GOVERNMENT OF JAMMU & KASHMIR
HEALTH & MEDICAL EDUCATION DEPARTMENT
GOVERNMENT MEDICAL COLLEGE, ANANTNAG
Main Campus, Dialgam, Anantnag (J&K)-192210. email ID: principal-gmca@jk.gov.in, ragmca22@gmail.com

Student Profile Form (MD/MS Admission – 2026-27)
Applicable for UT Quota Students only

J&K BOPEE Notification No.: _____Dated: _____& Notification S. No.: _____

NEET Roll No.: _____, NEET (State) Rank: _____, NEET (National) Rank: _____

Admission Session: _____, Name of Category (Selection): _____, Gender: _____

Aadhaar Card No.: _____, Religion: _____, Mother Tongue: _____

1. Name of Student: _____
2. Parentage: _____
3. Date of Birth: ___/____/_____ (as per Matriculate Certificate)
4. MBBS Permanent Registration No.: _____Dated: _____
5. 12th Class Examination Passed Session/ Year: _____
6. Name of 12th Class Passing Board: _____with Reg. No. _____
7. Marks in 12th Class Examination (Min. /Max.): __/_____with Roll No. _____
8. MBBS Marks (Min. /Max.): _____/_____
9. Whether Registered with University of Kashmir: Yes ☐ / No ☐ (If, Yes)
   - University of Kashmir Registration No.: _____
10. Permanent Address with Pin Code: _____
    a. Tehsil: _____b. District: _____c. State/UT _____
11. Phone No.: _____, Alt. No.: _____, Email ID: _____
12. Fee Paid: ₹ _____, Transaction ID: _____Dated: _____

Paste a Recent Passport Size Photograph with Name

_____
Signature of Candidate

Note: Keep a copy of Check List attached with this Form.

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Student Profile Form (MD/MS Admission – 2026-27)
Applicable for All India Quota Students only

Willing to Participate in Next Round of Counselling: Yes ☐ / No ☐

Date of Allotment Letter: _____, MCC Round No.: _____& Selection List S. No.: _____

NEET Roll No.: _____, NEET (State) Rank: _____, NEET (National) Rank: _____

Admission Session: _____, Name of Category (Selection): _____, Gender: _____

Aadhaar Card No.: _____, Religion: _____, Mother Tongue: _____

1. Name of Student: _____
2. Parentage: _____
3. Date of Birth: ___/____/_____ (as per Matriculate Certificate)
4. MBBS Permanent Registration No.: _____Dated: _____
5. 12th Class Examination Passed Session/ Year: _____
6. Name of 12th Class Passing Board: _____with Reg. No. _____
7. Marks in 12th Class Examination (Min. /Max.): ___/_____with Roll No. _____
8. MBBS Marks (Min. /Max.): _____/_____
9. Whether Registered with University of Kashmir: Yes ☐ / No ☐ (If, Yes)
   - University of Kashmir Registration No.: _____
10. Permanent Address with Pin Code: _____
    a. Tehsil: _____b. District: _____c. State/UT _____
11. Phone No.: _____, Alt. No.: _____, Email ID: _____
12. Fee Paid: ₹ _____, Transaction ID: _____Dated: _____

Paste a Recent Passport Size Photograph with Name

_____
Signature of Candidate

Note: Keep a copy of Check List attached with this Form.

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CHECK LIST: List of Documents to be submitted with Student Profile Form (Original as well as Xerox Copy)

S. No.	Name of Document	Checked (✓ or NA)
1.	Provisional Allotment Letter (All India Quota)/ Selection Notification (UT Quota)	
2.	Rank Letter/ NEET Result Card	
3.	Admit Card issued by NTA	
4.	04 recent Passport Size Photographs with Name	
5.	Matriculation/ Date of Birth Certificate	
6.	12th Marks Sheet	
7.	Internship Completion Certificate, the Internship must be completed by or before **30.09.2026**	
8.	MBBS Marks Sheets	
9.	MBBS Degree	
10.	Permanent MBBS Registration Certificate from NMC/ concerned Medical Council	
11.	NOC from Competent Authority (Applicable for In-Service Students)	
12.	Domicile/ Residence Proof Certificate	
13.	Category Certificate (If any)	
14.	Proof of Identity by way of Aadhaar Card	
15.	Migration Certificate (if applicable)	
16.	Medical Fitness Certificate duly attested by Chief Medical Officer	
17.	Demand Draft of Rs. 37,550/-	
18.	Affidavit, prescribed by College (Applicable for all Students)	
19.	Service Bond, prescribed by J&K BOPEE (Applicable for the Students of UT Ladakh)	
20.	Any other Affidavit(s)/ Document(s)/ Certificate(s)/ Bond(s) prescribed by J&K BOPPE/ MCC	

Important Instructions:

- ***Admission Fee: Rs. 37,550/- for MD/MS, payable in the form of Demand Draft pledged to Principal Govt. Medical College Anantnag.***
- ***All the Original Documents are to be submitted at the time of Admission.***
- ***Original Documents are to be provided in a closed Plastic Transparent Bag.***
- ***Xerox copies are to be provided in a Plain File Cover.***
- ***Students are advised to keep Scanned Copy of their Documents (Soft as well as Hard).***
- ***Student Profile Form must be written in neat & clear handwriting.***

AFFIDAVIT FORMAT (PRESCRIBED BY COLLEGE)
APPLICABLE FOR ALL CANDIDATES

(To be Attested by 1st Class Magistrate)

I _____, S/o, D/o _____, R/o _____
(Tehsil, District & State/UT) do hereby solemnly affirm and declare on oath as under:

1. That I am **In-Service/ Not In-Service** Candidate.
2. That I have been selected for MD/MS/Diploma Course in the discipline of _____ in Govt. Medical College, Anantnag by J&K BOPEE under UT Quota vide Notification No. _____Dated: _____or MCC under All India Quota in Round No. ____, Dated of Allotment Letter _____.
3. That I have not left the MD/MS/PG Diploma course in half way after taking admission.
4. That during the period of my stay in the college as PG student I shall abide by all the rules and regulation prescribed by the College, University & NMC issued from time to time in this behalf.
5. That I shall remain disciplined and shall not involve myself in any kind of strike etc. and shall remain duty bound and I will not indulge in any kind of strike during MD/MS Course and if found indulged ESMA shall be enacted upon me.
6. That presently I am not on roll in any institutions for any course. In case it comes to light later on, I shall forfeit my claim to PG Course without any notice.
7. That I have completed the Rotatory Internship by or before **30.09.2026** for MD/ MS**.**
8. That it shall be my endeavor to complete the course, if for any reason I leave the course halfway I shall refund the Stipend amount in full to the Institution and will also pay the Penalty of **Rs.10,00,000/- for (MD/MS)** or as decided by the competent authority**.**
9. If at any stage it is detected by the Competent Authority or Govt. Medical College that I have secured admission to a Post graduate Degree Course by fraud, concealment of facts or mis-statement, my admission to the MD/MS shall be treated terminated /Cancelled and I may also be debarred from seeking admission to any Post graduate Degree in future and shall also be liable for criminal proceedings.

Verification **Deponent**

Verified that the above contents are true and correct to the best of my knowledge.

Deponent

AFFIDAVIT FORMAT

(PRESCRIBED BY COLLEGE ANTI-RAGGING, FROM CANDIDATE)

(To be Attested by 1st Class Magistrate)

1. I, _____ S/o_____ R/o _____ carefully read and fully understood the law prohibiting ragging and the directions of the Supreme Court and the Central / State Government in this regard.
2. I have received a copy of the NMC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions 2009, and have carefully gone through it.
3. I hereby undertake that:-
    a. I will not indulge in any behavior or act that may come under the definition of Ragging.
    b. I will not participate in or abet or propagate Ragging in any form.
    c. I will not hurt anyone physically or psychologically or cause any other harm.
4. I hereby agree that if found guilty of any aspect of Ragging, I may be punished as per the provisions of the NMC Regulations mentioned above and /or as per the law on the land.

Signed on this Day _____

Signature of Candidate

Name of Candidate S/o

_____

R/o _____

AFFIDAVIT FORMAT

(PRESCRIBED BY COLLEGE ANTI-RAGGING, FROM PARENT)

(To be Attested by 1st Class Magistrate)

1. I, _____ F/o _____R/o _____ _
   Carefully read and fully understood the law prohibiting Ragging and the directions of the Supreme Court and the Central / State Government in this regard.
2. I have received a copy of the NMC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions 2009, and have carefully gone through it.
3. I hereby undertake that: -
   a. I assure you that my ward will not indulge in any behavior or act that may come under the definition of Ragging.
   b. I hereby agree that if my ward is found guilty of any aspect of Ragging, he/she may be punished as per the provisions of the NMC Regulations and/or as per the law of the land in force.
   c. I assure you that my ward will not hurt anyone physically or psychologically or cause any other harm.

Signed on this Day _____

Signature of Parent

Name of Parent

F/o _____

R/o _____