

GMERS MEDICAL COLLEGE, MORBI

Gibson Middle School, Railway Station Road, Morbi 363641





NO/GMERS/MCM/

Date:DD/MM/YYYY

INSTRUCTIONS FOR STUDENTS OF MBBS ADMISSION BATCH 2023-24

 Please report to the Student Section of GMERS Medical College, Morbi at below mentioned time.

 Morning : 10:00 am to 12:30 pm Afternoon: 02:30 pm to 04:30 pm

- Please bring the documents to be submitted at the time of reporting as per the checklist (Annexure - 1)
- Fill the Student information form at the time of reporting (Annexure 2)
- Fill the hostel requisition form to avail hostel facilities at the time of reporting (Annexure - 3)

The names of the contact person for respective queries are mentioned below.

- Reporting
 - 1. Bhatiya Hetal
 - 2. Bopaliya Krupa
 - Admission
 - 1. Dr. Hiren Sanghani
 - 2. Dr. Sanjay Vikani
 - Boys Hostel
 - 1. Dr. Vanraj Parmar
 - 2. Dr. Abhishek Godhani
 - **Girls Hostel**
 - 1. Dr. Dhara Kanani
 - 2. Dr. Komal Jivani

Annexure - 1 DOCUMENTS TO BE SUBMITTED AS PER CHECKLIST

Attested / Self Attested xerox (2 copies) of following documents

Sr.	Particulars	(√ /X)
1	Admission order	
2	HSC Mark Sheet	
3	SSC Mark Sheet	
4	NEET Mark Sheet	
5	Domicile Certificate, if applicable	
6	School Leaving / Transfer Certificate	
7	Migration Certificate, if applicable	
8	Caste Certificate (Other than General Category students)	
9	Non Creamy Layer Certificate (for SEBC Category)	
10	Free ship Card (For Reserve Category-if Applicable)	
11	Physical Disability Certificate (Only for PwD Category Students)	
12	Fitness Certificate	
13	EWS Certificate (Only for EWS category)	
14	Aadhaar Card	

Annexure - 2 STUDENT INFORMATION FORM

udent's Name :_	Recent					
ther's Name :_	SURNAME	FIRSTNAME	FATHER'S NA	Passport		
other's Name :						
ldress :						
				Filotograph		
ty /District	:	Piı	n-code	:		
nail id	:					
sidence Phone	:	St	udent Mobile	:		
ther's Occupation	:	Fa	ther's Mobile	:		
other's Occupation	:	Mo	other's Mobile	<u>:</u>		
ate of Birth	:	Gend	nder	:		
idhar Card No.	:	Blo	ood Group	: <u> </u>		
ace of Birth (As per	School Leaving Certi	ficate):		Caste:		
Imission Order No.:		Da	te of Admission	:		
				T. Danaantila.		
ET Roll No.:		NEET Score:	NEE	i Percentile:		
	I Merit No ·					
India/State Genera	l Merit No.:	All India/ Stat	e Category Merit I	No:		
India/State Genera	I Merit No.: rt. / MQ/NRI / AIQ	All India/ Stat		No:		
India/State Genera	l Merit No.:	All India/ Stat	e Category Merit I	No:		
India/State Genera Imission Quota: Gov Imission category: G	I Merit No.: rt. / MQ/NRI / AIQ	All India/ Stat Category: Gen/	e Category Merit I	No:		
India/State Genera Imission Quota: Gov Imission category: G	I Merit No.: vt. / MQ/NRI / AIQ Gen/EWS/SC/ST/SEE	All India/ Stat Category: Gen/	e Category Merit I	No:		
India/State Genera Imission Quota: Gov Imission category: G	I Merit No.: rt. / MQ/NRI / AIQ Gen/EWS/SC/ST/SEE rat/Others:	All India/ Stat Category: Gen/ BC Me	e Category Merit I EWS/ SC/ ST/ SE	No:		
India/State Genera Imission Quota: Gov Imission category: G thBoard:CBSE/Guja Theory Mark	I Merit No.: rt. / MQ/NRI / AIQ Gen/EWS/SC/ST/SEE rat/Others:	All India/ Stat Category: Gen/ BC Me	e Category Merit I EWS/ SC/ ST/ SE	No:		

Undertaking: The information provided by me in the Student Information form is true. The original admission order and fees receipt will be submitted by me at the time of joining GMERS Medical College, Morbi.

Student's Sign & date:_____ Parent's Sign & date:_____

<u>Annexure - 3</u> <u>HOSTEL REQUISITION FORM</u>

*NOTE: PLEASE FILL FOR	M IN CAPITAL LETTERS	Da	ate:
To, The Dean GMERS Medical Colle Morbi	ge		Recent Passport size
Subject: Application	Photograph		
Respected Sir,			Filotograph
I hereby request you to Medical College, Morb	• •	commodation on sharing basis	during my academic term at GMERS
Name	:SURNAME	FIRSTNAME	FATHEDIONAME
Basic Profile	SURNAME	FIRSTNAME	FATHER'SNAME
Father's Name	:		
Mother's Name	:		
Gender	: Male/Female	Year of Admission:	
Date of Birth	:/	Blood Group:	
Address	:		
City	:	_Pincode:	
Email Address	<u>:</u>		
Residence Phone	:	Self Mobile:	
Father's Mobile	:	Mother's Mobile:	
Father's Occupation:_		Mother's Occupation:	
Local Guardian Name:			
Local Guardian Contac	ot:		
Admission Details			
Date of Admission:	<u> </u>	_ ACPC Rank	:
Govt. Quota/ Manager	nent Quota/ NRI Quota/ A	I Quota	
General/EWS/SEBC/S	C/ST/PH/Other		
AIQ Rank :		NEET Marks :	

Financial Details Hostel Security Deposit Cash/ Cheque /DD No: Dated: Bank: Declaration I hereby declare that the information furnished is true to the best of my knowledge and solemnly undertake (promise) that I will strictly follow the rules and regulations of the hostel (copy attached), which are enforced from time to time and shall not involve in any ragging / strike / demonstration/unlawful activities against the institute or State throughout my studies in this Institute. If I am found involved in any such above said activities, I am fully aware that I will be expelled from the college and hostel with immediate effect. Date : _____ Signature of the student I fully agree with the declaration and undertaking given by my ward and assure that my ward will adhere to all the rules and regulations of the institute & hostel. I understand any violation/indiscipline of rules and regulations of the Institute or hostel may attract fine, expulsion, or both to my ward. I solemnly declare that details about my ward are true to the best of my knowledge. Signature of Parent/Guardian Date : _____ For Office Use Only

Reported for Hostel:_____ Hostel Block:_____ Room No.:____

Sign of Admin: Sign of Warden:

UG HOSTEL ROOM ALLOTMENT FORM

	_						
Batch:			Hostel Block:				
Room Type:			Hostel Room No:				
Furniture an	d Fixture	es provided in the	e Roor	n:			
	Sr. No. Description			Number			Common Area
	1.	Bed	0	1	2	3	
	2.	Table	0	1	2	3	
	3.	Chair	0	1	2	3	
	4.	Cupboard	0	1	2	3	
	5.	Fan	0	1	2	3	
	6.	Tube Light	0	1	2	3	
	7.	Night Lamp	0	1	2	3	
	8.	Outside Lamp	0	1	2	3	
Note: Commo	on facilitie	es available as Wa	ter Coo	oler, R.C). Plant,	etc.	
			Decla	ration:			
to be true. I a	agree tha	t if the above liste	ed item	s are fo	ound to	be dan	oom and have found naged or missing the deducted from my se
Date:/_			Signa	ture of	Applica	nt:	
		For	Office	Use On	lv		
Admin Executi	ve:	<u> </u>				: <u></u>	
Warden Nam							