

**Dr M K Shah Medical College & Research Centre,  
Ahmedabad-382424**

**Admission Form For Academic Year 2025-26**

**For Office Use only**

Name of Student			
Registration Entry No.		Unique ID No.	
Roll No.		Tuition Fee Receipt No. & Date	
Reporting Date of Student		Admission Category & Merit No.	
Date of Admission		Admission Allotment Letter No.	

**(To be filled up by student. Use ball point pen only, write in capital Letters. Read instructions carefully before filling the form)**

To,  
The Dean,  
Dr M K Shah Medical College & Research Centre, Ahmedabad.

Affix your  
Current colour  
Passport size  
Photograph Here.  
Don't staple.

I undersigned, kindly inform you that I have been selected as a student of First Year M.B.B.S at your college through Chairman, Admission Committee for Professional Under Graduate Medical Courses (ACPUGMEC), Gandhinagar.

I request you to accept receipt of tuition fee & give me a final admission in your college.

I have attached the following Certificates/Documents with admission form.

- 1 Admission Order (Original + 2 Attested Xerox Copies)
- 2 Admission Allotment Letter of Admission Cell (Original + 2 Attested Xerox copies)
- 3 School Leaving Certificate / Transfer Certificate (2 Attested Xerox copies )
- 4 Medical Fitness Certificate (Original + 2 Attested Xerox copies)
- 5 Mark sheet of H.S.C (std 12) Exam. (2 Attested Xerox copies)
- 6 Mark sheet of NEET Exam (2 Attested Xerox copies)
- 7 Fees Receipt of Tuition fee of Admission Committee (2 Attested Xerox copies)
- 8 Affidavit for Ant ragging (Original + 2 Attested Xerox copies)
- 9 Letter of Joining (Original + 2 Attested Xerox copies)
- 10 5 self-addressed white covers with postage stamps.
- 11 4 Passport size colour Photographs
- 12 Aadhar card (1 attested Xerox copy)
- 13 Free ship card (Only for ST/SC category students)(1 Attested Xerox Copy)
- 14 EWS Certificate (Only for EWS category)(1AttestedXerox Copy)
- 15 College I – Card Form
- 16 Hostel Form with undertaking (If applicable)
- 17 Pan Card (Optional)

**My relevant details are as under :**

[1] (a) Student's Name (As per 12<sup>th</sup> Mark Sheet)

Surname	First Name	Middle Name

(b) Student's Father's Full Name

Surname	First Name	Middle Name

[2] (a) Admission Merit No as per NEET score. \_\_\_\_\_

(b) Admission Date (as per joining report of this institute) \_\_\_\_\_

[3] Gender : (a) Male [    ]                      (b) Female [    ]

[4] Physically Handicapped (Y/N) : \_\_\_\_\_

[5] Date Of Birth :

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(DD/MM/YYYY)

[6] Admission Category (GQ/MQ/NIR)            [    ]

[7] Sub Category (OP/SC/ST/SEB/EW)            [    ]

[8] Name of H.S.C Examination Board

1. G.S.E.B		2. C.B.S.E		3. I.C.S.E		4. Mentionn if any other	
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[9] Month & Year of H.S.C Exam Appeared :

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(DD/MM/YYYY)

[10] Seat No. of H.S.C Examination Passed :

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[11] (a) Marks Obtained in P+C+B Subjects in H.S.C Exam : \_\_\_\_\_ (Out of \_\_\_\_\_)

(b) Marks Obtained in NEET (Entrance Test): \_\_\_\_\_ /720      Percentile \_\_\_\_\_

(c) Marks Obtained in English Subject in H.S.C Exam : \_\_\_\_\_ (Out of \_\_\_\_\_)

[12] Name & Address of Last School Attended


[13] School Leaving Certificate/Transfer Certificate No. with Date of Issue.

No.							Date						
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[14] Father/Guardian's Occupation:

[15] Annual Gross Income of Family (Father + Mother + Other) :

[16] Permanent Address of Candidate

House No :	Street/Colony/Society -												
Village/Town/City -													
Taluka & District -													
State & Country -								Pin/Zip Code					

[17] Address for correspondence

Father's Name :									
House No :			Street/Colony/Society -						
Village/Town/City -									
Taluka & District									
State & Country -					Pin/Zip Code				

[18] Name & address of Local Guardian with Contact No. in case of Emergency.(Mandatory)


[19] Birth Place (With District & State)

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[20] Home Town/ Domicile:  
(With District & State)

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[21] (a) Contact No.  
With S.T.D. Code :

Residence											
Personal											
Father											
Mother											

(b) Email ID

Student	
Father/Mother	

[22] As per School Leaving: -  
Certificate/Record: -

(a) Religion: -

(b) Caste

**-: DECLARATION: -**

All the information given by us in this Admission Form for Admission in Academic year 2025-26 is correct, complete and true as submitted previously in the Application Form at Chairman, Admission Committee for Professional Under Graduate Medical Courses (ACPUGMEC), Gandhinagar as per best of my Knowledge. We have read and understood the rules of admissions. We agree/abide to follow all rules of college& University.

We understand that fees to be paid/refunded shall be regulated as per the circulars/notifications of Chairman, Admission Committee for Professional Under Graduate Medical Courses (ACPUGMEC), Gandhinagar and Fee Regulatory Committee for Medical Courses, Govt of Gujarat, Ahmedabad.

Ragging is banned, defaulters will be strictly dealt with in the form of termination from the institution and legal punishment by court of law.

Migration Certificate/Transfer Certificate/NOC from Medical College will be provided to candidate after clearing all the dues (Tuition fee, Hostel fee (if applicable), any Penalty by authorities etc.)

<b>Sign of Father/Mother Guardian</b>	<b>Sign of Student</b>