

**GOVT. DENTAL COLLEGE &
HOSPITAL,
Chhatrapati Sambhajnagar (Aurangabad)
Maharashtra State**
Instruction manual for MDS Admission process
Academic Year 2024-25



WELCOME

The call will be attended only for any query related to the admission process from 11:00 AM to 5:00 PM.

Landline number:

Direct Number: (0240) 2401153, (0240) 2992383,81,82

All students should regularly refer [MCC website](#) for AIQ quota and the [State Commissioner's website](#) for state quota admissions and get acquainted regarding rounds, Notifications, Information brochures, information bulletin, FAQs etc.

No guidance related to further rounds will be done at the institute level. The institute is only responsible for admissions.

DON'T CALL ON THE PERSONAL NUMBER OF DEAN/NODAL OFFICER notified on MCC website; it is given for administrative use by MCC / DMER ONLY.

MDS (POST GRADUATE- ADMISSION PROCESS)
Government Dental College & Hospital, Chha. Sambhajinagar.(MS)
(All India Quota/State Quota/In Service Quota)

All the selected students of NEET-PG-2024 at Govt. Dental College & Hospital, Chhatrapati Sambhajinagar (Maharashtra) should follow the following instructions and report with all details required for admission.

Download & print this PDF file. READ CAREFULLY ALL DETAILS

1. **Students should report personally for admission/ cancellation in case of upgradation. PROXY (anyone on behalf of student) will NOT be allowed for admission process/Cancellation of admission.**
2. **Print and fill 2 copies of the Application Form.**
3. **Print and fill 1 copies of the College Verification Form.**
4. **Print and fill 2 copies Holding Certificate.**
5. **Print and fill 1 copy of the Candidate information.**
6. **Print and fill 4 copies of the Admission Office Order.**
7. **Print and fill 1 copy of Medical Fitness in the prescribed format ONLY.**
8. **Print and fill out 1 copy of the Declaration: Attendance, fees &restriction of campus activities.**
9. **Print and fill in the 2 copies of Declaration by Student & Parents (Hostel accommodation).**
10. **Anti-Ragging Declaration to be given on 100/- Stamp Paper (After Retention of MDS Seat) and to be filled on UGC anti ragging portal by retained admitted students.**
11. All **original documents** enlisted in the holding certificate will be compulsorily required for admission. Additionally, student should submit **2 sets of SELF ATTESTED Xerox/Photocopies** of all original documents.
12. All original Documents **INDIVIDUALLY SCANED in PDF format only** will be compulsorily required during admission. Student should scan document properly through **computer scanner** (Size 500 kb only). **Please do not use mobile scanner for scanning documents.** Individual Original Documents should be scanned and renamed appropriately.
e.g. SSC/10thcertificate after scanning should be renamed as
.....SSC/10th –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.
13. **Fees:** Demand draft (DD) of complete fees will be required during admission process. Kindly note that DD should NOT have any errors/spelling mistakes in the name of DD as desired. **Error/spelling will not be acceptable, such DD will be rejected. No cash/online transactions will be acceptable.**
14. Other Letters/undertakings if required will be taken at the time of admission if permissible within the rules thereof.
15. Submit Recent Passport size photos (5 copies)
16. **Kindly note.... Admission Process requires verification and approval. No student will be given Joining letters urgently. The office may require 2-3 days to complete the process.**

17. Students are advised to read details of admission process in information brochure/FAQs/other notifications available on MCC website. For State admissions (Maharashtra state) refer Information Brochure issued by State Commissioner & admission regulating authority official website www.mahacet.org and check details under Medical Education section.
18. For Service Bond & Penalty read NEET-UG-2024 Information brochure as and when available on and check details on www.mahacet.org and under Medical Education section.
19. The institute is responsible for only the admission process. We will not be available/responsible to guide any students for further rounds or rules & regulations of All India/State. The student should read information brochures/Notifications/Advisory issued by different agencies on official websites. Please don't contact the institute admission cell of institute for any such information.
20. During the admission process students & parents are advised to strictly maintain social distancing, wear mask. ONLY 1 Parent/relative will be allowed during the admission process. Any student/Parent found breaking these rules will be liable for immediate action by the admission cell authorities. **Please carry COVID-19 vaccination status.**
21. **Students are strictly advised NOT TO EDIT ANY FORMATS. All formats should be filled in by the student in his/her own handwriting.**
22. **Kindly Note: Other websites (Govt/Private) are NOT ALLOWED to display or copy this information on their personal websites. All Candidates to note, Govt. Dental College & Hospital, Chhatrapati Sambhajnagar (MS) has NOT appointed any agency (Govt/Private) for admission process / Facilitation or guidance center.**
23. **Submit Original+ 2 sets of attested documents in a Spring File as below: On the file write your Name, Category, admission Quota & Mobile Number with a thick permanent marker.**

Sample format for Spring File

Name:

Category:

Admission Quota:

Mobile Number:

Date of Admission:



(-Sd-)

DEAN

Govt. Dental College & Hospital,
Chhatrapati Sambhajnagar

**All students reporting for admissions at Govt. Dental College & Hospital,
Chhatrapati Sambhajnagar (MS) Shall fill the Google form during reporting to
the college...**

This is COMPULSORY Click the Link and fill in the Information.

<https://forms.gle/zbqY7B86m93RQvQH6>

**Recent
Passport size
Photograph**

Student's Name: _____
Address with Pin code (In Capital): _____

Mobile No Student _____
Mobile No. Parent _____
Email ID Student _____
Email ID Parent _____

To,
The Dean,
Govt. Dental College &
Hospital, Chhatrapati
Sambhajinagar.(MS)

Subject: - Joining as 1st MDS student in the subject of _____
at Govt. Dental College & Hospital, Chha. Sambhajinagar (M.S.)
(Through NEET PG All India/State Quota/In Service Quota Seat Allotment)

Reference:- Selection letter/Allotment Letter/List by
MCC/State.....

Respected Sir/Madam,

I the undersigned Dr. _____ (Full Name in Capital)
has been selected for the 1st MDS Course in the Subject of _____ at Govt.
Dental College & Hospital, Chhatrapati Sambhajinagar as per the Selection letter of All India/State
list Dated _____ (Copy Attached).

Kindly enroll me in your college as 1st MDS student in the subject
of _____ for the academic year _____.

Thanking you.

Yours faithfully,

Signature of candidate

(Dr. _____)

COLLEGE VERIFICATION FORM

AIR.....

Mr./Miss. :-.....

SML

Last Name-_____

Category

Address :-

Allotted Category-_____

(with pin code)

Date of Birth.....

Marks.....

Date :-

Sr. No.	Original Documents Required	Available: Yes/No
1	Aadhar Card (Xerox Copy)	
2	Nationality Certificate or Valid Indian Passport (Xerox)	
3	Domicile Certificate	
4	S.S.C. (10 th) Passing Certificate	
5	H.S.C (10+2) Passing Certificate	
6	NEET PG Mark Sheet	
7	NEET PG Admit Card	
8	NEET PG Allotment Letter/List	
9	BDS Passing Certificate	
10	BDS Degree Certificate	
11	Internship Completion Certificate	
12	Registration Certificate of BDS from State Medical council/DCI	
13	Caste Certificate (If applicable)	
14	Caste Validity (If applicable) (For outside Maharashtra students (Annexure-III)	
15	EWS certificate (Annexure-A) by Competent Authority issued for 2023-2024 (If applicable)	
16	Non-Creamy Layer Certificate valid up to 31-03-2025 (NCL) (If applicable)	
17	BDS College Leaving Certificate (T.C.)	
18	Attempt Certificate of BDS from Principal/DEAN	
19	Gazette for Change in Name (If applicable)	
20	Migration Certificate issued by respective University (If applicable)	
21	Self-Education Gap Certificate after completion of Internship (If applicable)	
22	Medical Fitness Certificate in prescribed format only	
23	PWD Certificate from authorized Medical Boards ONLY (If applicable)	
24	First to Final year BDS Mark Sheets	
25	For state quota Bond Release Certificate/Bond Break payment Govt. receipt (if applicable)	
26	NOC/Relieving letter from health department for In service state quota students. (This will be Compulsory for In-service candidates)	
27	Other letter if any required will be taken during admission	
28	Hostel accommodation & declaration formats (compulsory for all)	
29	Voter ID (Xerox Copy) or Form "C"	

Tuition Fees Demand Draft:

D.D.No.

of Rs.

Dated:

Original Document & Xerox set to be prepared exactly as per the above sequence.




COLLEGE VERIFICATION FORM

AIR..... Mr./Miss. :- _____
 SML Last Name- _____
 Category Address :-
 Allotted Category-_____ (with pin code)
 Date of Birth.....
 Marks..... Date :-

Sr.NO	Fees	All India & State Quota candidates Only	In- Service Quota candidates Only
1	Tuition Fees	1,04,000/-	0
2	Admission Fees	1500/-	1500/-
3	Development Fees	3000/-	3000/-
4	Caution Money Deposit	5000/-	5000/-
5	Library Deposit	2000/-	2000/-
6	Laboratory Deposit	100/-	100/-
7	Library Fees	1000/-	1000/-
8	Laboratory Fees	50/-	50/-
9	Gymkhana Fees	500/-	500/-
Total(rupees)		1,17,150/-	13,150/-
1	Hostel Deposit	300/-	300/-
2	Hostel Fees (per year)	4000/-	4000/-

Certificates, fees verified & found to be correct.

Dr. Ulhas Tandle (Member, Admission Committee & Scrutiny Officer)	Dr. Rakesh Mohode (Member, Admission Committee, Online Reporting Officer, Joint Nodal Officer & Scrutiny Officer)	Dr. Vikrant Kasat, (Nodal Officer, Admission Committee) & Scrutiny Officer)
Dr. M. S. Indurkar, DEAN, Chairman, Admission Committee, Govt. Dental College and Hospital, Chhatrapati Sambhajinagar.		

 स्वातंत्र्याचा अमृत महोत्सव	 (महाराष्ट्र शासन)	 स्वतंत्र शैक्षणिक शक्ती ३५०	
	शासकीय दंत महाविद्यालय व रुग्णालय, छत्रपती संभाजीनगर. धन्वंतरी नगर, पानचवकी रोड, छत्रपती संभाजीनगर-४३१००१		
	GOVT. DENTAL COLLEGE & HOSPITAL, CHHATRAPATI SAMBHAJINAGAR. Phone:- 0240-2402383, 2401153 email – gdca83@yahoo.com Website- www.gdchcsn.ac.in		
	No.GDCHA/ACAD./MDS Admission 2024-25/ /2024 Date:-		

ORIGINAL DOCUMENTS HOLDING CERTIFICATE

Received following original documents from Dr. _____ admitted for MDS Course in the subject of _____ on _____ / _____ /20.... at Govt. Dental College & Hospital, Chhatrapati Sambhajnagar (Maharashtra) for the academic year 2024-25 through All India Quota/State Quota/ In Service Quota.

This Certificate is the Proof that all original documents as below are submitted by the student to the institute. Once admitted, original documents will not be given to the student. Original documents will be retained by the institute till the student completes MDS Course & Compulsory Bond Service.

Sr. No.	Original Documents Required	Available: Yes/No
1	Aadhar Card (Xerox Copy)	
2	Nationality Certificate or Valid Indian Passport (Xerox)	
3	Domicile Certificate	
4	S.S.C. (10 th) Passing Certificate	
5	H.S.C (10+2) Passing Certificate	
6	NEET PG Mark Sheet	
7	NEET PG Admit Card	
8	NEET PG Allotment Letter/List	
9	BDS Passing Certificate	
10	BDS Degree Certificate	
11	Internship Completion Certificate	
12	Registration Certificate of BDS from State Medical council/DCI	
13	Caste Certificate (If applicable)	
14	Caste Validity (If applicable) (For outside Maharashtra students (Annexure-III)	
15	EWS certificate (Annexure-A) by Competent Authority issued for 2023-2024 (If applicable)	
16	Non-Creamy Layer Certificate valid up to 31-03-2024 (NCL) (If applicable)	
17	BDS College Leaving Certificate (T.C.)	
18	Attempt Certificate of BDS from Principal/DEAN	
19	Gazette for Change in Name (If applicable)	
20	Migration Certificate issued by respective University (If applicable)	
21	Self-Education Gap Certificate after completion of Internship (If applicable)	
22	Medical Fitness Certificate in prescribed format only	
23	PWD Certificate from authorized Medical Boards ONLY (If applicable)	
24	First to Final year BDS Mark Sheets	
25	For state quota Bond Release Certificate/Bond Break payment Govt. receipt (if applicable)	
26	NOC/Relieving letter from health department for In service state quota students. (This will be Compulsory for In-service candidates)	
27	Other letter if any required will be taken during admission	
28	Hostel accommodation & declaration formats (compulsory for all)	
29	Voter ID (Xerox Copy) or Form "C"	
Tuition Fees Demand Draft:		
D. D. No. _____ of Rs. _____		Dated: _____
Original Document & Xerox set to be prepared exactly as per the above sequence.		

DEAN
Govt. Dental College & Hospital, Chha.
Sambhajnagar.

Copy to: Student/Account Section, Govt. Dental College and Hospital, Chhatrapati Sambhajnagar.


CANDIDATE INFORMATION**GOVT. DENTAL COLLEGE & HOSPITAL, CHHA. SAMBHAJINAGAR-431 001****MDS Admission _____ Year****Admission quota: _____ Subject: _____**RECENT
PAN SIZE
PHOTO

1	Name of the Student (In Capital words) English Marathi	SURNAME NAME FATHER NAME
2	Guardian / Father's Full Name	
3	Name of Mother	
4	Place & Date of Birth	Place DOB:
5	Residential Detail Address with Pin code:	
6	State to which candidate belongs	
7	Telephone No. With Code (Residential)	
8	Mobile No.	Student: Parent :
9	Email id	Student: Parent:
10	Aadhar No	
11	Voter ID No	
12	Blood Group	
13	Mark of Identification (Two)	1. 2.
14	Quota of admission (AI/State/In Service)	
15	NEET Rank	
16	Percentile score of NEET PG	
17	Category: SC/ST/VJ/NT-1/NT-2/NT-3/OBC/OPEN/other	
18	Caste & Sub caste	
19	MSDC/DCI registration No	Valid from _____ to _____
20	State Dental Council Name	
21	BDS College Name	
22	BDS passing year	
23	Marks Obtained in BDS	Marks = /out of = % =
24	Internship Completed Date	
25	Name of XII th (10+2) Board	

Date : / /

Place : Chhatrapati Sambhajinagar

Signature of Candidate

	 (महाराष्ट्र शासन)	
	शासकीय दंत महाविद्यालय व रुग्णालय, छत्रपती संभाजीनगर. धन्वंतरी नगर, पानचक्की रोड, छत्रपती संभाजीनगर-४३१००१	
	GOVT. DENTAL COLLEGE & HOSPITAL, CHHATRAPATI SAMBHAJINAGAR Phone:- 0240-2402383, 2401153 email – gdca83@yahoo.com https://gdchcsn.ac.in	
	No.GDCHA/ACAD./MDS Admission 2024-25/ /2024 Date:-	

OFFICE ORDER

Sub: - **Govt. Dental College & Hospital, Chhatrapati Sambhajinagar**

Through NEET PG All India/State /In service Quota seat allotment

Ref: - Allotment Letter No/Selection List dated & Round: _____

Dr. _____ is provisionally selected for the 1st MDS admission in the subject of _____ (Subject Name) by Competent Authority of All India/ State/In service quota admissions for the academic year _____. The Admission is subject to the condition that he/she is not registered for any post-graduate course anywhere at present.

1. Your terms will be counted from the date of joining.
2. As per DCI norms you will have to undergo 36 months for Degree to be eligible for PG University examination. No other equitable exemption will be granted to appear the university examination. Such type of undertaking will have to submit at the time of joining the course to the concerned head of Departments.
3. You are also informed that your selection is provisional and subject to the final eligibility confirmation of Maharashtra University of Health Sciences (MUHS), Nashik based on your documents submitted.
4. **Private practice or any kind is not permitted during the period of the post-graduate course.**
5. You are directed to report to concerned department Professor & Head after admissions.
6. After Cut-off date every student shall submit Corporate Social responsibility (Service Bond) within 1 month, failing which the student will not be allowed to appear University exams.
7. As per the information brochure issued by the State commissioner of Maharashtra for the current academic year, under the clause of Penalty & Bond, non-completion of MDS Course tenure & for lapse of seat, student must pay an amount of Rs. 20,00,000/- (Twenty lacs). Original documents & admission cancellation after cut-off date will be done only after paying penalty amount.
8. Govt. of Maharashtra hereby prohibits “strike” in the essential services specified in the schedule hereto appended from the date of this order.




DEAN
Govt. Dental College & Hospital,
Chhatrapati Sambhajinagar.

To,

Dr.

.....

Copy to: Concern Student/Head of the Dept./Accounts/Warden/others, Govt. Dental College and Hospital, Chhatrapati Sambhajinagar.

 स्वातंत्र्याचा अमृत महोत्सव	 (महाराष्ट्र शासन)	
	शासकीय दंत महाविद्यालय व रुग्णालय, छत्रपती संभाजीनगर. धन्वंतरी नगर, पानचक्की रोड, छत्रपती संभाजीनगर-४३१००१	
	GOVT. DENTAL COLLEGE & HOSPITAL, CHHATRAPATI SAMBHAJINAGAR. Phone:- 0240-2402383, 2401153, Email – gdca83@yahoo.com Website- www.gdchcsn.ac.in	
	No.GDCHA/ACAD./MDS Admission 2024-25/ /2024 Date:-	

UNDERTAKING-NEET-PG ADMISSIONS

(ONLY FOR AIQ: Online admission Process)

I the undersigned hereby confirm that the data submitted during joining /subsequent rounds through the online process was done in my presence and with my full consent. It will be my full responsibility to thoroughly check the data before final submission.

Name & Sign Witness

(Name & Sign of candidate with date)

Contact No.:

Contact No.:

Place:-

Date:-

FEES: ONLY Demand Draft will be acceptable

For NEET PG Admission in the current year: Selected students are instructed to submit the DD as follows, Demand drafts to be drawn from Nationalized banks only (errors or spelling mistakes in the DD will NOT be accepted)

Details of Fees for 1st M.D.S. for the academic year 2024-25

FULL requisite fees DD on the day of admission.

APPLICABLE FOR: All India & State quota candidates ONLY

Sr. No	Fees	Amount
1	Tuition Fees	1,04000/-
2	Admission Fees	1500/-
3	Development Fees	3000/-
4	Caution Money Deposit	5000/-
5	Library Deposit	2000/-
6	Laboratory Deposit	100/-
7	Library Fees	1000/-
8	Laboratory Fees	50/-
9	Gymkhana Fees	500/-
	Total (Rupees)	1,17,150/-
After allotment of hostel following charges will be applicable		
1	Hostel Deposit	300/-
2	Hostel Fees (per year)	4000/-

**DD Name: "DEAN, GOVERNMENT DENTAL COLLEGE & HOSPITAL, CHHATRAPATI SAMBHAJINAGAR"
(Payable at Chhatrapati Sambhajnagar SBI Branch Code-17554) (MS)**

Note:

- **At any cost cash / Cheque will not be accepted.**
- The demand draft will be deposited in the accounts only after confirmation of the admission/status retention by the students.
- If applicable and students are allotted another college in subsequent rounds of All India Quota/State quota, then the DD(s) will be refunded back to the student. All such students will be required to pay cancellation of admission fees of Rs.1500/- as cash in the cash section & submit the original receipt for getting your original documents from Academic Section, Government Dental College and Hospital, Chhatrapati Sambhajnagar.
- **Kindly note that the fees in different heads is dependent upon the instructions given by the state government from time to time. Any new additions/changes will be done accordingly. It will be mandatory for all students to comply with such changes or notifications from the institute.**

FEES: ONLY Demand Draft will be acceptable

For NEET PG Admission in the current year : Selected students are instructed to submit the DD as follows, Demand drafts to be drawn from Nationalized banks only (errors or spelling mistakes in the DD will NOT be accepted)

Details of Fees for 1st M.D.S. for the academic year 2024-25

FULL requisite fees DD on the day of admission.

APPLICABLE FOR: In- SERVICE candidates ONLY

Sr. No	Fees	Amount
1	Admission Fees	1500/-
2	Development Fees	3000/-
3	Caution Money Deposit	5000/-
4	Library Deposit	2000/-
6	Laboratory Deposit	100/-
7	Library Fees	1000/-
8	Laboratory Fees	50/-
9	Gymkhana Fees	500/-
	Total (Rupees)	13,150/-
After allotment of hostel following charges will be applicable		
1	Hostel Deposit	300/-
2	Hostel Fees (per year)	4000/-

**DD Name: "DEAN, GOVERNMENT DENTAL COLLEGE & HOSPITAL, CHHATRAPATI SAMBAJINAGAR"
(Payable at Chhatrapati Sambhajinagar SBI Branch Code-17554) (MS)**

Note:

- **At any cost cash / Cheque will not be accepted.**
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- If applicable and students are allotted another college in subsequent rounds of All India Quota/State quota, then the DD(s) will be refunded back to the student. All such students will be required to pay cancellation of admission fees of Rs.1500/- as cash in the cash section & submit the original receipt for getting your original documents from Academic Section, Government Dental College and Hospital, Chhatrapati Sambhajinagar.
- **Kindly note that the fees in different heads is dependent upon the instructions given by the state government from time to time. Any new additions/changes will be done accordingly. It will be mandatory for all students to comply with such changes or notifications from the institute.**

ANNEXURE – “M”

CERTIFICATE OF MEDICAL FITNESS

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

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

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

Address of the Registered Medical Practitioner

Signature

Name

Registration No.

Seal of Registered Medical Practitioner

Date:-

..... ✂ ✂

Note:

- ✓ A candidate must be medically fit to undergo PG courses applied for. The medical fitness must be certified by registered medical practitioner in the above prescribed format ONLY.
- ✓ **If the candidate has claimed PWD seat & allotted a PWD seat.** He/She has to submit additionally the Physical handicapped certificate from the authorized agencies only as per the instructions of competent authorities of All India/State quota in the respective academic year.

Annexure – III

Office of the

Outward No.:-

Date:-

TO WHOME IT MAY CONCERN

CERTIFICATE

This is to certify that, the Caste Certificate No.....Dated
issued to Mr./Miss..... by the Tahsildar / Magistrate
is Valid.

Further, it is stated that there is no provision of issuing separate Caste Validity Certificate in
..... State

Office Seal / Stamp

Signature of Tahsildar / Magistrate / Issuing Authority

कार्यालय

जावक क्र.

दिनांक:

जो कोई भी इससे संबंधित है उसके लिए

प्रमाणपत्र

प्रमाणित किया जाता है की, श्री. / कुमारी..... इनको,
तहसिलदार/ जिल्हा मॅजिस्ट्रेट..... कार्यालयद्वारा निर्गमित
किया हुआ जात प्रमाणपत्र क्रमांक..... दिनांक.....
वैध है।

तथा,..... राज्यमें अलगसे जात वैधता प्रमाणपत्र निर्गमित करने का
कोई प्रावधान नहीं है।

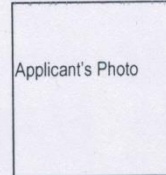
कार्यालयीन मोहोर

तहसिलदार / जिल्हा मॅजिस्ट्रेट तथा
संबंधित अधिकारी के हस्ताक्षर

वाचा: शासन निर्णय क्र. सीडटी ३५१७/प्र.क्र.१२०/१७/शिक्षण-२ दिनांक ०९/०३/२०१५)

Annexure - A

Self-Declaration



I Son / Daughter of
.....aged.....occupation.....residen
t of.....
.....with UID No.

Hereby declar that, I have passed.....course from
..... College during the year
..... and I hereby state that, I have not taken admission during the
period of gap from to period, hence, the gap arises in
my education.

The information provided above is true and correct to the best of my personal
knowledge, information and belief. I fully understand the consequences of giving false
information. If the information is found to be false, I shall be liable for prosecution and
punishment under Indian Penal Code and / or any other law applicable thereto.

Place :

Applicant's Signature.....

Date :

Applicant's Name :

प्रपत्र-अ
स्वयंघोषणापत्र

अर्जदाराचा फोटो

मी.....श्री.....यांचा
मुलगा/ मुलगी वय..... वर्षे, आधार क्रमांक (असल्यास) व्यवसाय
..... राहणार

.....याद्वारे घोषित करतो/करते की,

मी.....या शाळेमधूनया वर्षी
उच्च माध्यमिक शालांत परीक्षा उत्तीर्ण झाला/झाली असुन मी घोषित करतो/करते की,.....
.....ते.....या कालावधीमध्ये मी कोणत्याही शैक्षणिक संस्थेमध्ये प्रवेश घेतलेला नाही.
त्यामुळे सदर शैक्षणिक खंड निर्माण झालेला आहे.

वरील सर्व माहिती माझ्या व्यक्तीगत माहिती व समजूतीनुसार खरी आहे. सदर माहिती
खोटी आढळून आल्यास, भारतीय दंड संहिता अन्वये आणि/किंवा संबंधित कायदानुसार माझ्यावर
खटला भरला जाईल व त्यानुसार मी शिक्षेस पात्र राहीन याची पूर्ण जाणीव आहे.

ठिकाण :

अर्जदाराची सही.....

दिनांक :

अर्जदाराचे नाव :

ANTI RAGGING UNDERTAKING BY THE STUDENT

1. I, _____ s/o | d/o _____, having been admitted to AURANGABAD, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the Regulations) carefully read and fully understood the provisions contained in the said Regulations.
2. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty for abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that I will not indulge in any behavior or act that maybe constituted as ragging under clause 3 of the Regulations. I 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.
5. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penallaw or any law for the time being in force. I hereby declare that I have 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, I am aware that my admission is liable to be canceled.

Declared on _____

Signature of deponent
Name :

VERIFICATION

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

Verified at _____ on _____

Signature of deponent

UNDERTAKING BY PARENT/GUARDIAN

1. I, _____ father/mother/guardian of, _____, having been admitted to AURANGABAD, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the Regulations), carefully read and fully understood the provisions contained in the said Regulations.
2. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and 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.
4. I hereby solemnly aver and undertake that My ward will not indulge in any behavior 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.
5. 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.
6. 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 on _____

Signature of deponent

Name :

Address :

VERIFICATION

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

Verified at _____ on _____

Signature of deponent

DECLARATION : BY STUDENT & PARENTS

Regarding Attendance, fees & In Campus activities

I hereby declare and undertake that, as per Maharashtra University of Health Sciences, Nashik, I am required to Complete Minimum 80% Attendance in each term (1 term is of 6 months...total terms 6 terms=36 months) failing which I am not eligible to appear in the University exams.

As per DCI norms I will have to undergo 36 months for MDS Degree to be eligible for PG University examination. No other equitable exemption will be granted to appear the university examination.

It will be my direct responsibility to pay the yearly fees, Hostel Fees, etc. I am being informed that No reminder will be given to the student from the office for paying yearly fees and other dues. If I am not able to pay the yearly fees and dues on time, I will not be allowed to appear for the University examinations and I will be responsible for the same.

I further declare that, once I Joined as a MDS student in this College, I will not participate in any activities outside campus, like sports, or cultural events, or leave the campus for any events/participation in other cities without official Permission from the Head of the department/Head of the Institute. Any issues arising from such activities of the student without prior permission, the institute will not be responsible for the same and immediate action/Legal action will be initiated by the institute against me.

Signature of Student with date

Name of Student: _____

Address: _____

Mobile Number: _____

Email address: _____

Signature of Parent/Legal guardian with date

Name of Parent/Gaurdian : _____

Address: _____

Mobile Number: _____

Email address: _____

DECLARATION : BY STUDENT & PARENTS for HOSTEL FACILITY
(To be filled Compulsory by all students irrespective of hostel allotments)

I, _____ is admitted for MDS course in the academic year _____ at Govt. Dental College & Hospital, Chhatrapati Sambhajnagar (Maharashtra).

My parents/legal guardian have gone through the SOP for hostel accommodation given in the admission manual at the time of Joining. We have clearly understood all the rules and regulations mentioned in the SOP.

I hereby declare that I am suffering from _____ disease(s) and on treatment. I am receiving following _____ Drugs for my disease element since _____ days/Months/Years. I also declare that I am not hiding any information related to my health issues. (Put NA in fill in the blanks incase this para is not applicable)

I and my parents/legal guardian, hereby undertake and declare that, if hostel accommodation is allotted on my request, I will abide by all the rules and regulations mentioned in the SOP. If I break any rule mentioned thereof in the SOP, I will be liable for appropriate action.

Signature of Student with date

Name of Student: _____

Address: _____

Mobile Number: _____

Email address: _____

Signature of Parent/legal guardian with date

Name of Parent/Legal Guardian: _____

Address: _____

Mobile Number: _____

Email address: _____

COMPULSORY SOCIAL RESPONSIBILITY (SOCIAL SERVICE BOND)

To be submitted ONLY after final confirmation of admission/after cut-off date.

Note :

1. It will be the total responsibility of the student to submit the service bond **after final confirmation** of admission **within one month** after the admission process. Non submission of bond does not mean that you are not bonded. Any student who fails to submit the bond within the stipulated time will not be eligible to appear in the University PG exams. Appropriate action will be initiated against all such candidates.
2. As per the information brochure issued by the State commissioner of Maharashtra for the current academic year, under the clause of Penalty & Bond, non-completion of MDS course tenure & for lapse of seat, student has to pay an amount as per Govt. rules.

(All rules & regulations mentioned in the information brochure issued by the state commissioner will be applicable to all admissions in the Maharashtra state irrespective of admission Quota. For further details read NEET-PG-2024 information brochure available on www.mahacet.org under Medical Education section

BOND FORMAT attached below: On Rs.500/- Stamp Paper

Bond / Affidavit (Notarized)
(Applicable for All India/State PG Students)

Name of Student :

Permanent Address :

Course : M.D.S. in

Admission Year :

AGREEMENT BOND (FOR POST GRADUATION STUDENTS)

This agreement made at the Day of Month
Year between the Government of Maharashtra (Herein after referred as 'Government' which expression shall unless the next does not admit including his / her successors and assigns) of the part and Dr.
herein after referred to as the Student of the part.

Whereas the students is at present doing P.G. in
..... at Government Dental College & Hospital, Chhatrapati Sambhajinagar and whereas the student is granted the said facilities for doing post-graduate studies upon term and conditions herewith after contained.

NOW THIS AGREEMENT

As per the All India/ NEET-MDS-_____Brochure the Government granting facilities/ education to the students aforesaid the Government has prescribed the agreement rules that-

As per Government Resolution (G.R. No. MED-1010/CR-184/10/Ed-2 Dated-28th May 2010 and any G.R. issued in this regard from time to time), candidates joining seat of Government/ Municipal Corporation colleges for admission to Post – Graduation Courses either through All India Post Graduate quota or through NEET-MDS-_____will be required to sign a bond to serve the Government of Maharashtra or local self government or Defense services for a period of one year, failing which he/she will be required to pay **Rs. 50,00,000/- (In words Fifty Lakh Rupees only)** for the default.

- (i) I am fully aware about above terms & conditions of the bond & agreed all the terms& conditions mentioned therein & Government of Maharashtra issued G.R. in this regard from time to time.
- (ii) I hereby declare that, if violation of terms, conditions & regulations prescribed by the Government related to M.D.S. course and social service bond after completion of the M.D.S. course occurs by me, I am ready to pay the penalty/fine and ready to accept punishment, if any
- (iii) I am also ready to follow the rules and regulations prescribed by Government time to time related to my M.D.S. course and social service bond thereafter.

(iv) Government shall not bear and pay the stamp duty, if any on this bond.

Date:

Place:

In witness where of the above Named.

Name of the students & Address

(Signature of Student)

Sureties (Excluding parents)

1. Name & Address : _____

(Signature)

2. Name &Address : _____

(Signature)

Witness:

1. Name &Address : _____

(Signature)

2. Name &Address : _____

(Signature)

I also undertake that, any changes in the policy Decision of the state regarding compulsory Corporate Social responsibility services (Service Bond) will be applicable to me and the same WILL BE ACCEPTABLE by me.

Bond / Affidavit (Notarized)
(Applicable for All India/State PG Students)

Name of Student :

Permanent Address :

Course : M.D.S. in

Admission Year :

UNDERTAKING (FOR POST GRADUATION STUDENTS)

This agreement made at the Day of Month
Year between the Government of Maharashtra (Herein after referred as 'Government' which expression shall unless the next does not admit including his / her successors and assigns) of the part and Dr.

Herein after referred to as the student of the part.

Whereas the students is at present doing P.G. in
..... at Government Dental College & Hospital, Chhatrapati Sambhajinagar and whereas the student is granted the said facilities for doing post-graduate studies upon term and conditions herewith after contained.

NOW THIS UNDERTAKING

As per the All India/ NEET MDS _____ Brochure the Government granting facilities/ education to the students aforesaid the Government has prescribed the agreement rules that-

A) Candidate who has joined for postgraduate course should complete the course, failing which he/she will be required to pay **10,00,000/- (In words Ten Lakh Rupees only)**(i.e. for non completion of course). However, this is not applicable to the candidates of NEET-MDS _____ resigning the P.G. admission before prescribed date.

B) Any candidate responsible for lapse of post graduate dental seat will have to pay non-refundable additional penalty of **Rs. 10,00,000/-(In words Ten Lakh Rupees only)** as per the brochure any such candidate will not be eligible for admission through state quota for subsequent two academic years i.e. NEET MDS- _____ and _____.

- (i) I am fully aware about above terms & conditions of the bond & agreed all the terms& conditions mentioned therein & Government of Maharashtra issued G.R. in this regard from time to time.
- (ii) I hereby declare that, if violation of terms, conditions & regulations prescribed by the Government related to M.D.S. course and social service bond after completion of the M.D.S. course occurs by me, I am ready to pay the penalty/fine and ready to accept punishment, if any

(iii) I am also ready to follow the rules and regulations prescribed by Government time to time related to my M.D.S. course and social service bond thereafter.

(iv) Government shall not bear and pay the stamp duty, if any on this bond.

Date:

Place:

In witness where of the above Named.

Name of the students & Address

(Signature of Student)

Suretias (Excluding parents)

1. Name & Address : _____

(Signature)

2. Name &Address : _____

(Signature)

Witness:

1. Name &Address : _____

(Signature)

2. Name &Address : _____

(Signature)

I also undertake that, any changes in the policy Decision of the state regarding compulsory Corporate Social responsibility services (Service Bond) will be applicable to me and the same WILL BE ACCEPTABLE by me.



RULES AND REGULATION FOR HOSTEL ACCOMODATION

**“Standard Operating Procedure”
Version: 02, Dated: 08/07/2024
Govt. Dental College & Hospital,
Chhatrapati Sambhajnagar**

Prepared by

(Dr. Rakesh Mohode)
Hostel in-Chief,
Government Dental College and Hospital,
Chhatrapati Sambhajnagar.

(Dr. Madhuri Ambhure (Wavdhane)
Girl’s Hostel Incharge,
Government Dental College and Hospital,
Chhatrapati Sambhajnagar.

This Information Brochure Approved by

(Dr. Vikrant Kasat),
Nodal officer, Admission Committee &
Scrutiny Officer,
Government Dental College and Hospital,
Chhatrapati Sambhajnagar.

(Dr. Maya Indurkar),
DEAN,
Government Dental College and Hospital,
Chhatrapati Sambhajnagar.

These rules shall apply to all inmates (present and future) of the hostels attached to the Govt. Dental College & Hospital, Chhatrapati Sambhajinagar.

1. ADMISSION TO HOSTEL:

- i) Admission to the hostel shall be limited to the students of B.D.S. & M.D.S. of the Govt. Dental College & Hospital, Chhatrapati Sambhajinagar. Other courses running in the Institute will not be provided with any hostel facility.
- ii) Those desiring admission to the hostel shall apply in the prescribed form available in the office/obtainable from the rector.
- iii) Admission to the hostel shall be given based on merit. For BDS student's Preference shall be given to outside students first followed by Local students.
- iv) For PG students, it is compulsory to stay in the campus. They will be provided with a hostel facility with in the available resources.**

2. ALLOTMENT OF HOSTEL ROOMS:

- i) Getting accommodation in hostels will not be the right of the students. Depending upon the availability of rooms, the student will be allotted accommodation facility on sharing basis either as 1:3, 1:2 or 1:1.
- ii) The allotment in the various rooms shall be distributed under the supervision of warden. No student will be given direct allotment by the office section.
- iii) The students should take possession of the room allotted to them within one week of the allotment failing which their allotment will stand cancelled.
- iv) Students shall occupy the room allotment and they shall not transfer or change their rooms with prior written permission of the warden. Any such adjustments by the students shall be considered as illegal and disciplinary action will be taken against all such cases.

3. Eligibility for continuation of accommodation to the hostel:

- i) Hosteler having more than three attempts will not be considered for hostel continuation of accommodation in the hostel.
- ii) The allotment of rooms rests finally at the Dean's decision who may refuse allotment for a probable reason or may remove any student from the hostel at any times as a disciplinary measure.

4. PERIOD OF HOSTEL ROOM ALLOTMENT (only for UG)

- i) The accommodation in the hostel shall be reallocated once a year i.e., every 2 academic terms (1year).
- ii) It will be mandatory for all students to follow the reshuffling procedure as and when initiated. The students who are not following the instructions will be removed from the hostel with immediate effect.**
- iii) No one shall imagine that the allotted room will remain with the student till he/she completes the course.
- iv) The reshuffling process of Hostel rooms will be the discretion of warden with approval of Dean.

5. PAYMENT OF RENT/CHARGES:

- i) All the students residing in the hostel shall pay the rent of the room and other charges for extra amenities such as Mess deposit, etc.
- ii) Yearly hostel fees shall be paid by the student within the stipulated period. No separate notice will be issued by the institute for paying the hostel fees.
- iii) Any student not paying the regular hostel fees irrespective of reasons will not be allowed to stay in the hostel and all such students will be considered as defaulters.

- iv) For appearing every exam, the student shall obtain NOC from fees section regarding the hostel fees. Those having pending dues will not be allowed to sit in exams till the dues are cleared. Any academic loss due to this action will be the responsibility of student.

6. POSSESSION OF THE ROOMS, FURNITURE AND FIXTURES ETC:

- i) On taking possession of the room the student will make a list of the items (cot, table, chair, cupboard, rack, fan etc.) present in his/her room and submit it to the warden within 10 days of the final allotment for the term.
- ii) At the time of vacating the room the warden will verify the list again present in the room. There will be recovery from the student for the item which is found short/less or damaged.

7. PERMISSION FOR STAYING OUTSIDE:

- i) The main gate of the hostel will be closed at 10.00 pm for boys' hostel & 9:00 PM for Girl's hostel and open at 6.30am.
- ii) If a student of the hostel wants to stay out of the hostel at night, he must obtain written prior permission from the warden/rector.
- iii) Any student not taking permission to note that this will be informed to your parents immediately and the institute will not be responsible for issues arising thereof. Moreover, in such a case the Institute will take immediate action for breaking the pre-defined rule. The student will be debarred temporarily for a minimum of 5 to maximum 15 days. No communications in this regard will be considered for reply/action by the office.
- iv) Breaking the rule again will lead to permanent removal from Hostel.

8. MEDICAL AID:

- i) All cases of sickness shall be immediately reported to the warden by the student himself/herself, if possible, otherwise by the room partner or any student who may have become cognizant of the fact. On receipt of such information the administration shall take appropriate action.
- ii) The information of illness should also be given to parents immediately by student/Room Partner. The parents or local guardians should come urgently to take their ward's care.
- iii) Parents should regularly be in touch with their health status/issues. If a student/Parent is hiding any information of health issues & health problems, they will be fully responsible for any issues arising because of hiding information. The administration will initiate appropriate action against such students/Parents/Guardian for not giving/hiding the important information regarding health issues.

9. CANCELLATION OF ALLOTMENT:

A student residing in the hostel shall be liable to vacate his/her allotment in the hostel in the following circumstances:

- i) If he/she fails to take possession and occupy the room within seven days of allotment.
- ii) If he/she does not pay his/her hostel fees as specified by the Govt. from time to time.
- iii) If he/she is found guilty of gross indiscipline/misbehavior/Unlawful activities. The decision of warden in such cases will be full and final.
- iv) If a student because of illness is unable to take themselves or is mentally unstable or may cause harm to oneself or others.

10. GENERAL TERMS AND CONDITIONS:

- A. The students should not as far as possible keep valuable laptops and mobiles in their rooms since the administration cannot take responsibility for the safety of their belongings. Students are also advised not to keep the cash more than the barest

minimum. In case their personal valuables are stolen, damaged or misused in any manner the administration will not be responsible for the same.

- B. The hostel is strictly meant for students (B.D.S./M.D.S.) of GDC & H, Chhatrapati Sambhajinagar. **No outsider/other person/parents/relatives will be allowed to stay in the hostel under any circumstances including emergency.** Any student breaking this rule will be immediately dismissed from the hostel without any chance of giving an explanation. Such activity will be considered unlawful and further appropriate action will be initiated against such students. The decision of the Warden in this regard will be full and final.
- C. Visitors will be allowed to meet the hostelers in the common meeting hall within the allotted timelines.
- D. The hosteler will take care of all facilities provided with the rooms. Shall switch off lights, fan etc. when not in use.
- E. Hosteler shall not interfere/temper with any electric fittings/switchboard, etc. provided in the hostel. Every room has limited facility of electrical supply, additional electricity appliances if installed by the students will increase the load of electricity and may trigger short circuit. If this happens and it leads to damage to Govt. property, immediate legal action will be initiated against such students including permanently removing from hostels. **Personal Refrigeration, TV, Air conditioners (AC)/Induction cookers/water Heaters/other electronic devices are strictly prohibited in the hostel rooms/Corridors.** Using electrical extension cords of any type leading to an increase in load on an electric point is prohibited.
- F. The hosteler shall maintain utmost cleanliness of the hostel rooms and corridors. He/she shall not use corridor and wash basins for cleaning utensils and shall dispose of any waste in a decent manner by using dustbins provided for the purpose. Action will be initiated if irregular activities are captured.
- G. Defacing walls fixtures or furniture is strictly prohibited. For any damage, it will be penalized at the expense of the occupants of the rooms.
- H. No drying of clothes will be permitted on the verandas or corridors, hostel terrace.
Students will not be allowed to go on hostel terraces.
- I. Students should maintain the discipline and peace in the hostel. Any activity causing disturbances to the inmates of the hostel should be avoided and is strictly prohibited in the hostel. Disturbance / nuisance / Playing DJ / loud music in any form will be dealt seriously and those involved will permanently be debarred from the hostel. Depending on the situation, if required even suspension / rustication from the college / lawful action as may be applicable will be initiated by the administration.
- J. Midnight parties/Gathering/New-year celebrations/get-together/any other celebrations is strictly prohibited in the hostel rooms and premises.
- K. Students are Strictly not allowed to go to the terrace of hostel for any reason.
- L. Smoking/consumption of alcoholic drinks/use of prohibited narcotic substances within the hostel rooms/ premises is strictly forbidden and prohibited. Any student found in possession of alcohol and narcotics will be immediately suspended/rusticated from the hostel and college. Moreover He/she will be facing lawful action also.
- M. Ragging in any form is strictly prohibited. Any student found guilty of ragging will face punishment as per the DCI, New Delhi guidelines and amendments issued from time to time. Student and Parents Undertaking is mandatory for Anti-Ragging (As DCI, New Delhi Norms). (Undertaking to be given on 100/- Stamp Paper).
- N. The student should submit problems, if any regarding hostel in writing to the Hostel

Warden.

- O. Motor bikes/cars are not permitted in the hostel premises. Students can use them at their own risk. Any damage/loss of the vehicle is not the responsibility of administration.
- P. The students of the hostel will have to do entries in the register before leaving the hostel or going to hometown. Again, entry shall be done after coming back from leave.
- Q. If a hosteler is leaving the hostel without initiation/permissions will have to face the punishments as may be applicable. If the rooms are found locked for more than 2 months, the said room(s) shall be opened following the legal procedure without intimation to the student.
- R. Once you are allotted hostel, all students to note that, without necessary permissions of Dean (applied through proper channel), the student(s) shall not plan any activities in hostel or hostel premises / Local or outside trips / gatherings in hostel / New year celebrations / other celebrations of any kind involving other hostelers either by force or choice. Any activities leading to disturbances to other hostel inmates will be strictly prohibited and if notified to concerned authorities, it will be dealt with seriously. All students involved in such unwarranted activities will be immediately debarred from the hostel. Moreover, any legalities arising because of such activities of the students, the onus of responsibility and legal proceeding will be the responsibility of student(s).
- S. All students shall compulsorily follow security check(s) by appointed security personnel. /Wardens/Assistant wardens/any authorized person by Dean (if required).

ADDITIONS/AMENDMENTS: The administration shall reserve the right to modify or delete the rules as deemed fit from time to time.

11. PUNISHMENT:

If any of the rules started above are violated by any student or students and if any act against the interest of the property or inmates is resorted to, the student or students concerned shall be fined, suspended, rusticated and or dismissed by the Dean at his/her discretion.

Following disciplinary actions will be taken against the offence specified:

Particulars	Action
Submitting false documents	Blacklisted, Non-eligible in future, handingover The student to the police
Non-payment of fees	Cancelling the allotment.
Physical aggression/any type of violence.	Suspension for one month or more as per the Decision of warden.
Smoking, use of alcohol and narcotic prohibited substances.	Permanent expulsion from the hostel, Expulsion From the college.
Stealing	Permanent expulsion from the hotel.
Midnight parties /Gathering /New-year celebrations/get-together/any other celebrations, etc.	Suspension for one month or more as per the decision of warden. Compulsory fine of Rs. 2000/-per person involved in the activity.
Hosting an outsider / parents / relatives / any other person, etc (As per Clause.No.2 in General terms)	Permanent Expulsion from hostel.
Mutual exchange of room	Permanent expulsion/temporary Expulsion for a Term or more as per the decision of warden.
Ragging(As per DCI, New Delhi Guidelines)	Appropriate actionas per the clauses of DCI, New Delhi norms.
Personal Refrigeration, TV, Air conditioners (AC) / Induction cookers / water Heaters / other electronic devices are strictly prohibited in the hostel rooms/Corridors.	Expulsion from hotel for 2 terms or more as per the decision of warden. Additional charges will be levied against student after enquiry.

Wish you all a happy and peaceful stay at Hostels of GDC & H, Chhatrapati Sambhajnagar.

DEAN
Govt. Dental College & Hospital,
Chhatrapati Sambhajnagar.

DECLARATION: BY STUDENT & PARENTS for HOSTEL FACILITY
(To be filled Compulsory by all students irrespective of hostel allotments)

I, _____ is admitted for MDS course in the academic year _____ at Govt. Dental College, Chhatrapati Sambhajnagar (Maharashtra).

My parents/Legal guardian have gone through the SOP for hostel accommodation given in the admission manual at the time of Joining. We have clearly understood all the rules and regulations mentioned in SOP.

I hereby declare that I am suffering from _____ disease(s) and on treatment. I am receiving following _____ Drugs for my disease element since _____ days/Months/Years. I also declare that I am not hiding any information related to my health issues. ***(Put NA in fill in the blanks incase this para is not applicable)***

I and my parents/Legal guardian, hereby undertake and declare that, if hostel accommodation is allotted on my request, I will abide by all the rules and regulations mentioned in the SOP. If I break any rule mentioned thereof in the SOP, I will be liable for appropriate action.

Signature of Student with date

Name of Student: _____

Address: _____

Mobile Number: _____

Email address: _____

Signature of Parent/Legal guardian with date

Name of Parent/Legal Guardian: _____

Address: _____

Mobile Number: _____

Email address: _____

-----END of Hostel SOP-----