

# GOVERNMENT MEDICAL COLLEGE, HINGOLI, MAHARASHTRA.



Welcomes....

MBBS Students Joining in the Academic Year 2025-2026

Concern Persons in Admission Cell: -

Dr. Sudha Karadkhedkar, HOD of Physiology Mob. No. 9970071882

Mr. Sainath Shinde, Senior Assistant, Academic Section

Mob. No. 8668245428, 8623070636

(Contact between 10:00 to 5:45 pm only)

**STUDENTS AND PARENTS ARE REQUESTED TO CALL ONLY ON ABOVE  
NUMBER REGARDING ANY INFORMATION**

**FOR ALL INDIA/STATE QUOTA STUDENTS**

## NOTIFICATION (For NEET UG-2025 Admissions)

All the selected students of NEET-UG-2025 allotted seat at Government Medical College, Hingoli (M.S.) should follow below instructions and accordingly report with all details required for admission process.

1. Download & print this PDF file. **READ ALL DETAILS CAREFULLY**
2. Print and fill 2 copies of Application Form & Candidate information.
3. Bring at least 6 passport size colour photographs.
4. Print and fill 3 copies of Admission Office Order.
5. Bring Medical Fitness Certificate **ONLY** in the prescribed format as per given annexure H.
6. All original documents enlisted in the CHECKLIST **with two sets of SELF ATTESTED photocopies** of all original documents.
7. Soft copies of all original Documents (**Individually Scanned in PDF format only**) are compulsory required during admission (arrange as per given checklist)
8. Student should scan document properly through computer scanner **ONLY (up to Size 300 KB Only)**. (Strictly Do not use mobile scanner). Individual Original Documents should be scanned and **renamed** appropriately. This submission will be mandatory to be submitted **ONLY on pen drive**.  
 {How to rename scanned file: Example- Nationality certificate after scanning should be renamed as: Nationality Certificate-Name of the student}  
 Prepare Folder and **rename it with Name of the student**, keep all scan documents in this folder for submission during admission.
9. Students to note that the Demand Drafts (D.D.) of desired Fees should not have any error/spelling mistakes in the name of D.D. desired. Such DD will not be accepted. Cash/Cheque will NOT be accepted. (**ANNEXURE-1**)  
**#Candidates should write their Full name and Mobile number on the back side of each DD.**
10. Other Letters/undertakings if required will be taken at the time of admission if permissible within the rules thereof.
11. 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 admission process.
12. **Students are advised to read details of admission process in information brochure/FAQs, other notifications available on NMC website (MCC) & for state admissions (Maharashtra state) on state commissioner admission cell official website.**
13. **The institute is responsible ONLY for admissions; students are advised to check official websites for any queries, updates and notifications regarding state/AI admission rounds. Students are strictly advised NOT TO EDIT/MODIFY ANY FORMATS. All formats should be filled by student in his/her own handwriting.**
13. **Candidate should report between 09.00 am to 04.00 pm.**
14. Submit all documents in a secured **button folder file ONLY** like shown below:

**Sd/-  
DEAN  
Govt. Medical College, Hingoli**

## Check List (for Original Certificates & 2 photocopies)

### MANDATORY

- 01) Identity Card Xerox (Aadhar Card, PAN card)
- 02) Nationality Certificate & Domicile Certificate
- 03) S.S.C. Passing Certificate (for equivalent for Date of Birth)
- 04) S.S.C. Marksheet
- 05) H.S.C. Marksheet
- 06) Admit Card (NEET- UG-2025)
- 07) Provisional Selection Letter (NEET- UG- 2025)
- 08) Physical/Medical Fitness Certificate (in prescribed format)
- 09) Copy of NEET Application form 2025
- 10) NEET Result 2025-26/Score Card / Marksheet
- 11) Rank Letter (For All India)
- 12) Transfer Certificate/Leaving Certificate (if applicable)

If **APPLICABLE** (All Certificates should in the prescribed format as specified by MCC/State CET Cell, Mumbai)

- 13) Caste Certificate.
- 14) Caste Validity Certificate.
- 15) Non-Creamy Layer Certificate Valid Up to- 31.03.2026. (NT1, NT2, NT3, OBC, Including SBC, SEBC, EWS)
- 16) Migration Certificate.
- 17) Gap Certificate
- 18) Person with Disability Certificate (PWD)
- 19) Hilly Area Certificate (Parent Domicile Certificate., Class 10<sup>th</sup> or 12<sup>th</sup> from School leaving certificate.)
- 20) Ex-Servicemen Certificate, actual service certificate
- 21) Domicile Maharashtra Certificate of Defence Person
- 22) MKB Dispute area certificate, Mother tongue certificate
- 23) Eligibility certificate for EWS for year 2025-26
- 24) Orphan Certificate
- 25) In-Service Candidate for Necessary Documents
- 26) All required certificates mentioning the claimed reservations by candidates.
- 27) All original certificates need to scan in pen drive. (Single PDF file less than 300 kb size)
- 28) Scan copy of student current passport size photo in jpeg format less than 300 kb size
- 29) Scan copy of student signature

**Name & Contact No. of Concern Persons in Admission Cell: -**

Dr. Sudha Karadkhedkar,

Head of the department

Department of Physiology - 9970071882

**Mr. Sainath Shinde, Senior Assistant, Academic Section- 8668245428, 8623070636**



**GOVT. MEDICAL COLLEGE, HINGOLI**  
**ADMISSION FOR THE YEAR 2025-26**  
**STUDENT INFORMATION**

01	Name of the Student as mentioned on HSC Marksheet (in Capital)	
	Guardian / Father's Full Name	
	Name of Mother	
	Full Name of the Candidate in Devanagari (Marathi/Hindi)	
02	Residential Address with PIN code	
	Mobile No. of Student	
	Mobile No. of Parent	
03	E-mail Address of Student	
	E-mail Address of Parent	
04	a) Date of Birth	
	b) Place of Birth	
05	Aadhar No.	
06	Gender (Male /Female)	
07	Marital Status (Married/Unmarried)	
08	Date of Admission	/ /2025
09	a) Category	
	b) Caste	
	c) Sub-Caste	
	Category of Admission	
10	Non-Creamy layer Certificate valid up to 31 March 2026	Yes/ No/Not Applicable
11	Domicile State (belongs to which state)	
12	Allotment Date	
13	Admission Date at College	

Academic Record		
14	S.S.C. Year of Passing:	
	Name of the HSC/12 <sup>th</sup> Board	
	Marks Obtained in H.S.C. (10+2)	
	(E) English: Marks Obtained	/100
	(P) Physics: Marks Obtained	/100
	(C) Chemistry: Marks Obtained	/100
	(B) Biology: Marks Obtained	/100
	Total marks (Phys + Chem +Bio)	/300 (P+C+B)
	NEET-UG-2025 Roll No.	
	NEET-UG-2025 Marks	/720
	NEET-UG-2025 AIR No.	
	Name of Board in HSC Exam	
15	Blood Group	
	Mark of Identification (two)	1) 2)
16	Guardian/Father's Occupation	
17	*Willingness about organ donation after Accidental Death.	Yes / No
18	Tuition Fees Demand Draft Bank Name: -	D.D. No.                      of Rs.  Dt.     /     /2025
	Other Fees Bank Name: -	D.D. No.                      of Rs.  Dt.     /     /2025

\* As per Maharashtra University of Health Sciences eligibility form.

**Date:**         /         /2025

**Place: Hingoli**

**Signature of Candidate**

**(Certificate in lieu of Caste Validity certificate for AIQ Students of SC/ST/OBC  
Categories)**

**ANNEXURE**

Office of the.....

.....

Outward No. :-

Date:-

**TO WHOMSOEVER IT MAY CONCERN**

This is to certify that, the Cast 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 Cast Validity Certificate in  
..... State.

**Office seal / Stamp**

**Signature of Tahsildar/ Magistrate /Issuing Authority**

**GAP CERTIFICATE FOR RETENTION AT GOVERNMENT MEDICAL COLLEGE,  
HINGOLI**

**ANNEXURE**

**SELF DECLARATION**

I..... Son / Daughter  
of.....aged.....occupation

.....  
resident of ..... with UID  
No.....

Hereby declare 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.....

**UNDERTAKING**  
**NEET- UG ADMISSION- 2025-26**  
**(Online Admission Process)**  
**ONLY FOR ALL INDIA CANDIDATES**

I the undersigned hereby confirm that the data submitted during joining (1<sup>st</sup> /2<sup>nd</sup>/subsequent rounds) for MBBS 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.:



<b>Two DDs</b>	<b>FOR ALL INDIA QUOTA/GOI STUDENTS</b>  First DD of Rs. 1,52,100=00 in favor of DEAN, Government Medical College, Hingoli Second DD of Rs. 11,510=00 in favor of DEAN, Government Medical College, Hingoli
<b>Two DDs</b>	<b>FOR MAHARASHTRA STATE OPEN CATEGORY STUDENTS MALE/FEMALE (WITH INCOME MORE THAN 8 LAKHS)</b>  First DD of Rs. 1,52,100=00 in favor of DEAN, Government Medical College, Hingoli Second DD of Rs. 11,510=00 in favor of DEAN, Government Medical College, Hingoli
<b>Two DDs</b>	<b>FOR MAHARASHTRA STATE QUOTA STUDENTS</b> <b>1. OPEN &amp; EWS (WITH INCOME LESS THAN 8 LAKHS)</b> <b>2. OBC (INCLUDING SBC) &amp; SEBC CATEGORY (WITH NCL) (FOR BOYS)</b>  First DD of Rs. 76,050=00 in favor of DEAN, Government Medical College, Hingoli Second DD of Rs. 11,510/- in favor of DEAN, Government Medical College, Hingoli
<b>One DD</b>	<b>FOR MAHARASHTRA STATE QUOTA STUDENTS</b> <b>1. OPEN &amp; EWS (WITH INCOME LESS THAN 8 LAKHS)</b> <b>2. OBC (INCLUDING SBC) &amp; SEBC CATEGORY (WITH NCL) (FOR GIRLS)</b>  One DD of Rs. 11,510/- in favor of DEAN, Government Medical College, Hingoli
<b>One DD</b>	<b>FOR MAHARASHTRA STATE QUOTA RESERVE CATEGORY (VJ, NT) MALE/FEMALE (WITH NON-CREAMY LAYER CERTIFICATE)</b>  One DD of Rs. 11,510/- in favor of DEAN, Government Medical College, Hingoli
<b>One DD</b>	<b>FOR MAHARASHTRA STATE QUOTA RESERVE CATEGORY SC &amp; ST</b>  One DD of Rs. 11,510/- in favor of DEAN, Government Medical College, Hingoli
<b>Admission fees of Rs. 1500/- (Non-refundable) will have to Pay in Cash at the time of Admission (For all Students)</b>	

**FEES TO BE PAID AFTEER FINAL ROUND**  
(Separate Circular will be issued in due Course)

Students Council Fees- Rs. 5000/- (DD in Favor of Student Council, Government Medical College, Hingoli)

**(Separate Circular will be issued in due course & Amount change in case of revision of less by University)**

\* Students desirous of availing Amartya Shiksha Yojna Insurance Scheme shall submit demand draft of any Nationalized Bank of **Rs.797/-** in name of National Insurance Co. Ltd. payable at Kolhapur at end of admission process

\*\* As Hostel facility is not available for 1<sup>st</sup> year Students. Hostel fees have not shown in above table. Hostel fees will be applicable after allotted of Hostel to students.

**GOVERNMENT MEDICAL COLLEGE, HINGOLI.****Document Holding Certificate**

Date: / /2025.

Received all Original Documents From ..... for 1<sup>st</sup> MBBS admission through NEET-2025 exam in G.M.C. Hingoli under All India Quota/State Quota / GOI Quota (2025-26) as follows - Category \_\_\_\_\_ Allotted Quota \_\_\_\_\_

Sr. No	List of Original Documents	Available YES/NO			
01	Photo Identity Proof (Aadhar Card)				
02	Voter ID <b>OR</b> ANNEXURE - C				
03	Nationality and Domicile Certificate / Valid Indian Passport				
04	S.S.C. Passing certificate (Date of Birth Proof)				
05	H.S.C Mark sheet				
06	Admit Card of NEET 2025-26				
07	NEET 2025 Mark sheet				
08	Selection Letter MCC / MAHACET / GOI				
09	Caste certificate				
10	Caste Validity certificate				
11	Non-creamy layer certificate valid up to 31/03/2026 (For VJ, NT -1,2,3 and OBC, SBC)				
12	College Leaving Certificate (LC/TC)				
13	Physical Fitness Certificate				
14	Migration Certificate (If Applicable)				
15	Gap certificate. (If Applicable)				
16	Defense Certificate (Certificate signed by Authority who is authorized to issue such certificate or from Zilla Sainik Board) & Domicile Certificate of Parent for D-1 and D-2 quota Transfer Order of Parent for D-3 Quota				
17	Person with Disability Certificate				
18	EWS Certificate – For the year 2025-26				
19	Hilly Area Certificate, SSC Certificate of Student & Domicile Certificate of Parent				
20	Undertaking Form / Joint Undertaking				
21	Service Bond				
22	Income Certificate (Mandatory For VJ, NT-1,2,3 and OBC, SBC & EBC)				
23	<b>D.D. No.</b>	<b>Name of Bank</b>	<b>Amount</b>	<b>Date</b>	<b>Remark - YES/NO</b>
			Rs. 1,52,100/-	/ / 2025	
			Rs. 76,050/-	/ / 2025	
			Rs. 11,510/-	/ / 2025	
				/ / 2025	
	<b>Admission fee Rec. No: -</b>		Rs. 1500/-	/ / 2025	

VERIFYING OFFICER

Dean,  
G.M.C., Hingoli.

## ANNEXURE-H

**CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted clinical examination of Mr./Ms. \_\_\_\_\_ who is desirous of admission to medical MBBS 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 professional course. Certified that he/she fulfils the following criteria.

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

Though, following deviations have been revealed, in my opinion, these are not impediments to pursue a career as a Medical / Dental / Ayurveda / Unani / Occupational Therapy / Physiotherapy / Audiology & Speech, Language pathology / Prosthetics & Orthotics / B. Sc Nursing. (Strike, which is not applicable)

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 MBBS courses applied for. The medical fitness must be certified by registered medical practitioner in the above prescribed format ONLY and letter head of the medical practitioner.

## ANNEXURE - C

पदवी, पदव्युत्तर पदवी प्रथम वर्ष अभ्यासक्रमास प्रवेश घेणा-या सर्व मुलां/मुलींकडून प्रवेशाच्या वेळीच मतदार यादीमध्ये नांव नोंदणी करण्याच्या अनुषंगाने घ्यावयाचे प्रमाणपत्र/हमीपत्र नमुना

### हमीपत्र

मी.....अभ्यासक्रम :.....  
 ..... महाविद्यालयाचे नांव : .....  
 .....या महाविद्यालयास प्रथम वर्षात प्रवेश घेतला असून मी दिनांक: ०१/०१/२० रोजी  
 १८ वर्षाच्या/वर्षाची झाली/ झाले आहे किंवा होणार आहे.

मी १८ वर्ष पुर्ण झाल्याबरोबर माझे नांव मतदार यादीत नोंदवुन घेणार आहे. अशी मी प्रतिज्ञा करतो/ करते. यासाठी सोबत जोडलेला नमुना ६, ७, ८ व ८-अ व्यवस्थितपणे भरलेला आहे.

स्वाक्षरी .....

नांव .....

मोबाईल नं. ....

**Note: Submit Annexure - C in PDF Format with scanned Original Documents in Pen Drive.**

Government Medical College, Hingoli.  
**JOINT UNDERTAKING**  
 (For all newly admitted students)

Name of the Student: \_\_\_\_\_

Roll No. : \_\_\_\_\_

We have read Maharashtra Provision of **Anti Ragging act 1999 (Maharashtra XXI III of 1999)** and relevant instructions against ragging. We are well aware of punishment under this act.

If my son / daughter / myself have been found guilty, he shall be punished for appropriate action under the act including imprisonment for a term which may extend to two years with **fine up to Rs. 10,000/-** (Inwards Rs. Ten Thousand Only) or dismissal from the institute and suspension of student for various periods during inquiry period.

I am also aware of the fact that it will be mandatory for the institute to file First Information Report (FIR) to Local Police Authorities in case Victim of ragging or his /her parents/Guardian is not satisfied with the action taken by the Head of the institution or where head of the institution is of the opinion that the incident ought to be reported.

Place: \_\_\_\_\_

Name & Signature of Student

Date: \_\_\_\_\_

Name & Signature of Parent

Signature of  
Member Secretary  
Anti Ragging Committee

Signature of  
Dean,  
Govt. Medical College, Hingoli