अखिल भारतीय आयुर्विज्ञान संस्थान, पटना

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, PATNA

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)
(An Institution of National Importance under Ministry of Health & Family Welfare)
भारत सरकार / Government of India



अधिष्ठाता (शैक्षणिक) कार्यालय / OFFICE OF THE DEAN (ACADEMICS)

MBBS ADMISSION- 2021 (CHECKLIST)

The following list of the documents needs to be produced for admission:-

- 1. Class 10th Mark Sheet
- 2. Class 10th Passing Certificate
- 3. Class 12th Mark Sheet
- 4. Class 12th Passing Certificate
- 5. Migration Certificate
- 6. NEET Application- Confirmation Page (provided by NTA)
- 7. NEET Admit Card (provided by NTA)
- 8. NEET Score Card (provided by NTA)
- 9. Seat Allocation Letter (provided by MCC)
- 10. Caste Certificate Format attached (in case of SC/ST/OBC/EWS Candidates) & PwBD certificate (wherever required)
- 11. Five Passport size Coloured photographs
- 12. Admission fees (One time for entire course): ₹5856 /- (Bank Draft/ Cash Receipt/ NEFT)
- 13. Mess fee (Quarterly) ₹ 12,300/- (Bank Draft/ Cash Receipt/ NEFT)
- 14. Signed Affidavit by parent/guardian and student regarding antiragging (Format attached)
- 15. Signed Affidavit by parent/guardian and student regarding attendance (Format attached)
- 16. Undertaking (Format attached)

Note: If any MBBS student(s) vacate the seat after completion of all round of counselling process or discontinue the course midway, the penalty imposed for the same is ₹ 3,00,000/-.

2. For enquiries related to Admission at AIIMS Patna, kindly contact: Tel: 0612-2451006 & +918544423532
E-mail: admission@aiimspatna.org

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DEAN Nedt al Sciences

OF AN Audit al Sciences

An India Institute of Medit al Sciences

An India Institute of Paina Spilson

PROFORMA FOR OTHER BACKWARD CLASS (OBC) CERTIFICATE

(Certificate to be Produced by other Backward Classes applying for Admission to Central Educational Institutions (CEIs),
Under The Government of India)

Inis	is to certify that Shri /Smt./Kum	Son/Daugnter of	
Shri/	/Smtof Village/Tow	vnDistrict/Division	in the
	State belongs to the	eCommunity which	ch is recognized as a
back	ward class under:		
(i)	Resolution No. 12011/68/93-BCC(C) dated 10/09/93 pu dated 13/09/93.	blished in the Gazette of India Extraordinary pa	art I Section I No. 186
(ii)	Resolution No. 12011/9/94-BCC dated 19/10/94-BCC dated 19/10/94-BCC dated 19/10/94-BCC dated 20/10/94.	ated 19/10/94 published in the Gazette of India	Extraordinary part I
(iii)	Resolution No. 12011/7/95-BCC dated 24/05/95 publish 25/05/95.	ed in the Gazette of India Extraordinary part I S	ection I dated
(iv)	Resolution No. 12011/96/94-BCC dated 09/03/96.		
(v)	Resolution No. 12011/44/94-BCC dated 06/12/96 publis 11/12/96.	hed in the Gazette of India Extraordinary part I	Section I No. 210 dated
(vi)	Resolution No. 12011/13/97-BCC dated 03/12/97.		
(vii)	Resolution No. 12011/99/94-BCC dated 11/12/97.		
(viii)	Resolution No. 12011/68/98-BCC dated 27/10/99.		
(ix)	Resolution No. 12011/88/99-BCC dated 06/12/99 publis	hed in the Gazette of India Extraordinary Part I	Section I No. 270
	dated 06/12/99.		
(x)	Resolution No. 12011/36/99-BCC dated 04/04/2000 pub dated 04/04/2000.	olished in the Gazette of India Extraordinary Par	rt I Section I No. 71
(xi)	Resolution No. 12011/44/99-BCC dated 21/09/2000 pub dated 21/09/2000.	olished in the Gazette of India Extraordinary Par	rt I Section 1 No. 210
(xii)	Resolution No. 12016/09/2000-BCC dated 06/09/2001.		
(xiii)	Resolution No. 12011/01/2001-BCC dated 19/06/2003.		
(xiv)	Resolution No. 12011/04/2002-BCC dated 13/01/2004.		
(xv)	Resolution No. 12011/09/2004-BCC dated 16/01/2006 p	oublished in the Gazette of India Extraordinary F	Part I Section I No. 210
	dated 16/01/2006.		
Shri/	/Smt./Kumand/or his fam	nily ordinarily reside(s) inthe	
	rict/Division ofState.		
This	is also to certify that he/she does not belong to the person	ons/sections (Creamy Layer) mentioned in Colo	umn 3 of the Scheduled
to the	e Government of India, Department of Personnel & Train	ing O.M. No. 36012/22/93-Estt. (SCT) dated (08/09/93 which is

Dated : **NOTE**:

District Magistrate/Competent Authority Seal

a. The Term Ordinarily used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

modified vide OM No. 36033/3/2004 Estt. (Res.) dated 09/03/2004 or the latest notification of the Government of India.

- b. The authorities competent to issue Caste Certificates are indicated below:
 - District Magistrate/Additional Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/Ist Class Stipendiary Magistrate/Sub-Divisional Magistrate/ Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner (not below the rank of Ist Class Stipendiary Magistrate.)
 - ii. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
 - iii. Revenue Officer not below the rank of Tehsildar.
 - iv. Sub-Divisional Officer of the area where the candidate and/or his family resides.

The OBC certificates issued from 1st April, 2020 (inclusive) and start of reporting of Round-1 of MBBS counselling (as per Medical Counselling Committee for MBBS admission) will be considered valid for admission for NEET (UG) 2021*

* As per minutes of meeting held by MCC, DGHS on 23.09.2021

FORM OF SC/ST CERTIFICATE PRESCRIBED

Form of certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated the 28.1.1952, as revised in Dept. of Per-& A.R. letter No. 36012/6/76-Est. (S.CT), dated the 29.10.1977, to be produced by candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.

CASTE CERTIFICATE

			son/daughter*of	
			of the State/Union Territor	
	belongs t Scheduled Tribe* under:	to theCaste/	'Tribe which is recognised as a Schedul	ec
	The Constitution (Scheduled Cas	ste) Order, 1950		
•	The Constitution (Scheduled Tril	be) Order, 1950		
•	The Constitution (Scheduled Cas	ste) (Union Territories) Order, 195	51	
•	The Constitution (Scheduled Trib	be) (Union Territories) Order, 195	1	
% 1. (a	is amended by the Scheduled Ca	aste and Scheduled Tribes Lists ((Modification) Order, 1956, the Bombay F	le-
			e of Himachal Pradesh Act, 1970 the Nor	
			Scheduled Tribes Orders, (Amendment) A	ct
1976).	The Constitution (Jammu and Kash	hmir) Scheduled Caste Order, 195	6.	
•	The Constitution (Andaman and	Ni cobar Islands) Scheduled Tribes	Order, 1959.	
•	The Constitution (Dadra and Nag	ar Haveli) Scheduled Caste Order	, 1962.	
•	The Constitution (Dadra and Nag	ar Haveli) Scheduled Tribes Orde	r, 1962.	
•	The Constitution (Pondichery) Sc	heduled Caste Order, 1964		
•	The Constitution (Uttar Pradesh)	(Scheduled Tribes) Order, 1967		
•	The Constitution (Goa, Daman &	Diu) Scheduled Caste Order, 196	8.	
•	The Constitution (Goa, Daman &	Diu) Scheduled Tribes Order, 196	58.	
•	The Constitution (Nagaland) Scho	ed uled Tribes Order, 1970.		
•	The Constitution (Sikkim) Schedu	ıled Caste Order, 1978.		
•	The Constitution (Sikkim) Schedu	uled Tribes Order, 1978.		
	pplicable in the case of Schedule ry Administration:	ed Caste/Schedule Tribe persons	who have migrated from one State/ Uni	or
Smt * District recogn of pres	father/mothe :/Division* of the State/Union T ised as a Scheduled Caste/Schedu scribed authority) vide their No	r of Shri/Smt/Kum* Ferritory* who t Jed Tribe* in the State/Union Te date % 3. Shri*/Si	neduled Tribe certificate issued to Shriof village/town* Delongs to thecaste/tribe which erritory*issued by the (nar mt.*/Kum*and/or his/he e State/Union Territory of Signature	in is me er*
Place		State/Union Territory	**Designation	
Date		-	(With seal of Office)	

- Please delete the words which are not applicable.
- Pleas e quiote specific Presidential Order.
- Delete the paragraph which is not applicable.

 ** Should be signed by the Authorities empowered to issue Scheduled Caste/Scheduled Tribe certificates as specified above.

Performa for Economically Weaker Sections (EWS) Certificate

NCOME & ASSEST CERTI SECTIONS	FICATE TO	BE PRODUCED	BY	ECONOM	CALLY	WEAKER
Certificate No				Date:		7 5
	VALID FOR TH	IE YEAR				
				6	on/daudi	nter/wife o
This is to certify that Post Office Pin Cod	permanent r	esident of			, Vi	llage/Stree
Post Office	• • • • • • • • • • • • • • • • • • • •	District		in the St	ate/Unio	n Territor
Pin Cod	e	whose photogra	ph is	attested b	pelow	belongs to
Economically Weaker Sections, akh (Rupees Eight Lakh only)	since the gros	ss annual income	of h	ils/ner Tami	y "" IS D	elow Ks. 8
ossess any of the following ass	ets***	al year	- ∵ ⊓	nsmer ramii	y uoes	HOL OWN O
5 acres of agricultural lar		93				
II. Residential flat of 1000 s	q. ft. and above					
III. Residential plot of 100 so	q. yards and ab	ove in notified mu	nicipa	lities;	40	
IV. Residential plot of 200 so	q. yards and ab	ove in areas other	than	the notified	municipa	alities.
Chrifemt IV: mori		balanga	ta the		anata w	high in no
2. Shri/Smt./Kumari	te Scheduled T	belongs	to the	rd Classes	caste w	hich is no
2. Shri/Smt./Kumari recognized as a Scheduled Cas	te, Scheduled T	belongs Fribe and Other Ba	to the	rd Classes	caste w (Central	hich is no List)
2. Shri/Smt./Kumari ecognized as a Scheduled Cas	te, Scheduled T	belongs Fribe and Other Ba	to the	rd Classes	caste w (Central	hich is no List)
Shri/Smt./Kumari ecognized as a Scheduled Cas	te, Scheduled T	belongs Fribe and Other Ba	to the	rd Classes	caste w (Central	hich is no List)
2. Shri/Smt./Kumari ecognized as a Scheduled Cas	te, Scheduled T				14.1	6
2. Shri/Smt./Kumari ecognized as a Scheduled Cas	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
2. Shri/Smt./Kumari ecognized as a Scheduled Cas	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
2. Shri/Smt./Kumari ecognized as a Scheduled Cas	te, Scheduled T	Signatu	re with		ce	60
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	6
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	6
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	6
Recent Passport size	te, Scheduled T	Signatu	re with	seal of Offi	ce	6
2. Shri/Smt./Kumariecognized as a Scheduled Cast	te, Scheduled T	Signatu	re with	seal of Offi	ce	60
Recent Passport size attested photograph of the applicant		Signatui N	re with	seal of Offi	ce	60
Recent Passport size attested photograph of	salary, agriculture, bu	Signatui N	re with ame _ Des	seal of Offi	Се	

The EWS certificates issued from 1st April, 2020 (inclusive) and start of reporting of Round-1 of MBBS counselling (as per Medical Counselling Committee for MBBS admission) will be considered valid for admission for NEET (UG) 2021*

^{*} As per minutes of meeting held by MCC, DGHS on 23.09.2021

UNDERTAKING

I,					_Son/daugl	hter	of
Shri	have	passed	MBBS/B.Sc.	(Hons)	Nursing	Entra	ance
Examination. I certify that all	my orig	ginal cer	rtificates (i	.e. 10 th P	assed/Age	proof,	12 th
Passed Marks Sheet, and certifi	cate and	d Schedu	led Caste/So	heduled	Tribe (SC	/ST)/0t	her
Backward Class (OBC)/Economical	ly Weake	er Section	n (EWS) are a	uthentic	. If any fo	ound fa	lse,
then my candidature may be trea	ted with	ndrawn/c	ancelled at	any time	e during th	he cour	e.
	Name						
	Signat	ure of th	ne Candidate	s			
	Address	s:					

DECLARATION BY THE CANDIDATE

I,	Son/daughter of Shri			
Village Town/City	District			
State	Hereby Declare that I belong to the			
	Community which is recognized as a backward			
class by the Government of Ind	lia for purpose of reservation in service as per order			
contained in Department of	Personnel and Training Office Memorandum No.			
36012/22/93.Estt.(SCT) dated 08.0	09.1993. It is also declared that I do not belong to			
persons/section (Creamy Layer)	mentioned in Column 3 of the Scheduled to the above			
referred Office Memorandum dat	ed 08.09.1993.			
	Name			
	Signature of the Candidates			
	Address:			

AFFIDAVIT BY THE PARENT

(On Rs 10/- STAMP PAPER DULY NOTARISED)

I	S/o/D/o of Mr./Mrs
Resid	ent of
	do hereby solemnly affirm and declare as under:
1.	That my son / daughter Mr./Mrs has been selected as a student of MBBS/ B.Sc. (Hons) Nursing at All India Institute of Medical Sciences
2.	(AIIMS) Patna. That I have gone through and fully understood the UGC Regulation on Curbing the Menace of Ragging in Higher Educational Institutions, 2009 under Section 26 (1)(g) of the University Grants Commission Act, 1956 to be followed by all the students of AIIMS.
3.	I assure you that my son/daughter/ward will not be involved or indulge in act of ragging that my come under the definition of ragging.
4.	I have fully understood that in case my son/daughter/ward will be found indulging or involved in ragging within or outside the premises of the AIIMS, he/she shall be appropriately punished for which he/she shall be solely responsible, or my son/daughter shall not hold liable the AIIMS or any of its officials for any loss (s), damage (s) and shall not claim any compensation from it's or its office bearers.
	Deponent
	Signature of Parent/Guardian
	VERIFICATION: Verified at on this day of2020 that the above affidavit is true and correct.
	Name: Address & Contact No: Deponent

AFFIDAVIT

(On Rs 10/- STAMP PAPER DULY NOTARISED)

To be submitted by the student & parent securing admission at AIIMS Patna

T. No./No.
I, Mr/Ms
Resident of (Complete Address with pin code)
Resident of (Complete Address with pin Code)
Secured admission in the course MBBS/ B.Sc. (Hons) Nursing in the batch of
(Admission year)
I understand and undertake that:
I am aware that securing minimum 75% attendance in aggregate and 65% in
individual subject in theory and practical is mandatory for being eligible for
appearing in Professional Examinations and it is solely the responsibility of the
student to attend classes regularly.
Absenteeism of any kind is not tolerable and absenteeism on medical ground will
have to be with prior approval of Competent Authority of this institute and on
recommendation of the medical board of this Institute.
As a student I agree to abide by all the rules and regulations governing AIIMS
Patna including the hostel and hospital.
That it is the sole responsibility of the parent(s) to intimate any changes in their
address or phone number(s) to the office of the DEAN, All India Institute of Medical
Sciences Patna-801 507 immediately.
Signature of Student
ACKNOWLEDGEMENT
I have gone through carefully the terms of the above undertaking that if he/she
fails to comply with the regulations governing academic attendance, he/she will be
detained and not allowed to appear in the professional examination in the subject.
I undertake that I/he/she will strictly follow the above terms.
Signature of Parent/Guardian
Date: Name & Address with Mobile Number
(This Undertaking has to be submitted on (Non-Judicial) stamp paper of Rs. 10/-)

ANTI-RAGGING STUDENT UNDERTAKING

AFFIDAVIT BY THE STUDENT

(On Rs. 10/- STAMP PAPER DULY NOTARISED)

Resident of	
do hereby solemnly affirm and declare as under:	
1. That I am joining as a student of MBBS/B.Sc (Hons) Nursing at All India Ir of Medical Sciences (AIIMS) Patna.	nstitute
2. That I have gone through and fully understood the UGC Regulation on Cur Menace of Ragging in Higher Educational Institutions, 2009 under Section of the University Grants Commission Act, 1956 to be followed by all the stu AIIMS.	n 26 (1)(g
3. I hereby solemnly affirm that:-	
 I will not indulge or involve myself in any behaviour or act that m under the definition of ragging. 	ay come
 I will not participate in or abet or propagate ragging in any form. 	
 I will not hurt anyone physically or psychologically or cause any charm. 	other
4. I have fully understood that found indulging or guilty of any aspect of within or outside AIIMS Campus, I may be punished as per the provision of t Regulations/Directive mentioned above and /or as per the law in force which I will be solely responsible and shall not claim any compensation.	he AIIM
Depone	nt
Signature of	' Studen
VERIFICATION: Verified at on this	•
2020, that the above affidavit is true and con	rrect.
Name: Address & Contact No:	
Depone	nt