



Uttar Pradesh University of Medical Sciences, Saifai, Etawah

(To be filled by the students, in their own hand writing)

APPLICATION FORM FOR UG (MBBS)

➔ Ragging is a serious offence that is totally prohibited in the University! ➔

CANDIDATE DETAIL

Counselling	NEET Roll No.	Gender	Religion	Category		NEET Rank		NEET Marks	
				Actual	Allotted	AIQ	State	Obtained	Total Fixed
15% All India Quota or 85% State Quota									

Willingness details (are you want to participate in next round of counselling): (for AIQ candidates)

Name of Student:

Mob.No.: E-Mail ID:

Date of Birth (DD/MM/YYYY):...../...../..... Caste under Category:

Place of Birth: Native State:.....

If Native State is Uttar Pradesh then time of living:.....

Parents Total Annual Income and Source of Income:

Permanent Address:

Post office:.....Tehsil:..... Thana:.....

Distt.:.....State:.....Pin Code:.....

Correspondence Address:

Distt.:.....State:.....Pin Code:.....

If Parents are Employed then Official Address:.....

Distt.:.....State:.....Pin Code:..... Mobile:

If Local Guardian available then Name & Address:.....

Distt.:.....State:.....Pin Code:..... Mobile:

Family Details:

Details	Name	Occupation	Mobile No./Whatsapp No.	Email ID
Father				
Mother				
Spouse				

Academic Information:

Examination	Year of Admission	Month & Year of Passing	Name of Board/ University	Name of College with Address	Roll No.	Marks Detail		Passing State
						Maximum	Obtained	
HIGH SCHOOL								
INTERMEDIATE						Physics :		
						Chemistry:		
						Biology :		
						English :		
OTHER								

-: DECLARATION :-

I above named, do hereby declare that the above information is true to the best of my knowledge and belief. Nothing has been concealed therein. If later on any information/my education/document are found to be false at any stage, my candidature will be liable to be rejected.

Date:...../...../.....

Signature of Parents/Guardian

Signature of Student



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CANDIDATE & DOCUMENTS VERIFICATION

Selection Made Through 1. All India Quota [] 2. State Quota [] Date of Reporting for Admission...../...../.....

NEET Roll No.: NEET Rank: Allotted Cata.:

Name of Student:.....

Mob. No.: E-Mail:

Aadhar No.: Identification Mark :.....

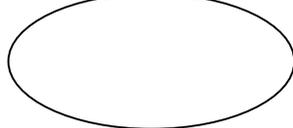
IMPRESSION



(Left Hand Thumb)



(Right Hand Thumb)



(Left Index Finger)



(Right Index Finger)



Signature of Student

SL.	REQUIRED ORIGINAL DOCUMENTS WITH TWO PHOTOCOPIES	(✓)/(*)
1.	Allotment Letter, Admit Card Result/Rank Letter of Qualifying Examination Online Registration Proof (only for UP state Counselling) Document Verification Slip (only for UP state Counselling)	
2.	High School & Intermediate Pass Mark sheets & Certificates	
3.	Other Examination Pass Mark sheets & Certificate	
4.	Transfer Certificate (If intermediate Passed from UP Board) or Migration Certificate	
5.	If required then Reservation certificate on format given in information brochure (OBC,SC,ST,EWS)	
6.	If required then Other Reservation certificate on format given in information brochure (NCC,PH, FF,EA)	
7.	Character Certificate issued by last educational institution	
8.	Aadhar Card, Copy of Bank Passbook	
9.	If Highschool/Intermediate or both examinations passed from other state then domicile certificate required on format given in NEET UP Counselling brochure (Only for those students who allotted through State Quota)	
10.	Affidavit on Rs.10/- (non judicial stamp paper) regarding GAP and Other	
11.	Affidavit on Rs.100/- (non judicial stamp paper) regarding service bond by students	
12.	Two passport size colour combined photographs of student with parents	
13.	Approx 06 photographs of student as on admit card	

:: DECLARATION ::

I above named, do hereby declare that the above documents are correct and genuine. Nothing has been concealed therein. If later on any document is found to be false at any stage, my candidature will be liable to be rejected.

Signature of Student

Signature of Dealing Asstt.

Signature of Verification authority

FEE DETAIL

(As per G.O. No. 2240/71-3-10-328/91 dated 20/08/2010)		Received Receipt No.: Date:/...../..... Amount Rs.: The Fee deposited by candidate is correct. Signature of Account deptt. (Concerned)
Heads	Amount	
Tuition Fee	Rs.18000.00 Annual (50% for Reserve cata.)	
Other Fee	Rs. 4000.00 Annual	
Development Fee	Rs. 2000.00 Annual	
Admission Fee	Rs. 2000.00 Only at the time of admission	
Caution Money	Rs. 10000.00 only at the time of admission (Refundable)	
Hostel Fee	Rs. 3600.00 Annual (for single seated) Rs. 2400.00 Annual (for double seated)	
Electric Fee	Rs. 2400.00 Annual	

ORDER OF THE DEAN - Admission to above course granted

Dean (Medical)



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सूचना

आपके पुत्र/पुत्री/सम्बन्धी द्वारा उत्तर प्रदेश आयुर्विज्ञान विश्वविद्यालय, सैफई, इटावा में एमबीबीएस पाठ्यक्रम में प्रवेश प्राप्ति की महती सफलता के लिए आप बधाई के पात्र हैं। यह आपके प्रेरणादायी अथक प्रयास, जो इस लक्ष्य को प्राप्त करने के लिए किये गये, के फलस्वरूप ही सम्भव हो सका। आप अवश्य चाहते होंगे कि वह इस चिकित्सा विश्वविद्यालय की महान परम्पराओं को आगे बढ़ाने में सफल हो। इसके लिए हमें आपके सहयोग की आवश्यकता है।

आप समय समय पर परीक्षाओं में छात्र के प्राप्तांकों तथा कक्षाओं में उपस्थिति की सूचना विभागाध्यक्षों/ विश्वविद्यालय की वेबसाइट से अवश्य प्राप्त करते रहें। यदि वे आन्तरिक परीक्षाओं में अच्छा प्रदर्शन नहीं कर रहे हैं, तो कारण जानने का प्रयास करें। विश्वविद्यालय का शैक्षणिक कैलेंडर विश्वविद्यालय की वेबसाइट पर उपलब्ध है। कृपया उस देख लें तथा यदि छात्र बिना किसी उचित कारण घर पर रहें, तो आप उनका उचित मार्गदर्शन करते हुए कक्षाओं में उपस्थित रहने को प्रेरित करें। उनके भविष्य को उज्ज्वल और सुरक्षित बनाने के इस यत्न में सकारात्मक योगदान प्रदान करें। आपके प्रयासों से ही वे यहाँ तक पहुँचे हैं और आगे भी सफल होंगे।

कृपया अपने पुत्र/पुत्री/सम्बन्धी के लिए एक स्थानीय अभिभावक के विषय में अवश्य सूचित करें।

Undertaking by the Student

IS/o/D/o solemnly affirm that I shall maintain good conduct and behavior throughout my stay in the university and shall not indulge in any type of ragging undesirable or anti-social activities. I also affirm that I shall maintain discipline and shall abide by the provision of Act, Ordinances, Discipline, Regulations and other instructions of the university as in force from time to time. In case of breach of this undertaking, I shall be liable to be expelled or rusticated or otherwise dealt with accordingly.

Signature of Student

Undertaking by Guardian/Parents of the Student

I hereby assure and undertake that my son/daughter/ward being admitted to the Uttar Pradesh University of Medical Sciences, Saifai, Etawah shall maintain good conduct and behavior at all times during his/her stay and he/she shall render himself/herself liable to be expelled or rusticated or being dealt with according to the rules and provisions.

Signature of Parents/Guardian

Ragging is a serious offence that is totally prohibited in the medical college or institution. Anyone found guilty of ragging or abetting ragging, whether actively or passively, or being a part of a conspiracy to promote ragging, is liable to be punished in accordance with these regulations as well as under the provisions of any penal law for the time being in force;

- **Actions that may constitute ragging:** The following actions shall be included but not limited to those that may constitute ragging, namely:-
- any conduct by any student or students whether by words spoken or written or by an act which has the effect of teasing, treating or handling with rudeness a fresher or any other student;
 - indulging in rowdy or undisciplined activities by any student or students which causes or is likely to cause annoyance, hardship, physical or psychological harm or to raise fear or apprehension thereof in any fresher or any other student;
 - asking any student to do any act which such the student will not in the ordinary course do and which has the effect of causing or generating a sense of shame, or torment or embarrassment so as to adversely affect the physique or psyche of such fresher or any other student;
 - any act by a senior student that prevents, disrupts or disturbs the regular academic activity of any other student or a fresher;
 - exploiting the services of a fresher or any other student for completing the academic tasks assigned to an individual or a group of students;
 - any act of financial extortion or forceful expenditure burden put on a fresher or any other student by students;
 - any act of physical abuse including all variants of it, such as, sexual abuse, homosexual assaults, stripping, forcing obscene and lewd acts, gestures, causing bodily harm or any other danger to health or person;
 - any act or abuse by spoken words, emails, post, snail-mails, blogs, public insults which would also include deriving perverted pleasure, vicarious or sadistic thrill from actively or passively participating in the discomfiture to fresher or any other student;
 - any act of physical or mental abuse (including bullying and exclusion) targeted at another student (fresher or otherwise) on the ground of colour, race, religion, caste, ethnicity, gender (including transgender), sexual orientation, appearance, nationality, regional origins, linguistic identity, place of birth, place of residence or economic background;
 - any act that undermines human dignity and respect through humiliation or otherwise;
 - any act that affects the mental health and self-confidence of a fresher or any other student with or without an intent to derive a sadistic pleasure or showing off power, authority or superiority by a student over any fresher or any other student;
 - any other act not explicitly mentioned above but otherwise construed as an act of ragging in the letter and spirit of the definition for ragging as provided under regulations 3 and 4.
- **Institutional Administrative and Penal Actions:** The nature of punitive actions that may be decided shall include the following, but shall not be limited to one or more of these actions that may be imposed, as deemed fit, namely:-
- Suspension from attending classes and academic privileges;
 - Withholding or withdrawing scholarship or fellowship and other benefits;
 - Debarring from appearing in any test or examination or other evaluation process;
 - Withholding results;
 - Debarring from attending conferences, and other academic programmes;
 - Debarring from representing the institution in any regional, national or international meet, tournament, youth festival, etc.;
 - Suspension or expulsion from the hostel;
 - Imposition of a fine ranging from twenty-five thousand rupees to one lakh rupees;
 - Cancellation of admission;
 - Rustication from the medical college or institution for a period ranging from one to four semesters;
 - Expulsion from the medical colleges or institutions and consequent debarring from admission to any other institution for a specified period.

Date:...../...../20.....

Signature of Parent/Guardian of Student

Signature of Student



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कक्षाओं में नियमित उपस्थिति एवं अन्य के सम्बन्ध में छात्र/छात्रा की घोषणा

मैं एमबीबीएस पाठ्यक्रम में प्रवेश के समय अपने भविष्य को ध्यान में रखते हुए निम्न घोषणा करता/करती हूँ—

1. मैं एमबीबीएस पाठ्यक्रम में प्रवेश के पश्चात लगातार कक्षाओं में उपस्थित रहूँगा/रहूँगी। निर्धारित अवकाश के अतिरिक्त मैं अन्य किसी भी प्रकार से कक्षाओं में स्वेच्छा से अनुपस्थित नहीं रहूँगा/रहूँगी। प्रवेश के समय मुझे अवगत कराया गया है कि अकारण ही कक्षाओं में अनुपस्थित रहने से मेरी उपस्थिति एम0सी0आई0 के मानकों से कम हो जायेगी, जिससे मैं परीक्षाओं में भाग लेने से भी रोक दिया जाऊँगा/जाऊँगी और मेरा सत्र भी आगे बढ़ जायेगा। इसके लिए स्वयं मैं ही उत्तरदायी होऊँगा/होऊँगी। मुझे यह भी अवगत कराया गया है कि विश्वविद्यालय की वेबसाईट (www.upums.ac.in) पर प्रत्येक तीन माह में मेरी उपस्थिति प्रदर्शित की जायेगी।
2. मुझे ज्ञात है कि मेरा वार्षिक टीचिंग कार्यक्रम एवं वार्षिक शैक्षणिक कैलेंडर विश्वविद्यालय की वेबसाईट पर उपलब्ध रहेगा। टीचिंग कार्यक्रम के अनुसार मेरी कक्षाएं आयोजित होंगी तथा कैलेंडर में अंकित तिथियों के अनुसार ही मेरी आन्तरिक एवं विश्वविद्यालय स्तरीय परीक्षाएं आयोजित होंगी और कैलेंडर में अंकित तिथियों में ही मुझे अवकाश अनुमन्य होगा। स्वीकृत अवकाश के अतिरिक्त यदि मैं कक्षाओं में नहीं जाता, तो मेरी उपस्थिति मानकों से कम रहेगी, जिसके कारण मैं विश्वविद्यालय स्तरीय परीक्षाओं हेतु पात्र नहीं होऊँगा।
3. एम0सी0आई0 के नवीन क्यूरीकुलम के अनुसार यदि निर्धारित समयावधि में मैं परीक्षाओं को उत्तीर्ण नहीं कर पाता/पाती अथवा पाठ्यक्रम पूर्ण नहीं कर पाता/पाती, तो मुझे क्यूरीकुलम के अनुसार एमबीबीएस पाठ्यक्रम के योग्य नहीं माना जायेगा और क्यूरीकुलम के अनुसार जो भी निर्णय लिया जायेगा, वह मुझे मान्य होगा। इसके लिए स्वयं मैं ही जिम्मेदार एवं उत्तरदायी होऊँगा/होऊँगी।
4. मैं विश्वविद्यालय विरोधी गतिविधियों में सम्मिलित नहीं हाऊँगा/होऊँगी। विश्वविद्यालय के नियमों एवं समय-समय पर दिये जाने वाले निर्देशों/आदेशों का पालन करूँगा/करूँगी। मैं छात्रावासों के नियमों के अनुसार छात्रावास में निवास करूँगा/करूँगी। मैं छात्रावास एवं विश्वविद्यालय की किसी भी सम्पत्ति को क्षति नहीं पहुँचाऊँगा/पहुँचाऊँगी। यदि मैं विश्वविद्यालय के नियमों का पालन नहीं करता/करती, विश्वविद्यालय की सम्पत्ति को क्षति पहुँचाता/पहुँचाती हूँ, तो विश्वविद्यालय द्वारा जो भी दण्ड/अर्थदण्ड मुझ पर लगाया जायेगा, उसे मैं पूर्ण करूँगा/करूँगी।
5. मैं विश्वविद्यालय के संकाय सदस्य/अधिकारी/कर्मचारी, कनिष्ठ/वरिष्ठ छात्र/छात्रा आदि के साथ झगड़ा/दुर्व्यवहार अथवा अन्य कोई ऐसा कार्य जो विश्वविद्यालय के नियमानुकूल नहीं होगा अथवा रैगिंग की श्रेणी में आता होगा, नहीं करूँगा/करूँगी। यदि ऐसे किसी भी कार्य में मेरी संलिप्तता परिलक्षित होती है, तो मेरे विरुद्ध विश्वविद्यालय द्वारा जो कार्यवाही की जायेगी, वह मुझे मान्य होगी।

छात्र/छात्रा का नाम

हस्ताक्षर

छात्र/छात्रा की उपरोक्त घोषणा के कम में छात्र/छात्रा के माता/पिता/अभिभावक की घोषणा

मेरे पुत्र/पुत्री द्वारा उपरोक्तानुसार की गयी घोषणा से मैं पूर्णतः सहमत हूँ। उपरोक्त के साथ ही मैं भी निम्नानुसार घोषणा करता/करती हूँ कि—

1. मेरा पुत्र/पुत्री नियमित रूप से कक्षाओं में उपस्थित होगा। वह बिना अवकाश के विश्वविद्यालय से बाहर नहीं जायेगा/जायेगी। यदि वह बिना अवकाश के अपने घर आयेंगे अथवा विश्वविद्यालय से बाहर अन्यत्र जायेंगे, तो मैं विश्वविद्यालय से दूरभाष/ई-मेल (deanrimsnr@gmail.com) द्वारा समय-समय पर इसकी पुष्टि करता रहूँगा।
2. मुझे यह भी ज्ञात है कि मेरे पुत्र/पुत्री का वार्षिक टीचिंग कार्यक्रम एवं वार्षिक शैक्षणिक कैलेंडर विश्वविद्यालय की वेबसाईट पर उपलब्ध है। टीचिंग कार्यक्रम के अनुसार मेरे पुत्र/पुत्री का अध्ययन जारी रहेगा तथा कैलेंडर में अंकित तिथियों के अनुसार ही मेरे पुत्र/पुत्री की आन्तरिक एवं विश्वविद्यालय स्तरीय परीक्षाएं आयोजित होंगी और कैलेंडर में अंकित तिथियों में ही अवकाश स्वीकृत किये जायेंगे। स्वीकृत अवकाश के अतिरिक्त यदि वह कक्षाओं में नहीं जाते, तो उनकी उपस्थिति मानकों से कम रहेगी, जिसके कारण वह विश्वविद्यालय स्तरीय परीक्षाओं हेतु पात्र नहीं होंगे।
3. एम0सी0आई0 के नवीन क्यूरीकुलम के अनुसार यदि निर्धारित समयावधि में मेरा पुत्र/पुत्री परीक्षाओं को उत्तीर्ण नहीं कर पाता/पाती अथवा निर्धारित समय में पाठ्यक्रम पूर्ण नहीं कर पाता/पाती, तो वह क्यूरीकुलम के अनुसार एमबीबीएस पाठ्यक्रम के योग्य नहीं माना जायेगा/मानी जायेगी और नवीन क्यूरीकुलम के अनुसार जो भी निर्णय लिया जायेगा, वह मुझे मान्य होगा। इसके लिए मेरा पुत्र/पुत्री एवं मैं ही जिम्मेदार एवं उत्तरदायी होऊँगा/होऊँगी।
4. विश्वविद्यालय द्वारा वेबसाईट (www.upums.ac.in) पर प्रत्येक तीन माह में मेरे पुत्र/पुत्री की जो उपस्थिति प्रदर्शित की जायेगी। मैं स्वयं ही उसका अवलोकन करूँगा/करूँगी। यदि कम उपस्थिति होती है, तो इसके लिए मैं अपने पुत्र/पुत्री को नियमित कक्षाओं में उपस्थित होने हेतु निर्देशित करूँगा/करूँगी। इसके पश्चात भी यदि वह कम उपस्थिति के कारण परीक्षाओं में भाग लेने से रोका जाता है, तो इसके लिए मेरा पुत्र/पुत्री एवं मैं ही जिम्मेदार होऊँगा/होऊँगी।
5. मेरा पुत्र/पुत्री विश्वविद्यालय विरोधी किसी भी गतिविधि में शामिल नहीं होगा/होगी। वह विश्वविद्यालय के सभी गुरुजनों, अधिकारियों, कर्मचारियों, सहपाठियों, कनिष्ठ/वरिष्ठ छात्र/छात्राओं से झगड़ा/दुर्व्यवहार/रैगिंग नहीं करेगा/करेगी। उपरोक्त किसी भी गतिविधि में मेरे/मेरी पुत्र/पुत्री की संलिप्तता परिलक्षित होती है, तो विश्वविद्यालय द्वारा की जाने वाली कार्यवाही मुझे मान्य होगी।

छात्र/छात्रा के माता/पिता/अभिभावक का नाम

हस्ताक्षर



Uttar Pradesh University of Medical Sciences, Saifai, Etawah

(To be filled by the students, in their own hand writing)

APPLICATION FORM FOR UG (MBBS)

➔ **Ragging is a serious offence that is totally prohibited in the University** ←

➔ FORM I

:: UNDERTAKING BY THE STUDENT ::

I Son/Daughter of Mr./Mrs./Ms.
admitted to the course of (Name of Course) with admission no. at Uttar Pradesh University of Medical Sciences, Saifai, Etawah affiliated to Uttar Pradesh University of Medical Sciences, Saifai, Etawah have received a copy of the National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, 2021 (hereinafter referred to as the said regulations).

2. I have carefully read and fully understood the provisions in the said regulations.
3. I have particularly perused the provisions of regulations 3 and 4 of the said regulations and have fully understood what constitutes "ragging".
4. I have also in particular perused the provisions of Chapter IV and read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
5. I hereby undertake that—
 - (i) I will not indulge in any behaviour or act that may come under the definition of ragging as may be constituted under regulation 3 of the said regulations;
 - (ii) I will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulation 3 of the said regulations;
 - (iii) I will not hurt anyone physically or psychologically or cause any other harm.
6. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.
7. I also declare that I have never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled / withdrawn.

Signed on this the day of month of year.

Signature

Name:

Tel/ Mobile No:

Address:

Signature of Witness 1: Signature of Witness 2:

(Name of Witness 1): (Name of Witness 2):

Address: Address:

➔ FORM II

:: UNDERTAKING BY PARENT OF THE CANDIDATE/ STUDENT ::

I Father/ Mother/ Guardian of Mr./Mrs./Ms.
admitted to the course of (Name of Course) with admission no. at Uttar Pradesh University of Medical Sciences, Saifai, Etawah affiliated to Uttar Pradesh University of Medical Sciences, Saifai, Etawah have received a copy of the National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, 2021 (hereinafter referred to as the said regulations).

2. I have carefully read and fully understood the provisions in the said regulations.
3. I have particularly perused the provisions of regulations 3 and 4 of the said regulations and have fully understood what constitutes "ragging".
4. I have also in particular perused the provisions of Chapter IV and read and understood the administrative and penal actions that may be taken against my son/ daughter/ ward in case he/ she is found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
5. I hereby undertake that my son/ daughter/ ward —
 - (i) will not indulge in any behaviour or act that may come under the definition of ragging as may be constituted under regulation 3 and 4 of the said regulations;
 - (ii) will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulation 3 and 4 of the said regulations;
 - (iii) will not hurt anyone physically or psychologically or cause any other harm.
6. I hereby agree that if my son/ daughter/ ward is found guilty of any aspect of ragging, he/ she may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.
7. I also declare that he/ she has never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, his/ her admission is liable to be cancelled / withdrawn.

Signed on this the day of month of year.

Signature

Name:

Tel/ Mobile No:

Address:

Signature of Witness 1: Signature of Witness 2:

(Name of Witness 1): (Name of Witness 2):

Address: Address: