



Ref.U-12021/06/2025-MEC

Dated: 02.01.2026

**NOTICE**

**Kind Attention**

We have received information from our financial custodian that the refund of security deposit of the following MDS candidates from MCC 2025 Counselling (List Attached) could not be processed due to the following reasons (bank account closure, Refund Failed, Refund period exceeded etc.).

Hence the bankers could not complete refund of security deposit. Candidates are requested to provide account details in an Affidavit duly notarized on Court stamp paper as mentioned in attached Annexure A (Format enclosed) on [financemcc@lifecarehll.com](mailto:financemcc@lifecarehll.com) copy to [adgme@nic.in](mailto:adgme@nic.in) before 31.01.2026 to initiate the refund process of security deposit again.

Notice posted on: 02.01.2026

1. I, \_\_\_\_\_, s/o, d/o, w/o \_\_\_\_\_ bearing roll no. \_\_\_\_\_, NEET application no. \_\_\_\_\_ for NEET-UG /PG/SS counselling (year) is applying for request to refund my security amount of (amount).
2. I have participated in NEET- UG/PG/SS counselling for this year.
3. I have paid (amount) to MCC of DGHS to participate in NEET-UG/PG/SS counselling & have not yet received refund of the same.
4. I am well aware of the facts that the security amount will only be refunded in cases when the candidate has reported to the allotted college after Round-2 of Counselling or has exercised his right to take free exit in Round-1 of Counselling. I am also aware of the circumstances as mentioned in the Counselling scheme when my security amount will be forfeited.
5. I request MCC of DGHS to refund the security amount to the bank details as provided by me.
6. I am enclosing herewith the list of documents in order to substantiate my claim:
  - a. Copy of Adhaar Card,
  - b. Admit card bearing roll number (UG/PG/SS),
  - c. Details of Bank account from which the amount was remitted,
  - d. Details of bank account to which the amount is to be refunded,
  - e. Attach scanned copy of passbook or cancelled cheque of an account to which the amount of refund is to be made,
7. I solemnly, state that the information furnished herein above is true to best of my knowledge and belief. If, any of the information furnished by me is found to be untrue/false/wrong, a action will be taken against me & I will no longer claim any right over the remitted amount.

Date:

Place:

Name:

Signature:

<b>RollNo</b>	<b>TranscationDate</b>	<b>Reason for failure</b>
2555105472	28-06-2025 14:06	Refund period exceeded
2555102821	27-06-2025 16:13	Refund period exceeded
2555118688	26-06-2025 20:31	Refund period exceeded
2555122642	25-06-2025 19:27	Refund period exceeded
2555121495	6/25/2025 11:16:31 AM	Refund period exceeded

<b>Remarks</b>
Failed
Failed
Failed
Failed
Failed