपत्र धारक (रुपये आठ लाखाच्या आत) विद्यार्थीनींना (आर्थिकवर्ष २०२४-२५) शैक्षणिक शुल्कपुर्ण माफअसल्या कारणाने सदरील विद्यार्थीनींनी फक्त रुपये १९,२५०/-रक्कमेचा डी.डी काढावा. (शा.नि.क्र.शिष्यवृ-२०२४/प्रक्र१०५/तांशि-४ दि. ०८ जुलै २०२४)

Note:

- **Please Note cash/cheque will not be accepted.**
- The demand draft will be deposit in the accounts only after cutoff date of admission process.
- If students are allotted another college in subsequent rounds of All India / state In such situation, DD will be refunded back to the student. All such students will be required to pay an amount of **Rs.1500/- as cash** (admission cancellation fees) in the cash section of accountsdepartment.

All candidates selected for MBBS Course have to submit this certified Medical Fitness at the time of admission.

Health Science

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**:

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Mr./Ms 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 / 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.
	Seal of Registered Medical Practitioner
Date :	

All India Quota candidates who selected in Reserve Category have to submit this filled and signed format at the time of Admission

All India Quota (AIQ)

ANNEXURE - 3

PROFORMA FOR SCHEDULED CASTE AND SCHEDULED TRIBE CERTIFICATE

Form of certificate as prescribed in M.H.A., O.M., No. 42/21/49 N.G.S. dated the 28.1.1952, as revised in Dept. of Per. & A.R. letter No. 36012/6/76 Est. (S.C.T.), dated the 29.10.1977, to be produced by candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.

CASTE CERTIFICATE

This is to certify that Shri/Smt./Kum.* son/daughter* of
..... of village/town* in
..... district/Division* of the State/Union Territory*
belongs to the Caste/ Tribe which is recognized as a Scheduled
Caste/Scheduled Tribe* under:

- The Constitution (Scheduled Caste) Order, 1950
 - The Constitution (Scheduled Tribe) Order, 1950
 - The Constitution (Scheduled Caste) (Union Territories) Order, 1951
 - The Constitution (Scheduled Tribe) (Union Territories) Order, 1951
1. (as amended by the Scheduled Caste and Scheduled Tribe Lists (Modification) order, 1956, the Bombay Re- organization Act, 1960, the Punjab Re- organization Act, 1966, the State of Himachal Pradesh Act, 1970 the North Eastern Areas (Re- organization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1976).
- The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.
 - The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
 - The Constitution (Dadra and Nagar Haveli) Scheduled Caste Order, 1962.
 - The Constitution (Dadra and Nagar Haveli) Scheduled Tribes, Order, 1962.
 - The Constitution (Puducherry) Scheduled Caste Order, 1964
 - The Constitution (Uttar Pradesh) Scheduled Tribes, Order, 1967.
 - The Constitution (Goa, Daman & Diu) Scheduled Caste Order, 1968.
 - The Constitution (Goa, Daman & Diu) Scheduled Tribes, Order, 1968.
 - The Constitution (Nagaland) Scheduled Tribes Order, 1970.
 - The Constitution (Sikkim) Scheduled Caste Order, 1978.
 - The Constitution (Sikkim) Scheduled Tribes Order, 1978.
2. Applicable in the case of Scheduled Caste/Schedule Tribe persons who have migrated from one State/Union Territory Administration:

This certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe* certificate issued to Shri/Smt*
..... father/mother of
Shri/Smt/Kum* - of village/town* in District/Division* of the State/Union
Territory*
who belongs to the caste/tribe which is recognized as a Scheduled Caste/Scheduled
Tribe* in the State/Union
Territory* issued by the (name of prescribed authority) vide their No.
---- date

3. Shri*/Smt.* /Kum* and/or his/her* family ordinary reside (s) in village/town* of
the State/Union Territory
of

Signature

Place State/Union Territory

** Designation

Proforma for EWS Certificate

Government of
(Name & Address of the authority issuing the certificate)

INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No. _____

Date: _____

VALID FOR THE YEAR _____

This is to certify that Shri/Smt./Kumari _____ son/daughter/wife of _____ permanent resident of _____ Village/Street _____ Post. Office _____ District _____ in the State/Union Territory _____ Pin Code _____ whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income* of his/her 'family'*** is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year _____. His/her family does not own or possess any of the following assets*** :

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

2. Shri/Smt./Kumari _____ belongs to the _____ caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List)

Signature with seal of Office _____

Name _____

Designation _____

Recent Passport size
attested photograph of
the applicant

*Note 1: Income covered all sources i.e. salary, agriculture, business, profession, etc.

**Note 2: The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

***Note 3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

Appendix-VIII-A

CERTIFICATE OF DISABILITY

(As per Gazette Notification No. MCI-18(1)/2018-Med./187262 dated 5th Feb 2019/13th May 2019 for Admission to Medical Courses in All India Quota)

Recent Passport size Photograph of the candidate (same as given in the online Application Form) duly attested by the issuing authority

Certificate No. _____ Dated _____

Name of the Designated Centre (as per Appendix-VIII-B): _____

This is to certify that Dr. /Mr. /Ms. _____

Aged _____ Years Son/Daughter of Mr. _____

R/o _____

NEET Application No. _____ NEET Roll No. _____ Rank No. _____

_____ has the following Disability (Name of the Specified Disability) _____ in (percentage) of _____ (in words) _____ (in Figures).

* Please tick on the "Specified Disability"

[(Assessment to be done in accordance with the Gazette Notification No. S.O.76 (E) dated 4th January 2018 of the Department of Empowerment of Person with Disability (Dnyangjan), Ministry of Social Justice & Empowerment.]

S.No.	Disability Type	Type of Disability	Specified Disability
1.	Physical Disability	A. Locomotor Disability* B. Visual Impairment* C. Hearing Impairment* D. Speech & Language Disability	a. Leprosy cured person, b. Cerebral Palsy, c. Dwarfism, d. Muscular Dystrophy, e. Acid attack Victims, f. other such as Amputation, Polio myelitis a. Blindness b. Low Vision a. Deaf b. Hard of hearing a. Organic/Neurological causes
2.	Intellectual Disability		a. Specific Learning Disabilities (Perceptual disabilities, Dyslexia, Dysgraphia, Dyscalculia, Dyspraxia & Development Aphasia b. Autism Spectrum Disorders
3.	Mental Behaviour		a. Mental illness
4.	Disability caused due to	a. Chronic neurological Conditions b. Blood Disorders	I. Multiple Sclerosis II. Parkinson's disease I. Haemophilia, II. Thalassemia, III. Sickle Cell Disease
5.	Multiple Disability including Deaf-Blindness		More than one of the above specified disabilities

* Conclusion: He/She is Eligible/Not Eligible for admission in Medical/Dental courses as per the aforesaid Gazette Notification(s) subject to his being otherwise medically fit.

❖ Functional competency with the aid of Assistive devices in case of Locomotor*/Visual*/Hearing* Impairment, if any

Sign. & Name _____
(Concerned Specialist)

Sign. & Name _____
(Concerned Specialist)

Sign. & Name _____
(Concerned Specialist)

**LIST OF CENTRES FOR DISABILITY CERTIFICATES (AS PER 21
BENCHMARK DISABILITIES GIVEN UNDER RPWD ACT-2016)**

Sr.No	Name of Disability Certification Centre	City/State	Specialities Available for which Disability Certificate can be issued as per category of Disabilities mentioned in Disability Certificate
1.	Vardhman Mahavir Medical College & Safdarjang Hospital (VMMC & SJH)	New Delhi	All Disabilities as mentioned in Disability Certificate except Visual disabilities category and Intellectual Disabilities & Behavioural disabilities.
2.	All India Institute of Physical Medicine and Rehabilitation (AIIPMR)	Mumbai	For Locomotor Disability only
3.	Institute of Post Graduate Medical Education & Research (IPGMER)	Kolkata	All Disabilities as mentioned in Disability Certificate
4.	Madras Medical College (MMC)	Chennai	All Disabilities as mentioned in Disability Certificate
5.	Grant Government Medical College, J.J. Hospital Compound,	Mumbai, Maharashtra	All Disabilities as mentioned in Disability Certificate
6.	Goa Medical College	Goa	All Disabilities as mentioned in Disability Certificate except Speech Disability
7.	Government Medical College, Thiruvananthapuram	Thiruvananthapuram Kerala	All Disabilities as mentioned in Disability Certificate. Ophthalmology Tests to be conducted at Regional Institute of Ophthalmology, Thiruvananthapuram under GMC Thiruvananthapuram
8.	SMS Medical College	Jaipur, Rajasthan	All Disabilities as mentioned in Disability Certificate except: 1. Neurology- Genetic Testing 2. ENT- Speech & Language Disability Testing Orthopaedics/ PMR- Gonitometer Adult. Plumb Line, Hand Dynamometer, Laser
9.	Govt. Medical College and Hospital, Sector32	Chandigarh	All Disabilities as mentioned in Disability Certificate
10.	Govt. Medical College, Agartala, State Disability Board	Agartala/ Tripura	All Disabilities as mentioned in Disability Certificate
11.	Institute of Medical Sciences, Banaras Hindu University	Varanasi/ Uttar Pradesh	All Disabilities as mentioned in Disability Certificate except Intellectual Disability.
12.	Ali Yavar Jung National Institute of Speech and Hearing Disabilities, Bandra, Mumbai	Mumbai, Maharashtra	For Hearing Disabilities only
13.	AIIMS, Nagpur	Nagpur, Maharashtra	All Disabilities as mentioned in Disability Certificate
14.	Atal Bihari Vajpayee Institute of Medical Sciences & RML Hospital, New Delhi. (ABVIMS & RMLH)	New Delhi	All Disabilities as mentioned in Disability Certificate except ENT For Visual Disability: Candidates who use LVAs may bring their own LVAs which can be checked.
15.	Lady Hardinge Medical College & Associated Hospitals (LHMC)	New Delhi	All Disabilities as mentioned in Disability Certificate
16.	All India Institute of Speech and Hearing (AIISH)	Mysuru	For Speech & Hearing Disabilities only

State Quota Candidates

Health Science

शासन निर्णय क्रमांक राअधो ४०१९/प्र.क्र.३१/१६-अ

सामान्य प्रशासन विभाग, शासन निर्णय क्र. राअधो ४०१९/प्र.क्र.३१/१६ अ, दि. ३१.०५.२०१९
सोयतच सहायक
Annexure-A

Government of Maharashtra

Certificate No :

Photo

(valid for Year)

Eligibility certificate for Economically Weaker Section

(For the purpose of 10% reservation prescribed for Economically Weaker Section vide Government Resolution
सामान्य प्रशासन विभाग, शासन निर्णय क्र. राअधो ४०१९/प्र.क्र.३१/१६ अ dated ३१.०५.२०१९)

This is to certify that Shri/Smt/Kum ----- is son
(daughter/ward of -----He/She is resident of village/city --
-----Taluka ----- District ----- and he/she belongs to -----
caste/sub caste/ class which is not included in the cadres mentioned in the Maharashtra
State Public services (Schedule Caste, Schedule Tribes, De-notified Tribes (Vimukta Jati),
Nomadic Tribes, Special Backward category and Other Backward Classes) Act, 2001
(Maharashtra Act No 8 of 2004).

As per norms prescribed Vide Government of Maharashtra, General
Administration Department, and Government Resolution No राअधो ४०१९/प्र.क्र.३१/१६ अ,
dated ३१.०५.२०१९. His/Her gross family annual income for Year----- from all source is
Rs.----- which is less than Rs.8,00,000/-. Therefore it is certified that he/she is
within category of Economically Weaker Sections.

Place :

Signature

Date :

Name

Designation:

(This certificate has been issued on the basis of following proof evidences documents)

- 1
- 2
- 3

पृष्ठ ८ पृष्ठ ८

ANNEXURE-E**MAHARASHTRA - KARNATAKA DISPUTED BORDER AREA (MKB)
RESERVATION**

Eight seats in Government Medical Colleges, two seats in Government Dental Colleges, five seats in Government and Govt. aided Ayurvedic Colleges and One seat in Government Yog and Naturopathy College in Maharashtra is reserved for the candidates belonging to Maharashtra-Karnataka Disputed border area on the following conditions:

- The candidate must be a domicile of place situated in the areas as specified in the list given below, and produce a domicile certificate from the District Collector accordingly.
- He should have passed SSC (or equivalent) and/or HSC (or equivalent) examination from an Institution situated in the border area. The candidate must produce a certificate from the Principal/Head-Master of the College/School stating that candidate has passed SSC/HSC (or equivalent) examination from the Institution.
- Mother tongue of the candidate must be Marathi. The candidate must produce a certificate from the Principal/Head-Master of the School from which he/she has passed the SSC (or equivalent) examination, stating that the candidate's mother tongue is Marathi as per the original school record.
- To avail the benefit of MKB claim, the candidate must have appeared at NEET UG -2025 examination.
- The Competent Authority shall select the candidates claiming MKB Quota, on the basis of their Merit at NEET UG -2025 examination

Districts, Talukas and villages included under MKB are available at website of www.mahacet.org

ANNEXURE - F**HILLY AREA (HA) RESERVATION**

As per G.R. No.MED-1003/CR 641/03/Edu-2, dated 16/3/2004, 3% seats at Govt. / Municipal Corporation Medical colleges are reserved for the candidates from Hilly areas.

In accordance with G.R. issued by the Govt. of Maharashtra MED Dept. G.R. No. MED-1002/3852/CR-617/02/Edu-2, dated 17/4/2003 and resolutions issued by Govt. of Maharashtra from time to time, the candidates claiming seat under HA claim should satisfy following criteria to be eligible:

- Domicile Certificate of the parent stating that he/she is domicile in the village declared as a Hilly area specified in the Table for the respective Regions** (Rest of Maharashtra/Vidarbha /Marathwada, As per the latest list issued by concerned Department) The said certificate should be obtained from the concerned Revenue Department officer (Tehsildar and Above).
- To avail the benefit of HA claim, the candidate must have appeared at NEET UG -2025 examination.
- The Competent Authority shall select the candidates claiming HA, on the basis of their Merit at NEET UG -2025 examination.
- The constitutional reservation is provided under these HA claim seats.
- The candidate should pass SSC/HSC (or equivalent) examination from School/Junior College situated in the hilly area of his/her parents domicile or if not so, at the most, from a School/Junior College situated in the taluka of his/her parent's domicile.**

The list of Hilly areas in Maharashtra state is available at website of www.mahacet.org.

ANNEXURE - G
PROFORMA FOR
NON-CREAMY LAYER CERTIFICATE

परिशिष्ट - क

Form of Certificate to be produced by Other Backward Classes, Vimukta Jati (A), Nomadic Tribes (B, C, D) and Special Backward Category and its synonyms belonging to the State of Maharashtra along with Non Creamy Layer Status.

PART - A

Documents Verified:

- 1)
- 2)
- 3)
- 4)

This is to certify that Shri/Shrimati/Kumari son/daughter of of Village Taluka District of the State of Maharashtra belongs to the Caste/Community/Tribe which is recognised as a Other Backward Class/ Vimukta Jati(A)/Nomadic Tribe (B,C, D) / Special Backward Category under the Government Resolution No. dated as amended from time to time.

2. Shri/Shrimati/Kumari and/or his/her family ordinarily reside(s) in village Taluka..... District of the State of Maharashtra.

3. This is to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in the Government of Maharashtra Gazette, Part-IV-B, dated 29th January 2004, Maharashtra State Public Service (Reservation for S.C./S.T./D.T. (V.J.), N.T., S.B.C. & O.B.C. Act, 2001 and instruction and guidelines laid down in the Government Resolution, Social Justice, Cultural Affairs and Sports & Special Assistance Department No. CBC.1094/CR-86/BCW-V, dated 16th June 1994 and Government Resolution No. CBC.10/2001/CR-111/BCW-V, dated 29th May 2003 as amended from time to time.

4. This Certificate is valid for the period upto 31/03/2026 from the date of issue.

Sr. No.

Signature :

Place :

Designation :

(with seal of office)

Dated :

*Please delete the words which are not applicable
Please quote the name of department and specific number and date of Resolution under which the caste/community/tribe has been recognised as O.B.C., V.J., N.T., of S.B.C. by the Government of Maharashtra.*

Note:- The term "Ordinarily reside(s)" used here will have the same meaning as in Section 20 of the Representation of the Peoples Act, 1950

ANNEXURE - C

CHILDREN OF DEFENCE PERSONNEL

A specified number of seats i.e., 5% of the intake capacity, subject to a maximum of 5 seats in each Government / Municipal Corporation / Government Aided Medical, Dental / Ayurved, Unani Colleges and some allied Health Science courses are reserved for children of Defence Service Personnel and Ex-Defence personnel, including those permanently disabled or killed in action. The ratio of these seats between Ex-defence and In-service Defence personnel is as given below.

Distribution	Total seats in Defence Quota				
	5	4	3	2	1
Defence 1 (Def 1)	3	2	2	1	1
Defence 2 (Def 2)	1	1	1	1	0
Defence 3 (Def 3)	1	1	0	0	0

1) DEFENCE CATEGORIES

- (a) Def1 - For a son/daughter/spouse of an Ex-defence service personnel, domiciled in the state of Maharashtra.
- (b) Def2 - For a son/daughter/spouse of Active defence service personnel domiciled in the state of Maharashtra.
- (c) Def3 - For a son/daughter/spouse of Active defence service personnel, transferred to Maharashtra State from out-side Maharashtra, who is domicile of State other than Maharashtra.

2) For selection against Def-1 & Def-2 seats following conditions will apply;

- a) To be eligible for such a seat, a candidate must be a son/daughter/spouse of a person who has been a member of the Armed Forces of India and who has put in at least 5 years' active service and has been subject to Indian Army Act, Indian Navy Act or Indian Air Force Act; and includes an ex-serviceman who has retired from such service or was permanently disabled/killed in action. A candidate claiming a seat under Defence category will be required to produce a certificate from an Appropriate Authority, who is authorized to issue such certificate/Zilla Sainik Board in the State of Maharashtra certifying the same.
- b) However, the condition of minimum active service for five years will stand relaxed in case of Defence service person who has been permanently disabled or killed in action. The exception is admissible subject to production of a certificate from Zilla Sainik Board in the State of Maharashtra certifying permanent disability/death of such Defence Service person.
- c) To be eligible for seat in Def-1 & Def-2 category candidate should produce following certificates, i) Certificate mentioning that his / her parent who is/was defence personnel ii) Domicile certificate of the parent stating that he/she is domicile in the State of Maharashtra. The domicile certificate should be obtained from District Magistrate/Metropolitan Magistrate/ Addl. District Magistrate or Tehsildar.
- d) Candidates belonging Def-1 & Def-2 category shall be considered eligible for admission even if they have passed SSC and /or HSC examination from outside Maharashtra State.

3) For selection against Def.-3 category following conditions shall apply:-

- (a) The concerned Defence Service person who is domicile of the State other than Maharashtra and who has been transferred in public interest to Maharashtra State, prior to the last date for filling up of Preference Form.
- (b) The concerned Defence Service person ought to be working as on the last date of filling of Preference Form, at a place within the jurisdiction of the concerned regional area in Maharashtra in which the candidate is seeking a seat.
- (c) The candidate ought to have appeared and passed the qualifying examination.
- (d) The candidate is required to attach necessary and sufficient proof to fulfill above conditions and a certificate in proforma issued by appropriate authority who is authorized to issue such certificate.

Note: The specified reservation for children of defence personnel is not applicable to the civilian staff working in the Indian Army, Navy & Air Force.

PROFORMA
(For Def-1, Def-2 Candidates)
CERTIFICATE

This is to certify that Shri. / Smt.
 (Full Name of the Employee with Rank of the employee)
 is / has been a member of Defence Forces of India. He / She has put in years of
 service in Indian Army / Indian Navy / Indian Air Force from to
 and is currently working / retired from services on / permanently disabled since
 / killed in action on

This certificate is issued for the purpose of his / her son / daughter / spouse
s' admission to First Year in Health Science Courses
 for the academic year 2025-2026.

Date:

Place:

(Signature)

Name and Designation of the Authority
 (Who is authorized to issue such certificate) /
 District Sainik Welfare Officer

Seal of the Office

Note: This proforma is not valid for civilian staff working in the Indian Army, Navy & Air Force.

PROFORMA
(For Def-3 Candidates)

(For son/daughter/spouse of Active defence service personnel domiciled in other than Maharashtra State)

CERTIFICATE

This is to certify that Shri. / Smt. is a member of
 (Full Name of the Employee with Rank of the employee)
 Defence Forces of India, and is currently working in Indian Army / Indian Navy / Indian Air Force.

Shri / Smt. is transferred to
 (Place of posting)

in Maharashtra State vide transfer order No. Date

He / She has joined duty in Maharashtra on and is currently working in the same post.
 (Date of Joining)

This certificate is issued for the purpose of his / her son / daughter/spouse
 admission to First Year in Health Science Courses for the
 academic year 2025-2026.

Date:

Place:

(Signature)

Name and Designation of the Authority
 (Who is authorized to issue such certificate)

Seal of the Office

Note: This proforma is not valid for civilian staff working in the Indian Army, Navy & Air Force.

राष्ट्रीय चिकीत्सा आयोग
National Medical Commission
(Undergraduate Medical Education Board)

File No.:
NMC/UGMEB/PwBD/2025

Date: 19.07.2025

PUBLIC NOTICE

In alignment with the Hon'ble Supreme Court's judgment in *Om Rathod vs. Union of India* and related rulings, the National Medical Commission established an expert committee to reassess Appendix H-1 of the 2019 Disability

Guidelines (originally issued by the Medical Council of India on 13 May 2019). The objective is to ensure that the Appendix aligns with the Rights of Persons with Disabilities Act, 2016, and the Notification of Ministry of Social Justice and Empowerment dated 12 March 2024 concerning updated disability assessment standards.

2. After thorough consultations, the Interim Guidelines outlining the assessment method for admitting PwBD candidates to the MBBS course have been framed and are made implementable for the admissions in academic year 2025-26.

3. As per the Interim Guidelines, the following is the procedure for admission in MBBS Course in Academic Year 2025-26:

• PwBD candidates must submit:

• A **valid UDID card** issued by a designated medical authority under Ministry of Social Justice (MoSJE).

• **Self-Certified Affidavits** in the format provided under

Schedule-I.

• The candidate will have to report to the designated medical board (16 designated medical boards) for verification of their self-certified affidavit.

4. The Designated Medical Boards are responsible for

verifying candidate's self-certified affidavits and evaluating their functional abilities. Detailed assessment procedures for these boards are set forth in the Interim Guidelines.

5. In view of the above, the candidates applying under PwBD category are advised to visit Intra MCC portal for detailed instructions.

Digitally signed by
Dr. Raghav Langer
Date: 19-07-2025
14:52:11

Dr. Raghav Langer
Secretary, NMC

Enclosures:

**Interim Guidelines on assessment method
for grant of admission in MBBS Course to
PwBD Candidates for Ay 2025–26 along
with Schedule-I containing self -certified
affidavits**

दूरभाष/Phone : 25367033, 25367035, 25367036
फेक्स/Fax : 0091-11-25367024

पॉकेट -14, सेक्टर-8, द्वारका, फेस-1,
नईदिल्ली-77

Pocket- 14, Sector- 8, Dwarka,
Phase – 1, New Delhi-77

राष्ट्रीयआयुर्विज्ञानआयोग
National Medical Commission

No. NMC/UGMEB/PwBD/2025

Dated: 18.07.2025

To

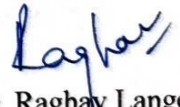
Dr. B. Srinivas,
Deputy Director General (Medical Education),
Medical Counselling Committee,
Directorate General of Health Services (DGHS),
Ministry of Health and Family Welfare,
Government of India,
New Delhi.

Reference: NMC's D.O. No. NMC/UGMEB/PwBD/2025 dated 09.07.2025.

Subject: Interim Guidelines on assessment method for granting admission in MBBS Course for PwBD Candidates for A.Y. 2025-26.

Sir,

This has reference to the previous communication of NMC vide D.O. No. NMC/UGMEB/PwBD/2025 dated 09.07.2025 regarding compliance with the directions passed by the Hon'ble Supreme Court of India vide Judgment dated 25.10.2024 in SLP (C) No. 21942 of 2024 titled as Om Rathod vs. Union of India & Ors. and connected matters. Kindly find enclosed herewith the interim guidelines as approved by the Chairman, NMC for admission to PwBD in MBBS Course for Academic Year 2025-26.


(Dr. Raghu Langer),
Secretary

Copy to:

1. Additional Secretary, (Medical Education), MoHFW, Nirman Bhawan, New Delhi-110001.
2. PPS to Chairman, NMC

INTERIM GUIDELINES ON ASSESSMENT METHOD FOR GRANTING ADMISSION IN MBBS COURSE TO PwBD CANDIDATES FOR AY 2025-26

PREAMBLE:

In pursuit of equitable and inclusive medical education, the National Medical Commission (NMC) remains steadfast in its commitment to ensuring fair access to medical courses for all eligible candidates, including Persons with Disabilities (PwD). In alignment with the provisions of the Rights of Persons with Disabilities Act, 2016, and the Graduate Medical Education Regulations, this interim report outlines the foundational framework and preparatory measures for facilitating the admission of PwBD candidates in MBBS Course.

This report serves as a step towards strengthening existing mechanisms, identifying challenges, and proposing recommendations for creating an enabling environment that upholds the principles of dignity, non-discrimination, and equal opportunity. It focuses on key aspects such as assessment of disability, eligibility criteria, reasonable accommodations, accessibility standards, and institutional readiness.

The NMC acknowledges the valuable contribution of a diverse medical workforce and envisions a system where every aspiring student, irrespective of physical or cognitive ability, is empowered to pursue a career in medicine and serve society with competence and compassion.

1. Introduction

In alignment with the **Rights of Persons with Disabilities (RPwD) Act, 2016**, and subsequent notifications, particularly the directive issued by the **Ministry of Social Justice and Empowerment (MoSJE)** on **12.03.2024**, which underscores the principles of inclusive education and reasonable accommodation, and the landmark judgment of the **Hon'ble Supreme Court dated 25.10.2024** in *Om Rathod vs Union of India & Others* (SLP (C) No. 21942 of 2024), a significant shift has been initiated in the national approach toward disability inclusion in higher education.

2. Functional Competency Approach

These legal and policy developments collectively emphasize the prioritization of **functional competency** over rigid **percentage-based disability thresholds**. In response, the **National Medical Commission (NMC)** has undertaken proactive measures to ease challenges faced by PwBD candidates, ensuring a fair and inclusive medical education environment. This includes facilitating reasonable accommodations, revisiting eligibility norms, and adopting evaluation criteria focused on individual capabilities.

L

3. Deliberations and Guideline Development

Extensive deliberations were held in various meetings of the NMC, engaging a committee of medical experts. A consensus emerged to develop a **comprehensive guideline** focused on functional ability and reasonable accommodation to enable the fair inclusion of PwBD candidates in the **MBBS program**, without subjecting them to undue hardship or exclusion.

This initiative is aimed at reinforcing existing systems, identifying practical challenges, and formulating evidence-based recommendations to build an enabling environment grounded in the principles of dignity, non-discrimination, and equal opportunity. It will focus on critical areas including disability assessment, eligibility criteria, and provision of reasonable accommodations, accessibility standards, and institutional preparedness

4. Interim Admission Approach for AY 2025-26

Defining essential competencies for each type of disability involves a very complex process which is multi-dimensional & dynamic. Assistive devices & medical technologies are also rapidly advancing & evolving. Striking a balance between inclusion and the imperatives of patient safety and clinical competence in medical education and practice is of paramount importance.

Pertinent to mention that Post Graduate medical courses shall require specialty specific deliberations, as the required competencies and skills may vary over a wider range and therefore additional consultations with medical experts/ beneficiaries/ stakeholders are needed.

In view of aforesaid facts, final guidelines after following all procedural aspects and further consultations, shall be notified & implemented from subsequent Academic Years. However, the admission process for **PwBD** candidates for **AY 2025-26** must continue uninterrupted. Accordingly, **the group of medical experts under the committee duly constituted by NMC** (under the chairmanship of **Dr. Achal Gulati**), have unanimously reached to a conclusion to adopt **interim guidelines** for admissions in AY 2025-26.

5. Functional Assessment of Disabilities

The previously mandated arithmetic **threshold** shall be no longer applicable. Instead, emphasis will be placed on assessing a candidate's **functional ability** to meet the academic and clinical demands of the MBBS course.

2

6. Mandatory Use of UDID Portal

As per **Gazette Notification S.O. 1736(E) dated 05.05.2021**, issued by the **Department of Empowerment of Persons with Disabilities (DEPwD)**, all disability certificates and UDID cards must be issued via the **UDID online portal**, effective **June 1, 2021**.

Accordingly, the UDID card has been established as a mandatory document for persons with disabilities. In this context, it may be regarded as an essential and authoritative proof for evaluating the eligibility of meritorious NEET UG candidates under the disability category..

7. Evaluation Framework Based on MoSJE Guidelines

Further in view of the paramount importance of patient safety and clinical competence, the assessment of candidates with disabilities may be conducted in accordance with the recently notified guidelines dated 12.03.2024 issued by the Ministry of Social Justice and Empowerment (MoSJE). These guidelines provide a structured and uniform framework to ensure that the evaluation of disability is both comprehensive and consistent with the responsibilities inherent to medical practice.

8. Institutional Responsibilities under the RPwD Act

The medical colleges as per the recommendations prescribed under RPwD Act, 2016, shall make maximum efforts in accommodating and facilitating the candidates with disabilities:

- ***Non-Discrimination in Admission and Education (Section 16):***

Institutions must ensure that no student with a disability is denied admission on the grounds of disability and must provide an inclusive education system at all levels.

- ***Infrastructure Accessibility (Section 45):***

Institutions must ensure barrier-free access to buildings, classrooms, libraries, laboratories, hostels, and other facilities as per the standards notified by the Government of India.

- ***Sensitization and Capacity Building:***

Colleges are encouraged to conduct awareness and sensitization programs for faculty, staff, and students to promote an inclusive environment and reduce attitudinal barriers.

- ***Nodal Officer for Disability Affairs:***

Institutions are advised to appoint a dedicated Nodal Officer or establish a Disability Cell to address the concerns and support needs of students with disabilities.

L

- **Grievance Redressal Mechanism:**

An accessible and responsive grievance redressal system must be in place to address complaints related to discrimination or lack of accommodation.

9. Decision Taken

The expert panel **unanimously agreed** on the following for MBBS admissions under the PwBD category for **AY 2025-26**:

- PwBD candidates must submit:
 - A **valid UDID card** issued by a designated medical authority under MoSJE.
 - **Self-Certified affidavits** in the format provided under **Schedule -I**.
 - **The candidate will have to approach the designated medical board for verification of their self-certified affidavit.**
- Designated Medical Boards (16 designated medical boards) are required to undertake following duties:
 - The competencies mentioned in the appendix under Schedule-I are basic & mandatory. The candidates, to the satisfaction of the designated medical board, may demonstrate the competencies that have been declared by him/her. If the board finds the declared competencies unsubstantiated based on the candidate's performance, it must issue a reasoned decision declaring him/her ineligible to pursue medical course.
 - If the candidate while self-declaring the essential competencies mentions one or more competencies in negative or is not able to demonstrate one or more of the listed essential competencies, the board shall see if he/she is able to compensate such deficits, by other alternative functionalities; and may take a holistic view regarding his capability to pursue MBBS course.
 - The designated medical boards may utilize standardized tests and tools to evaluate the abilities of the candidates, as per their declaration, instead of focusing on the disabilities.
 - All decisions of the designated medical board(s) shall be in the form speaking orders.

Admissions will be processed by the **counseling authority**, based on **NEET 2025 scores**, institutional preferences, and verification of required documents by the concerned designated medical board(s). Medical colleges will provide accommodations accordingly.

Agarwal
18/07/25

SCHEDULE-I

APPENDIX-A	SELF CERTIFICATION FORM-GENERAL
APPENDIX-B	AFFIDAVIT FOR DECLARING THE HEARING IMPAIRMENT
APPENDIX –C	AFFIDAVIT FOR DECLARING THE LOCOMOTOR DISABILITY (UPPER LIMB EXTREMITY)
APPENDIX-D	AFFIDAVIT FOR DECLARING THE LOCOMOT OR DIABILITY (LOWER LIMB EXTREMITY)
APPENDIX-E	AFFIDAVIT FOR DECLARATION BY APERSON WITH MENTALILLNESS/ SLD/ ASD
APPENDIX-F	AFFIDAVIT FOR DECLARATION BY APERSON WITH VISUAL DISABILITY

APPENDIX-A

Self-Certification Affidavit

(To be filled by all applicants applying under PWBD Category)

Name of Candidate: _____

_____ NE

ET Roll No.:

_____ NE

ET Score: _____

UDID No.: _____

Disability Type:

- ☐ Locomotor
- ☐ Hearing
- ☐ Visual
- ☐ Cognitive/SLD/
- ☐ *Others : _____ (Please specify)

Disability Percentage as per [UDID card]: _____ %

Assistive Devices Used (If any)

Essential functional Area

Competency Area	Description	Candidate Declaration (✓/✗)
Essential Functional Competencies:		
A.Communication	<ul style="list-style-type: none">I can communicate clearly and empathetically with people using assistive devices.	
B.Hearing	<ul style="list-style-type: none">I can hear and respond to speech in both quiet and noisy environments, with or without hearing aids or cochlear implants.I undertake to fulfill the eligibility criteria Set under Form Appendix-B	
C.Dominant Hand Functionality	<ul style="list-style-type: none">I can write and hold instruments using My dominant or aided hand.	

	<ul style="list-style-type: none"> I undertake to fulfill the eligibility criteria Set under Appendix-CandD 	
D.Understanding/Communication	<ul style="list-style-type: none"> I can follow and comprehend medical terminology and maintain social interaction. I undertake to fulfill the eligibility set under Form Appendix -E 	
E.Vision	<ul style="list-style-type: none"> My vision improves to the percentage lower than 40% I can perform with the help of Low vision Aid I undertake to fulfill the eligibility criteria Set under Form Appendix-F 	

2. I hereby affirm that I possess the essential competencies and am capable of successfully undertaking the MBBS course.
3. I am aware that any false declaration may result in revocation of my admission.

Deponent Signature: _____

Date:

Place:

Notarized by:

***Note: Persons with benchmark disabilities other than Locomotor/Visual/ Hearing/SLD/ASD/Mental Illness will have to submit the self-certified affidavit at Appendix-A only (eg.: Blood disorders- Haemophilia, Thalassemia and Sickle cell disease Chronic Neurological Conditions etc.)**

APPENDIX-B

AFFIDAVIT

(HEARING IMPAIRMENT)

I, _____, aged _____ years, son/daughter of _____, resident of _____, holding a valid UDID Card No. _____ issued by _____ on _____, do here by solemnly

affirm and declare as follows: I have hearing loss in:

☐ Right Ear

☐ Left Ear

☐ Both Ears

☐ Neither

2. I use:

☐ Prescribed Hearing Aid

☐ Cochlear Implant

☐ None

3. I declare as under:

Sl. No.	Functional Ability regarding following Activities declared	Candidate Declaration (✓/✗)
1.	Communicate effectively using the above-mentioned assistive devices.	
2.	Engage in a conversation in a quiet and noisy environment.	
3.	Understand and respond to verbal instructions.	
4.	Carry out phone conversations.	

4. I hereby affirm that I possess the essential competencies and am capable of successfully undertaking the MBBS course.

5. I am aware that any false declaration may result in revocation of my admission.

Deponent Signature: _____

Date: _____

Place: _____

Notarized by: _____

APPENDIX-C

AFFIDAVIT

(LOCOMOTOR DISABILITY)
{UPPER EXTREMITY-COORDINATED ACTIVITY}

I, _____, aged _____ years, son/daughter of _____, resident of _____, holding a valid UDID Card No. _____ issued by _____ on _____, do hereby solemnly affirm and declare as follows:

2. I declare that I am suffering from _____ Disability.
3. The condition causing this disability is diagnosed as _____.
4. I am using/not using any assistive device/artificially be it.
5. I declare my functional ability in performing the basic Coordinated Activities as below:

Sl.No.	Functional Ability regarding following Activities declared	Candidate Declaration (✓/X)
1.	Can you lift over head objects and place them in the same place?	
2.	Can you touch the tip of the nose with the tip of a finger?	
3.	Can you eat by yourself?	
4.	Can you groom, comb and plate by yourself?	
5.	Can you put on a shirt/kurta/upper garment on your own?	
6.	Can you clean yourself after toilet (Act of Ablution)?	
7.	Can you drink water holding a glass/tumbler?	
8.	Can you button/unbutton your clothes?	
9.	Can you put on trousers/pant/lower garment/Tie/Nara, Dhoti, using the Zip as the case may be?	
10.	Can you hold a pen/pencil and write?	

6. I hereby affirm that I possess the essential competencies and am capable of successfully undertaking the MBBS course.

7. I am aware that any false declaration may result in revocation of my admission.

Deponent Signature: _____

Date: _____

Place: _____

Notarized by: _____

APPENDIX-D

AFFIDAVIT

(LOCOMOTOR DISABILITY)
{LOWER EXTREMITY-STABILITY COMPONENTS}

I, _____, aged _____ years, son/daughter of _____, resident of _____, holding a valid UDID Card No. _____ issued by _____ on _____, do here by solemnly affirm and declare as follows:

2. I declare that I am suffering from _____ Disability.
3. The condition causing this disability is diagnosed as.....
4. I am using/not using any assistive device/artificial limb etc.
5. I declare my ability to perform the following functions as below:

Sl.No.	Functional Ability regarding following Activities declared	Candidate Declaration (✓/✗)
1.	Can you bear weight and stand on both legs?	
2.	Can you bear weight and stand on your affected leg?	
3.	Can you walk on plain surfaces?	
4.	Can you sit on a chair by your self?	
5.	Can you climb up stairs on your own?	
6.	Can you go down stairs on your own?	
7.	Can you take turn to the right and left side?	

6. I here by affirm that I possess the essential competencies and am capable of successfully undertaking the MBBS course.
7. I am aware that any false declaration may result in revocation of my admission.

Deponent Signature: _____

Date: _____

Place: _____

Notarized by:

APPENDIX-E

AFFIDAVIT

(MENTAL ILLNESS/SPEECH DISORDERS/SPECIFIC LEARNING
DISORDER/AUTISM SPECTRUM DISORDER)

I, _____, aged _____ years, son/daughter of _____, resident of _____, holding a valid UDID Card No. _____ issued by _____ on _____, do hereby solemnly affirm and declare as follows:

2. I declare that I am suffering from _____ Disability.
3. The condition causing this disability is diagnosed as.....
4. I am using/not using any assistive device/artificial limb etc.
5. I declare my ability to perform the following functions as below:

SL. NO.	Description	Candidate Declaration(✓/✗)
1.	I can communicate clearly and empathetically with people	
2.	I can listen and respond to speech in both quiet and noisy environments.	
3.	I can follow instructions, comprehend required medical terminology, and maintain social interaction	
4.	I can understand and respond to verbal instructions and can carry out phone conversations.	

6. I hereby affirm that I possess the essential competencies and am capable of successfully undertaking the MBBS course.
7. I am aware that any false declaration may result in revocation of my admission.

Deponent Signature: _____

Date: _____

Place: _____

Notarized by:

APPENDIX-F

AFFIDAVIT

(VISUAL IMPAIRMENT)

I, _____ aged, _____ years, son/daughter of _____, resident of _____, holding a valid UDID Card No. _____ issued by _____ on _____, do hereby solemnly affirm and declare as follows:

1. I have Visual Impairment in:

- ☐ Left Eye
- ☐ Right Eye
- ☐ Both Eye
- ☐ Neither

2. I am using Low Vision Aid(s) _____.

3. With the use of Low Vision Aid, I declare the fulfillment of following criteria:

SL. NO.	ALL MANDATORY CRITERIAS FULFILLED WITH THE LOW VISION AID	Candidate Declaration (✓/X)
1.	Best corrected visual acuity improves such that the visual disability Becomes less than 40%	
2.	The field of vision is >40 degree in the eye which is using the LVA	
3.	The LVA is hands free and suitable for everyday use	

4. I hereby affirm that I can perform with the use of Low Vision Aid.

5. I am aware that any false declaration may result in revocation of my admission.

Deponent Signature: _____

Date:

Place:

Notarized by: