



अखिल भारतीय आयुर्विज्ञान संस्थान (एम्स), गुवाहाटी
All India Institute of Medical Sciences, Guwahati
स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार के तत्वावधान में एक वैधानिक निकाय
(A statutory body under the aegis of Ministry of Health and Family
Welfare, Govt of India)
Changsari, Assam PIN - 781101

MD/ MS Admission Checklist

The following documents is in respect of Dr. _____ Candidate ID: _____,

Roll Number : _____, INI CET Rank : _____ Category: _____,

submitted on: _____ at AIIMS, GUWAHATI.

Sr.No	Certificate /Demand Draft (V)		Submitted in Original/ Photocopy	Remarks (Mention the serial no of certificate)
1	Offer letter			
2	Allocation Letter			
3	Registration Slip			
4	Admit card issued by AIIMS			
5	Marks Sheets of MBBS/ BDS 1st, 2nd and 3rd Professional Part I & II Examinations			
6	Internship Completion Certificate/ Certificate from the Head of the Institution that the candidate will be completing the internship as per INICET guidelines.			
7	Caste Certificate	OBC NCL /EWS certificate in Central Government format valid as per INICET regulations		
		SC/ ST certificate in English/ Hindi clearly mentioning the Community		
8	Permanent/ Provisional Registration Certificate from MCI/State Medical			
9	Birth Certificate/ 10th / 12th Certificate			
10	Physical Disability Certificate from authorized medical board			

Demand draft details

11	Bank Name	DD No.	Date of Issue	Valid up to

Candidate Name /Signature

AIIMS Authority Name / Signature



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AFFIDAVIT BY THE STUDENT

(On Rs 100/- NON JUDICIAL STAMP PAPER)

I, _____

S/o, D/o of Mr./ Mrs,

Resident of,

Do hereby solemnly affirm and declare as under:

1. That I am a citizen of India.
2. That I have completed 17 years of age on _____/ will be completing 17 years of age on _____.
3. That I am joining as a student of _____ course at All India Institute of Medical Sciences (AIIMS) GUWAHATI.
4. That I have gone through the contents and fully understood the AIIMS, Regulation/Directives for Ragging and Anti-Ragging Measures in AIIMS GUWAHATI Office Order on curbing the menace of Ragging to be followed by all the students of AIIMS.
5. I hereby solemnly affirm that:
 - I will not indulge or involve myself in any untoward behaviour or act that may come under the definition of ragging.
 - I will not participate in or abet or propagate ragging in any form.
 - I will not hurt anyone physically or psychologically or cause any other harm to any other student.
6. I have fully understood that if found indulging or guilty of any aspect of ragging within or outside AIIMS campus, I may be punished as per the provisions of the AIIMS Regulations/Directive mentioned above and / or as per the law in force and for which, I will be solely responsible and shall not claim any compensation.

Deponent Signature of Student

VERIFICATION: verified at _____ on this _____ day of _____ 20 . .

That the above affidavit is true and correct.

Name:

Address & Contact No:

Deponent Signature of Parent



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AFFIDAVIT BY THE PARENT/GUARDIAN

(On Rs 100/- non judicial stamp paper)

I, _____ (full name of parent/ guardian) Father/Mother/Guardian of (Student Name) _____ Regd. No. _____ having been admitted to _____ have received a copy of the UGC Regulations on curbing the menace of ragging in higher educational institutions, 2009 (here after called the Regulations) carefully read and fully understood the provisions contained in the said Regulations.

I have in particular perused clause 3 of the regulations and I am aware as to what constitutes ragging.

I have also in particular perused clause 7 and clause 9.1 of the regulations and I am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/ she is found guilty of / or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

I hereby solemnly affirm and undertake that:

My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the regulations.

My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the regulations.

I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.

I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of abetting or being part of a conspiracy to promote ragging and further affirm that in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this the _____ (day) of _____ month of _____ year.

Signature of Deponent

Name:

Address:

Telephone/ Mobile No.:

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at (Place) _____ on this the _____ (day) of _____ (month) _____ 20____.

Signature of Deponent

Solemnly affirmed and signed in my presence on this the _____ (day) of _____ (month) _____ 20____.

OATH COMMISSIONER



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DECLARATION BY THE OBC (NCL) CANDIDATE

I _____ Son/ Daughter of _____ Village/ Town/ City

_____ District _____ State _____ hereby declare that I belong to

the community which is recognized as a backward class by the Government of India for the purpose of reservation in service as per orders contained in the Department of Personnel and Training office memorandum number 36012/2293.Estt.(SCT) dated 08.09.1993.

It is also declared that I do not belong to persona/ section (creamy layer) mentioned in column 3 of the schedule to the above referred office memorandum dated 08.09.1993.

Name: _____

Signature of the Candidate: _____

Address: _____



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UNDERTAKING BY THE STUDENT

I, _____ S/o,
D/oof Mr./ Mrs. _____ have
passed MBBS Entrance Examination held on _____ 20 .-

I certify that all my **Original Certificates** (i.e. MBBS pass certificate & marksheets, 10th Pass Certificate/Age proof, 12th Pass Certificate, 12th Marks Sheet and Scheduled Caste/Scheduled Tribe (SC/ST)/Other Backward Class (OBC) Certificate are authentic. If any found false, then my candidature may be treated withdrawn/cancelled at any time during the course.

Name: _____

Signature of the candidate: _____

Address: _____



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[Anti-Ragging policy](#)

As per direction of the Hon'ble Supreme Court of India, the Government has banned ragging completely in any form inside and outside of the campus and the Institute authorities are determined not to allow any form of the ragging. Therefore, at the time of admission, every student shall be required to sign a declaration that on admission he/she submits himself/herself to the disciplinary jurisdiction of the Director and several authorities of the AIIMS who may be vested with the authority to exercise discipline under the Acts, the Statutes, the Rules and the rules that have been framed there under by competent authorities of AIIMS.

[Prohibition of and Punishment for Ragging:](#)

1. Ragging in any form is strictly prohibited, within the premises of College/Department of Institution and any part of AIIMS and also outside the AIIMS Campus.
2. Any individual or collective act or practice or ragging constitute gross indiscipline shall be dealt with under this Rules.
3. Ragging for the purposes of this rules, ordinarily means any act, conduct or practice by which dominant power or status of senior students is brought to bear on students freshly enrolled or students who are, in any way, considered junior or inferior by other students and includes individual or collective acts or practice which:
 - a. Involve physical assault or threat or use of physical force
 - b. Violate the status, dignity and honor of women students
 - c. Violate the status, dignity and honor of students belonging to the Scheduled Castes, Scheduled Tribes and Other Backward Castes
 - d. Expose students to ridicule and contempt and affect their self-esteem
 - e. Entail verbal abuse and aggression, indecent gesture and obscene behavior
4. The Director, Dean, Hostel Superintendent and Faculty of AIIMS shall take immediate action on any information of the occurrence of ragging.
5. Notwithstanding anything in Clause (4) above, the Dean or any other Faculty member/or authority may also suo moto enquire into any incident of ragging and make a report to the Director of the identity of those who have engaged and the nature of the incident.
6. The Dean may also submit an initial report establishing the identity of the perpetrators of ragging and the nature of the ragging incident.
7. On the receipt of a report under clause (5) or (6) or a determination by the relevant authority disclosing the occurrence or ragging incidents described in the Clause 3(a), (b) and (c) the Director shall direct or order rustication of a student or students for a specific number of semesters.
8. The Director may in other cases of ragging order or direct that any student or students be expelled or be not, for a stated period, admitted to a course of study as AIIMS, departmental examination for one or more semesters or that the result of the student or students concerned in the examination(s) in which they appeared be cancelled.
9. For the purpose of this Rules, abetment to ragging will also amount to ragging.
10. In case of any discrepancy between these rules and Government of India Policy, the GOI policy will prevail.

By Authority Director/Dean AIIMS, GUWAHATI



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OATH

I, do swear/solemnly affirm
that I will be faithful and bear true allegiance to India and to the Constitution of India as by law
established, that I will uphold the sovereignty and integrity of India, and that I will carry out the
duties of my office loyally, honestly, and with impartiality.”

(So help me God!)

Date :

Name

Department

Designation

Signature

शपथ-पत्र

मैं शपथ लेता / लेती हूँ। सत्यनिष्ठा
से प्रतिज्ञा करता / करती हूँ की भारत और विधि द्वारा स्थापित भारत के संविधान के प्रति श्रद्धा और सच्ची निष्ठा रखूंगा
/ रखूंगी। मैं भारत की प्रभुता और अखंडता अश्रुण रखूंगा / रखूंगी तथा मैं अपने कर्तव्यों का राजभक्ति, ईमानदारी
और निष्पक्षता से पालन करूंगा / करूंगी ।

(अतः ईश्वर मेरी सहायता करे)

दिनांक:

नाम

विभाग

पद



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CHARACTER CERTIFICATE

Certified that I have known Mr./Ms./.....Son/daughter of Shri.....

for the last.....yearsmonths (Minimum 5 years). He/She bears a good moral character and is of.....nationality. He/She is not related to me.

Place:

Signature

Date:

Name:

Designation with Address with stamp

This certificate should be from any one of the following:

1. Gazetted Officer of Central or State Government;
2. Members of Parliament or State Legislature belonging to the constituency where the candidate or his parent/ guardian is ordinarily resident;
3. Sub-Divisional Magistrates/ Officers;
4. Tehsildars or Naib/ Deputy Tehsildars authorized to exercise magisterial powers;
5. Principal/Head Master of the recognized School/ College/ Institution where the candidate studied last;
6. Block Development Officer;
7. Post Masters; 8. P
8. Panchayat Inspectors



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Marital Declaration

I, Shri/Smt/Kum/Dr _____ as under

- (a) That I am unmarried/a widower/a widow.
- (b) That I am married and during the lifetime of my spouse, I have contracted another marriage. The application for a grant of exemption is enclosed.
- (c) That I am married and have more than one husband/wife living. The application for a grant of exemption is enclosed.
- (d) That I am married and my husband/wife has no other living wife/husband, to the best of my knowledge.
- (e) That I have contracted a marriage with a person who has already one wife or more living. The application for a grant of exemption is enclosed.

I solemnly affirm that the above declaration is true and understand that in the event of declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Date: -

Signature

NOTE: -

- ✓ Please delete clauses not applicable. Applicable in the case of clause (a), (b) and (c) only.
- ✓ Please submit marriage certificate in case of married.



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MANDATE FORM

NAME						
FATHER /HUSBAND NAME						
DATE OF BIRTH	___/___/___	GENDER	M / F			
CATEGORY	UR/ OBC/ SC/ST	RELIGION		PHYSICALLY CHALLENGED	YES / NO	
DATE OF JOINING	___/___/___	DESIGNATION		DEPARTMENT NAME		
CONTACT DETAILS						
ADDRESS						
CITY		STATE		PIN CODE		
CONTACT NO.		MAIL ID				
BANK DETAILS						
BRANCH & BANK NAME						
A/C NO.		IFSC CODE				
PAN NO.						
AADHAR NO.						
NPS (PRAN) NO. (IF HAVE)						
HAVE YOU BEEN PREVIOUSLY EMPLOYED WITH AIIMS Guwahati					YES / NO	
IF YES	DESIGNATION		DATE OF JOINING		DATE OF RELIVING	

SIGNATURE



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Date:

Declaration on Dependent Family Members

(1) Personal Details:

1	Name	
2.	Designation	
3.	Date of Birth	
4	Date of appointment	

(2) Details of the Dependent Family Members:

Sl.	Name(s) of the member(s) of the family*	Date of birth	Age as on date	Relationship	Marital Status	Place mention the category: (a)Employed (b)Pensioner (c) Family Pensioner (d)Others	Personal Annual Income of the dependent

(*) (i) I hereby undertake to keep the above particulars up-to-date by notifying to the Head of Office of any addition or alteration.

(ii) Family for this purpose means family as defined in Clause (b) of sub-rule (14) of Rule 54 of the CCS (Pension) Rules, 1972.[http://persmin.gov.in/pension/rules/pencomp7.htm#Family_Pension,_19_64]

(iii) Wife and husband shall include respectively judicially separated wife and husband.

(iv) A self-certified proof of Date of Birth is enclosed in respect of dependent Brothers/Sisters, if any.

Signature of the Employee



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Date:

JOINING REPORT

Paste Recent
Passport
Size
Photograph

To,
The HOD,
Department of
AIIMS Guwahati.

Sub: Joining as postgraduate student

Ref: Admission to postgraduate courseat AIIMS Guwahati for Session

Sir,

Please refer to the Admission

Slip.....No.....dated..... regarding my admission to
..... course in the subject of
at AIIMS Guwahati under category.

I agree to pursue the above
course as a regular full-time PG student for the duration of the academic course.

I have joined the above course on (date) in the department
of.....at AIIMS Guwahati (FN/AN).

Yours faithfully,

Date:

(Signature)

Name of the Student	
Offer letter No	
Roll No	
Rank	
Category	
Counselling Round	
Address	
Email ID	
Mobile No	

For Office Use

Certified that has joined/ reported to the department of
..... at AIIMS Guwahati as a whole-time regular PG student on
(date)FN/AN.

Head of the Department
(Academics)
Stamp/Seal

Dean