

Ref: DVVPFA/MCH/SS/2023/1543

Date: 12.08.2023

FEE STRUCTRE FOR POST GRADUATE (MD/MS) ADMISSION FOR THE AY 2023-24

PARTICULARS	STATE QUOTA	INSTITUTE QUOTA	15% NRI /AGAI. NRI QUOTA	MODE OF PAYMENT/ REMARKS
A. FOR REPORTING OF ADMISSION				
TUITION FEES				
MD GEN. MEDICINE MD. DVL MD PAEDIATRICS MD RADIO DIAGNOSIS MS GEN. SURGERY MS ORTHOPAEDICS MS OPHTHALMOLOGY MS OB & GY	₹ 9,00,000	₹ 36,00,000	₹ 45,00,000	To be paid by Demand Draft/Per Year Interim Tuition Fee is subject to revision from Fee Regulating Authority, Mumbai. Quota-wise Tuition Fee is applicable as per Seat Matrix approved State CET CELL/DMER, Mumbai
MD ANAESTHESIOLOGY	₹ 9,00,000	₹ 27,00,000	-----	
MD PATHOLOGY	₹ 9,00,000	₹ 18,00,000	-----	
B. OTHER FEES AT THE TIME OF RETENTION				
HOSTEL FEES (Excluding Mess charges)	₹ 1,10,000	₹ 1,10,000	₹ 1,10,000	Consolidated Demand Draft,
SECURITY DEPOSIT (Refundable after Course completion)	₹ 1,50,000	₹ 1,50,000	₹ 1,50,000	
REGISTRATION & ELIGIBILITY (MUHS, Nashik, ARA, MUMBAI)	₹ 85,000	₹ 85,000	₹ 85,000	
STUDENT WELFARE & UNI. DEVE. FEE (MUHS, Nashik)	₹ 2,000	₹ 2,000	₹ 2,000	
INSURANCE (Amartya Shiksha Yojana)	₹ 2,500	₹ 2,500	₹ 2,500	

Note:

- All Category students have to submit requisite documents as per (Annexure-1) at the time of admission.
- Demand Draft from Nationalised Bank to be prepared in favor of "**The Principal PDVVPF's Medical College**" Payable At **Ahmednagar** as per Quota (A).
- Scan copy of each original document in pdf/jpg format in pen drive as per Anne.-1 (Size 150kb)
- On submission of STATUS RETENTION, student has to deposit all other fees (B).

DEAN

DR. VITHALRAO VIKHE PATIL FOUNDATION'S MEDICAL COLLEGE, AHMEDNAGAR
FIRST YEAR POST GRADUATE ADMISSION AY 2023-24

(I YEAR MD/MS COURSE ONLY)

ANNEXURE-1

CHECK LIST FOR ORIGINAL DOCUMENTS TO BE SUBMITTED AT THE TIME OF ADMISSION
 Scan Copy of Each Original Document in PDF & JPG Format in pen drive (Size 150kb)

S.N.	Particulars of Documents	Original
01	Allotment Letter (PG NEET-2023)	Yes/No
02	PG NEET 2022 Mark-Sheet	Yes/No
03	Nationality/ Valid Passport, Domicile Certificate	Yes/No
04	Xth Passing Certificate	Yes/No
05	MBBS Degree Certificate/ Passing (If Fresh)	Yes/No
06	MBBS Mark sheet I, II, III (Part I & II)	Yes/No
07	Internship Completion Certificate	Yes/No
08	Permanent Registration Certificate from the Central / State Council	Yes/No
09	Caste Certificate (If applicable)	Yes/No
10	Caste Validity Certificate (If applicable)	Yes/No
11	Non-Creamy Layer Certificate Valid up to 31.03.2024 (If applicable)	Yes/No
12	College Leaving / Transfer Certificate (LC/TC)	Yes/No
13	Attempt Certificate duly signed by Head of the Institute	Yes/No
14	NMC <i>Recognition</i> Certificate	Yes/No
15	Medical Fitness Certificate	Yes/No
16	Migration Certificate (Non-MUHS Student only)	Yes/No
17	Gap Affidavit (if applicable on Rs. 100/- Stamp Paper)	Yes/No
18	Bond Release Letter (as per NEET PG 2023 Info. Brochure Ref. Para No. 8.13) (Annexure-BB)	Yes/No
19	Undertaking for Tuition Fee (on Rs.100/-stamp paper)	Yes/No
20	Undertaking for Anti-Ragging (on Rs.100/-stamp paper)	Yes/No
21	a. Online downloaded Application form for State NEET-PG 2022 b. Application form for NEET -PG 2023 for Entrance Exam c. NEET - PG 2023 Exam Admit-Card	Yes/No
22	Photo ID Proof (Aadhar Card, Pan Card, Voter ID/Annexure-C)	----
23	Ten Passport Size Photograph	-----

In addition 02 sets of attested Xerox Copies

(Annexure-BB)

(As per NEET PG 2023 Info. Brochure Ref. Para No. 8.13)

(On Plain Paper)

UNDERTAKING

I Dr. _____ have completed my UG from _____ College, which is Government /Government Aided/ Corporation Medical College and completed my internship on _____. I have appeared for NEET PG-2023 and my Roll No. is _____ and AIR is _____.

I hereby state that this is my 1st/2nd attempt for the counselling and as per NEET-PG-2023 information brochure **clause 8.13** I am eligible for NEET-PG-2023 State Counselling without bond release certificate for 2 years. Hence, I am eligible for NEET-PG-2023 State Counselling without bond release certificate for the year 2023-24.

Name of Candidate: _____

Signature of Candidate: _____

Date: / /2023

To be Notarized OR Affidavit from Tahsildar

TO BE PRINTED ON Rs. 100 STAMP PAPER ON STUDENTS NAME

GAP AFFIDAVIT

I, _____ S/D/o _____

Age- _____ Years an Indian Inhabitant

Residing _____

_____ do hereby state on solemn affirmation as under:

That I have passed MBBS Course Successfully from _____ . But after completing the said course I have not enrolled my name in other educational Institution for further education.

Hence I have made this Affidavit saying that the period of _____ is my _____ Years Gap in my academic career. Now I wish to enroll my name for further education in the year 20 - 20 & I have made this Affidavit to state and confirm that I have taken Gap of _____ Year in my education.

All the above contents is true and correct and nothing any concealed therein. If it is found to be false, I am liable to punished as per section 119 and 200 of Indian Penal Code.

Solemnly affirm within the named _____.

Date: / /2023

Deponent

Place:

To be Notarized OR Affidavit from Tahsildar

TO BE PRINTED ON Rs. 100 STAMP PAPER ON STUDENTS NAME

UNDERTAKING

I, _____ S/D/o _____

Age- _____ Years an Indian Inhabitant Residing at _____

_____ do

hereby state on solemn affirmation as under:

1. I say that, I have appeared for the **NEET PGM-2023** Examination, to secure admission in the academic year 2023-24 in Medical Colleges.
2. I say that solely on the basis of merit I have been admitted to the **DVVPF's MEDICAL COLLEGE AHMEDNAGAR** in 1st year PG Course for the A. Y. 2023-24.
3. I say that at the time of obtaining my admission I have paid a sum of Rs. _____/- as Interim Tuition fees for 1st year MBBS course.
4. I say that I am fully aware that the aforesaid fees Paid by me is interim fees and are subject to revision at any time. In event of the fees being increased by the Fees Regulatory Authority Govt. of Maharashtra, Mumbai or Judicial Pronouncement, I hereby undertake to pay the difference amount of the fees within a period of 7 days from being notified.

Solemnly affirmed at

This ____ day of ____ 2023

Before Me

Identified me: _____

NOTARY

ANNEXURE-C

(On Rs. 100.00 Stamp Paper in the name of student)

UNDERTAKING

I, _____, **S/D/o.** Mr. _____

Age _____ Yrs, R/o- _____

Have carefully read and fully understood the law prohibiting ragging and the directions of the Hon. Supreme Court and the Central/State Government in this regard. As per Maharashtra Prohibition of ragging act No. XXXIII of 1999, ragging within or outside of education institute is strictly prohibited.

DEFINITION OF RAGGING:

Ragging includes display of noisy, disorderly conduct, teasing, rough or rude treatment indulging in rowdy indiscipline an obscene activities which cause all or likely to cause annoyance under hardship, physical or psychological harm or mental trauma or raise apprehension or fear in a fresher or other students or forcing the students to do any act which such or danger to his or her lives or limb or indulging in eve teasing.

PROHIBITION OF RAGGING:

Ragging within or outside the educational institute is strictly prohibited.

PENALTY FOR RAGGING:

Whoever directly commits participates in abets or instigates ragging within or outside any educational institute shall be suspended expelled or rusticated from the institution shall also be liable to fine which may extend to Rs. 25000.00

THE PUNISHMENT ALSO INCLUDES:

Cancellation of admission, suspension of attending classes, withholding/ withdrawing fellowship/scholarship and other financial benefits.

I have read the above and understand the meaning of ragging, consequences of ragging and punishment for it.

I promise that I shall not get involved directly or indirectly in any sort of ragging till such time, I am a Bonafide- student of the college.

Signature of the Student

Signature of the Parent

Witness:

Date: / /2023

Place:

To be Notarized OR Affidavit from Tahsildar

पदवी, पदव्युत्तर पदवी प्रथम वर्ष अभ्यासक्रमास प्रवेश घेणाऱ्या सर्व मुला/मुलीकडून
प्रवेशाच्या वेळी मतदार यादीमध्ये नाव नोंदणी करण्याच्या अनुषंगाने घ्यावयाचे
प्रमाणपत्र/हमीपत्र नमूना

मी

_____ ,
अभ्यासक्रम: _____ महाविद्यालयाचे नाव: डॉ. विठ्ठलराव विखे
पाटील फाऊंडेशनचे वैद्यकीय महाविद्यालय, विळद घाट, अहमदनगर या महाविद्यालयात प्रथम
वर्षात प्रवेश घेतला असून मी दि. ०१/०१/ _____ रोजी १८ वर्षाचा/वर्षाची झालो/झाले
आहे किंवा होणार. १८ वर्ष पूर्ण झाल्याबरोबर मी माझे नाव मतदार यादीत नोंदवुन घेणार आहे
अशी मी प्रतिज्ञा करतो/करते.

स्वाक्षरी: _____

नाव: _____