



**APPLICATION FORM FOR FMG INTERNSHIP (MBBS)**

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

**CANDIDATE DETAIL**

| Roll No. | Rank | Gender | Religion | Category |
|----------|------|--------|----------|----------|
|          |      |        |          |          |

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  |      |            |                         |          |
| Other   |      |            |                         |          |

**Academic Information:**

| Examination  | Month & Year of Passing | Name of Board/ University | Name of College with Address | Roll No. |
|--------------|-------------------------|---------------------------|------------------------------|----------|
| HIGH SCHOOL  |                         |                           |                              |          |
| INTERMEDIATE |                         |                           |                              |          |
| MBBS         |                         |                           |                              |          |
| 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 Student**



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**CANDIDATE & DOCUMENTS VERIFICATION**

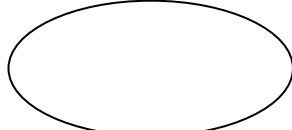
Date of Reporting :...../...../.....

Name of Student:.....

Mob. No.: ..... E-Mail: .....

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

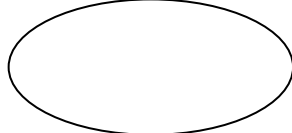
**IMPRESSION**



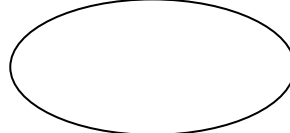
(Left Hand Thumb)



(Right Hand Thumb)



(Left Index Finger)



(Right Index Finger)



**Signature of Student**

| SL. | REQUIRED DOCUMENTS  | (✓)/(✗) |
|-----|---|---------|
| 1.  | Allotment Letter  |         |
| 2.  | Provisional Registration Certificate (UP State Medical Council) |         |
| 3.  | High School & Intermediate Pass Mark sheets & Certificates      |         |
| 4.  | Other Examination Pass Mark sheets & Certificate (If required)  |         |
| 5.  | MBBS Documents (Marksheet & Degree)                             |         |
| 6.  | Screening Test Pass Certificate                                 |         |
| 7.  | Eligibility Certificate   |         |
| 8.  | Character Certificate issued by last educational institution    |         |
| 9.  | Copy of Aadhar Card   |         |
| 10. | Copy of Passport  |         |

**::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**

**छात्र/छात्रा की घोषणा**

मैं अपने भविष्य को ध्यान में रखते हुए निम्न घोषणा करता/करती हूँ—

- मैं विश्वविद्यालय विरोधी गतिविधियों में सम्मिलित नहीं होऊँगा/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।
- 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 के हस्ताक्षर**



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**→ 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: .....

**Affidavit on Rs. 10.00 Stamp paper**

मैं ..... पुत्र/पुत्री श्री .....  
निवासी .....

शपथपूर्वक घोषणा करता/करती हूँ कि –

1. हाईस्कूल प्रमाण पत्र के अनुसार मेरी जन्मतिथि ...../...../..... है।
2. मैंने वर्ष ..... में ..... परीक्षा .....  
..... (बोर्ड/विश्वविद्यालय का नाम) उत्तीर्ण की है।
3. मैं शपथपूर्वक यह भी घोषणा करता/करती हूँ कि मुझे ज्ञात है कि मुझे निर्धारित अवधि में इन्टर्नशिप प्रशिक्षण पूर्ण करना होगा।
4. मैं शपथपूर्वक यह भी घोषणा करता/करती हूँ कि मैं विश्वविद्यालय के समस्त निर्देशों, नियमों, अनुशासन का पालन करूँगा/करूँगी। मैं समय से शुल्क जमा करूँगा/करूँगी तथा विश्वविद्यालय विरोधी किसी भी गतिविधि में संलिप्त नहीं होऊँगा/होऊँगी। यदि मैं ऐसा नहीं करता/करती, तो विश्वविद्यालय द्वारा मेरे विरुद्ध जो भी कार्यवाही की जायेगी वह मुझे मान्य होगी।
5. मैं शपथपूर्वक यह भी घोषणा करता/करती हूँ कि इस विश्वविद्यालय में इन्टर्नशिप प्रशिक्षण ज्वाइन करते समय मेरे द्वारा प्रस्तुत समस्त प्रमाण पत्र/अभिलेख/मेरा विवरण/पता पूर्णतया सत्य है। यदि उक्त में कोई त्रुटि पायी जाती है अथवा सत्यता की पुष्टि नहीं होती अथवा अभिलेख गलत पाया/पाये जाता/जाते हैं, तो मेरा अभ्यर्थन निरस्त कर दिया जाये।

मेरे द्वारा की गयी उक्त घोषणाएं पूर्णतया सत्य हैं।

शपथकर्ता के हस्ताक्षर

मोबाईल नम्बर—

ईमेल आई.डी.—