

INDIRA GANDHI GOVT. DENTAL COLLEGE, JAMMU.

Address:- Rehari Chungi, Jammu, Jammu & Kashmir, 180005 Email ID: <u>principaliggdc-jk@nic.in</u> <u>iggdcjprincipal@yahoo.com</u> Ph. No: <u>0191-2565630</u>, <u>2564962</u> Fax No: <u>0191-2565588</u>

Documents to be produced at the college at the time of admission

List of documents for MDS Admission- 2024-25

- Candidates who have been allotted seat for admission to MDS course in Indira Gandhi Govt. Dental College & Hospital, Jammu through the online counseling conducted by MCC shall report to the Academic Section, Indira Gandhi Govt. Dental College, Jammu within the stipulated time as mentioned on the allotment letter generated on MCC website. Candidate who fails to report within the stipulated time shall not be considered for further counselling procedure.
- At the time of reporting to the College the candidate must produce Allotment letter issued by MCC along with the following documents (mentioned in Table A here under) as applicable to his/her category in **Original and Three sets of photocopies** for the process of verification and ascertainment of the eligibility. **If the candidate fails to produce any of the following document his/her admission shall stand cancelled.**
- Candidates who have deposited their original documents with any other Institute / College / University and come for admission with a certificate stating that "their original certificates are deposited with the Institute /College / University" shall not be allowed to take admission in allotted Dental College.
- > If there is any discrepancy in spelling in documents candidate must carry proof that the documents belong to same person in form of an affidavit/undertaking.
- ➤ All original documents of the candidate will be retained by the university till the counselling process is over. These may be released before the completion of counseling process only if the candidate is upgraded during further rounds of counseling or the candidate resigns from the admitted seat.

S no.	Document to be submitted
1.	MCC/JKBOPEE seat allotment Order- Original
2.	Admit Card NEET MDS 2022 issued by NBE and NEET Score Card
3.	Date of Birth Proof certificate (Birth Certificate or X Marks Card) - Original
4.	All Marks cards of university examination passed (I-IV BDS Course) - Original
5.	Completion of rotating internship from a recognized College- Original
6.	BDS Pass/Degree certificate issued by the University- Original
7.	Renewal/Registration certificate by any State Dental Council/DCI- Original
8.	Attempt certificate issued by the University/College Principal Original
9.	Transfer Certificate - Original
10.	Migration Certificate (Non-Jammu University students only) - Original
11.	 a) The Candidate should also bring the following certificates, if applicable: b) SC/ST Certificate issued by the competent authority (in the format as specified by Medical Counseling committee) and should be in English or Hindi language. Sub-caste should be clearly mentioned in the certificate. c) OBC certificate issued by the competent authority. The sub-caste should tally with the Central List of OBC. The OBC candidates should not belong to Creamy Layer. The OBC certificate must be in the format as specified by Medical Counseling committee. d) Disability Certificate issued from a duly constituted and authorized Medical Board for 21 Benchmark Disabilities as per the Rights of Persons with Disability Act, 2016. No other PwD certificate, issued by any other authorities/ Hospital will be entertained. The format of Certificate of Disability shall be as specified by Medical Counseling committee.

Service Certificate in case of In-Service candidate - Copy

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13.	Pan Card - Copy of Self / Parent / Guardian
14.	Affidavit - Anti Ragging bond by student & parent as per DCI Norms.www.antiragging.in or www.amanmovement.org
	WWW.directions
15.	Aadhar Card of the candidate - Copy
16.	Affidavit as enclosed (attested by the Judicial 1 st Class Magistrate)
17.	Medical Fitness Certificate :- As Per Annexure I
18.	Character Certificate
19.	Latest pass port size photographs (05 copy) & Stamp Size (05 copy)
20.	Filled Indira Gandhi Govt. Dental College & Hospital, Jammu MDS Admission Form
21.	For UT of J&K Candidates Domicile Certificate- Original
	Fees ₹. 25,000/- (INR Twenty Five Thousand only) in the shape of
22.	Demand Draft in favour of Principal, Indira Gandhi Govt. Dental College Jammu. (Only J&K Bank)
	Certificate regarding the recognition of Previous Dental College By th
23.	Dental Council of India - Original

Note: As per the Hostel rules Mess is compulsory for the all the Hosteliers and Mess charges shall be paid in advance @ Rs. 3840/- Per Month in advance before the alocation of hostel. Hostel Security fee @ Rs. 3000/- one time only.

Theee Sets of above documents shall be submitted by the student.





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Address:- Rehari Chungi, Jammu, Jammu & Kashmir, 180005

Email ID: principaliggdc-jk@nic.in iggdcjprincipal@yahoo.com
Ph. No: 0191-2565630, 2564962 Fax No: 0191-2565588

		(TO BE FILLE	MISSION FORM D IN BLOCK LETTERS)		Insert Passport size Picture Here	
ade	mic year :20 - 20	Subject	of			
lo.	Particulars					
	Candidate details					
	Name :		Age: Ger		ender:	
	Date of Birth:		Nationality:			
	State Belonging to:		Mother Tongue:		Blood Group:	
	Aadhaar No:		PAN No:		· ·	
1	Contact Details E-mail Id: State Dental Council Registration No:		Mobile No:		WhatsApp No:	
	State Dental Coun			State	:	
	State Dental Coun	cil Registration No:				
	State Dental Counc				ent Address	
		cil Registration No:				
		cil Registration No: Local Address				
	Address Admission Details	cil Registration No: Local Address				
	Address Admission Details	cil Registration No: Local Address	Details of NEET			
	Address Admission Details	cil Registration No: Local Address	Details of NEET Rank:			
	Address Admission Details Whether In Service	cil Registration No: Local Address	Rank:	Permane	ent Address	



	Details of the reservation quota	Religion:	Caste	: Sub Caste:
	under which candidate is			
	admitted (If Applicable)			
	Parents details			
		Fath	er	Mother
	Name			
111	. Mobile No			
	WhatsApp No.			
	Email Id			
	Aadhar No.			
7-1	PAN NO(in case candidates PAN No is not given	n)		
	Details of Local Guardian (if any)			
	Name:	Mobile No/WhatsApp	No:	Address:
IV				
		Declaration	1	-
1				mu knowledge Lunderstand
that m	hereby declare that the above admission is provisional, pending fin	al approval from the un	liversity. I will abi	de by the rules and regulations
of the I	nstitution and will not directly or indi	rectly indulge in any act	tivity that Jeopard	lizes the sanctity of the college
includii	ng Ragging.			
	Signature of the Candidate	S	ignature of the P	arent/Guardian

Dr. Iqbal Singh,
Member, Admission Committee
Associate Prof.
Deptt. Of Public Health Dentistry,
Indira Gandhi Govt. Dental College, Jammu

Dr. Shallan Kaul, Member, Admission Committee Associate Professor, PG Deptt. Of Pedodontics, Indira Gandhi Govt. Dental College, Jammu

Dr. Manik Sharma, Chairman, Admission Committee, Prof. HOD, PG Deptt. Of Periodontology, Indira Gandhi Govt. Dental College, Jammu

> Principal & Dean Indira Gandhi Govt. Dental College, Jammu.

AFFIDAVIT

-	UT of J	&K Rank do hereby solemnly affirm and declare as under: -
	L	That I have been selected by JKBOPEE/MCC vide Notification No. and regulations governing the selection of candidates for such admission, I am conscious that I will be responsible of the consequences, if any of the information submitted by me at any stage proves to be false, concealed or incorrect, including cancellation of my admission and the action as may be taken the BOPEE in accordance with the rule 12 of ARO 158 read with SRO 168 of 2014.
	2.	I further solemnly affirm that:-
	3	 I am not pursuing any MDS course in any College/institution of UT nor am pursuing the same outside the UT in any college/institution. Further I have not take any admission in ay college/institution of UT of J&K duringand have not resigned or left the course mid way.
	3.	I am aware as per SRO 48 of 2018 as amended from time to time that I am not entitled to undergo any other PG course during the period I am admitted to the institution for undergoing the present course and I am also aware of the conditions in the information brochure published by BOPEE about the consequences of leaving the course midway/resigning after cut off date notified by the BOPEE and the other consequences as may follow.
	4.	I have completed my rotatory internship by or before 31-07-2021 and in case I have not done so I am conscious that I shall not be eligible for admission for the seat during 2021. I shall produce the internship certificate to the institution/board during the process of completion of the admission process
	5.	I am registered with DCI/SMC under registration No and shall produce the same to the institute within the time specified by the institute.
	6.	I have not taken admission in any institute/college during the admission 2021
	7.	I shall produce all certificates to the institute within the stipulated time frame as may be prescribed by the concerned institute and may at present submit the provisional documents/such documents issued by the institutes which are true to the best of my knowledge and belief and are considered by the college for the purpose.
	08	That I will not participate in any kind of strike/unlawful activity during the period of my tenure engagement of Post graduation.
	ຶ 9.	That I will follow all the rules and regulation of Govt. Dental College, Jammu.
	10,	That I have enclosed all the documents required for admission.
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I affirm and declare that the above information is true and correct to the best of my knowledge and belief and I shall be personally responsible in case of misinterpretation, false information etc is proved to have been submitted by me at any time and the consequences that may follow what so ever.

DEPONENT

DEPONENT

	CERTIFICATE O	INICOLOALII	INLOG	
This is to certify that	•			
I have conducted cli	inical examination of	of Dr		
who is desirous of a	dmission to Dental F	Postgraduate Co	ourses.	
He/she has not give	en any personal his	tory of any dise	ease incapacitating	him/her to
undergo the profess	ional course.			
Also, on clinical ex	camination it has b	een found tha	t he/she is medi	cally fit to
undergo the Dental I	Postgraduate course	Э.		
The notable	findings during	g clinical	examination	of Dr
	are a	s under:		
(1) Absence of any	incapacitating and	or progressive	systematic diseas	e/disorder
condition				
(2) Absence of any o	disability of upper lin	nb/s		
(3) Absence of any r	major visual/auditory	disability		
(4) Absence of psyc	hosis/neurosis/men	tal retardation		
(5) Ability to maintain	n erect posture		× ***	
(6) Reasonable man	nual dexterity			
Name of Registered				
Registration No.:		2		
Address of the Regi	stered Medical Prac	titioner:		
			* =	
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Signature:				
Date:	· · · · · · · · · · · · · · · · · · ·			

