

Bangalore Medical College & Research Institute ,

Bangalore



Admission Instructions for First MBBS students
for the academic year 2015-16

The students are requested to submit 3 sets of documents: 1. set of original documents &

2. sets of attested(Gezetted officer)

Copies in the following order.

1. AIQ / CET Admission Order
2. SSLC Marks Card/CBSE/ICSE Marks Card
3. PUC/10+2 pass certificate /CBSE/ICSE Marks Card
4. Transfer Certificate
5. Migration Certificate (CBSE/ICSE /AIQ Student only)
6. Caste Certificate (SC, ST & Other Category)
7. Income Certificate (Not less than 6 months)
8. Eligibility Certificate RGUHS (CBSE /ICSE /AIQ students only)
9. Physical Fitness Certificate from any Authorized Government Medical officer.
10. Bond (in Prscribed format) of Rs. 100 to be attested by Notary
11. Admission receipt paid at SBI Bank, Fort Bangalore
12. Two Passport size photos
13. File

Note: The students are requested to keep 1 or more set of attested copies with them until the Originals documents are returned from RGUHS.

**Execution of bond by Candidates who select MBBS seats in Government medical
College OR Government seats in Private Medical Colleges
(On Rs.100/- e- Stamp Paper attested by Notary)**

I, Mr/Ms _____ S/o/D/o, _____ a
candidate with "CET-2015" Admission No. _____
residing at _____
have on my own volition allotted a MBBS seat on _____ (date) _____
at _____ College vide admission order Number _____ dated _____
and do hereby undertakes follows.

In accordance with the Amendment to Rule 11 of the Karnataka Selection of
Candidates for Admission to Government seats in Professional Educational Institutions
Rules, 2006, vide Government Notification – 1. No. HFW 79 RGU 2011, dated 17.07.2012,
I am prepared on completion of the course to serve in any primary Health Center or
Primary Health Unit situated in Rural Area in the State of Karnataka for a minimum period
of ONE year.

What is stated above is true and correct and I and my parent hereby undertake to act
accordingly.

Signature of the candidate

Signature of the parent

Date:

(Father / Mother)

Place:

Witness

1)

2)