



INSTITUTE OF PARAMEDICAL SCIENCE, GIMS
Greater Noida, Gautam Buddha Nagar-201310, Tel-0120-2341738, 7303884227
Website: www.gims.ac.in, Email-gimsparamedicalschoo@gmail.com
(An Autonomous Institute under Govt. of U.P)

ADMISSION INFORMATION (2024- 2025)

Seat will be allotted after counselling and as per UP Govt. Reservation rules and regulations as follows:

Documents and fee to be submitted at the time of Admission (2 self-attested photocopies to be provided):

1. ABVM University/ DGME Allotment Letter.
2. Entrance Admit Card
3. Rank Card / Score Card
4. Original Class 10th Mark sheet & Certificate.
5. Original Class 12th Mark sheet & Certificate.
6. Birth certificate
7. Original Migration Certificate.
8. Original Caste Certificate or EWS Certificate (if applicable).
9. Five passport size color photographs.
10. Gap Certificate.
11. Valid ID Proof Aadhar /Pan Card/Voter ID/ Passport/ Driving License.
12. Medical fitness certificate from GIMS.
13. Demand Draft of fee (**Rs. 2000/-**) in favor of GIMS Student Section payable at Greater Noida.
14. Affidavit (Rs 100) each from both student & Parents regarding discipline/Anti-ragging (Annexure attached)

Bank Details for DD/Online payment as follows:

Account Name	Account Number	Bank Name/Branch	IFCS Code
GIMS Student Section	6660002100000533	GBU, Greater Noida	PUNB0666000

COURSES

Name of Course	No. of Seats	Programme Code	Duration
DMLT (Affiliated to UPSMF)	30	026 (UPSMF)	2 Years
DXRT (Affiliated to UPSMF)	30	036 (UPSMF)	2 Years
BMLS (Affiliated to ABVMU)	60	108 (ABVMU)	4 Years (8 Semesters)
BMRIT (Affiliated to ABVMU)	60	110 (ABVMU)	4 Years (8 Semesters)
BOTT (Affiliated to ABVMU)	60	100 (ABVMU)	4 Years (8 Semesters)

ADMISSION

1. Institute of Paramedical Science, GIMS Greater Noida is a government institution and admissions are done through **Atal Bihari Vajpayee Medical University, Lucknow (ABVMU)**.
2. Paramedical School, GIMS Greater Noida is a government institution and admissions are done through **UP State Medical Faculty, Lucknow (UPSMF)**.

For More details Please Visit:

Atal Bihari Vajpayee Medical University, Lucknow

<https://abvmuup.edu.in/>

UP State Medical Faculty

<https://www.upsmfac.org/>

Government Institute of Medical Sciences

(GIMS) Greater Noida, Gautam Buddha Nagar

(UP)

www.gims.ac.in

PARAMEDICAL DEGREE COURSE FEES (BMLS,BMRIT,BOTT)

The details are as follows: -

S. No.	Particulars	1 st Year	1 st Year	2 nd Year	2 nd Year	3 rd Year	3 rd Year	4 th Year	4 th Year
		1 st Sem.	2 nd Sem.	3 rd Sem.	4 th Sem.	5 th Sem.	6 th Sem.	7 th Sem.	8 th Sem.
1.	Admission Fees	5,000	-	-	-	-	-	-	-
2.	Course Fees	27500	27500	27500	27500	27500	27500	27500	27500
3.	Examination Fees	2500	2500	2500	2500	2500	2500	2500	2500
4.	Enrolment Fees	500	-	-	-	-	-	-	-
5.	Degree/Diploma Certificate Fees	-	300	-	300	-	300	-	300
6.	Migration Certificate Fees	-	-	-	-	-	-	-	300
7.	Caution Money (refundable)	10,000	-	-	-	-	-	-	-
8.	Library Fees	250	250	250	250	250	250	250	250
TOTAL PER SEM.		45750.00	30550.00	30250.00	30550.00	30250.00	30550.00	30250.00	30850.00
TOTAL PER YEAR		76300		60800		60800		61100	

PARAMEDICAL DIPLOMA COURSE FEES (DMLT,DXRT)

The details are as follows: -

S.NO	Particulars	Amount (Rs)
1	Admission fees (Per Year)	24000/-
2	Tuition Fees	
3	Examination Fees (Per Year)	2500/-
4	Enrollment fees	
TOTAL		26500/- per year
5	Hostel facility	Not Available



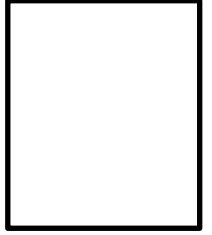
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Admission Documents details for Paramedical degree Course – 2024-25



Name :
Father's Name :
Mother's Name :
Date of Birth :
Name of the school where passed Intermediate/Equivalent _____

Religion / Cast : Category (OBC/SC/ST/General /Other)

Permanent Address :

Blood Group :

Sri/Km..... has shown original document and submitted the following documents.
He/ She is found eligible for admission to first year Paramedical degree course Institute of Paramedical Science, GIMS, Greater Noida, U.P.

S.NO.	Documents Check List	Yes	No
1.	CPET Admit Card		
2.	Provisional Allotment Letter		
3.	CPET Marks sheet /Rank Card/Score Card		
4.	10 th Mark sheet and certificate.		
5.	12 th Mark sheet and certificate		
6.	Date of Birth certificate.		
7.	Five passport size photographs		
8.	Transfer certificate		
9.	Migration certificate of concerned board/university		
10.	Reserved category original Caste / EWS Certificate/ PH certificate		
11.	Gap Certificate (if required)		
12.	Affidavit from both students and parents regarding discipline and anti-ragging.		
13.	Government issued Photo Identity Card /Aadhar Card/Pan Card/Voter ID		
14.	Fee Receipt Deposited at ABVMU For Seat Confirmation		
15.	Fee Receipt Deposited at allotted college for Document Verification		
16.	Guardian & Local Guardian Photographs		

Name & Signature of Candidates

Name & Signature of Verification Officer

Name & Signature of Coordinator

Principal
Institute of Paramedical Science, GIMS
Seal & Signature



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UNDERTAKING BY THE STUDENT

I, solemnly affirm that I shall maintain good conduct and behavior throughout my stay in the **Institute of Paramedical Science, GIMS, Greater Noida** and shall not indulge in any undesirable or anti-social activities. I also affirm that I shall maintain discipline and abide by the provision of act, Ordinances, regulations and other instructions enforced by the Institute from time to time. In case of breach of this undertaking, I shall be liable to be expelled, rusticated or otherwise as decide by the Institute authorities.

Date:

Signature of Student

Full Name

Mobile No

UNDERTAKING BY THE PARENTS /GUARDIAN OF THE STUDENT

I hereby assure and undertake that my son/daughter/ward..... being admitted to the **Institute of Paramedical Science, GIMS, Greater Noida**, shall maintain good conduct and behavior at all times during his/her stay in the college. In case of this undertaking, he/she shall render himself / her liable to be expelled, rusticated or otherwise decided or quantified by the college authorities.

Local Guardian Photo

Mother Photo

Father Photo

Local Guardian Signature

Name:

Address:
.....

Pin Cod No.

Mobile:

Date:.....

Guardian Signature

Name:

Address:
.....

Pin Cod No.

Mobile:

Date:.....



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(ORIGINAL AND PHOTOCOPY DOCUMENTS RECEIVED FORMAT FOR VERIFICATION)

This is to certify that the S/o. D/o,
W/o..... has been admitted in Paramedical
Degree course in Institute of Paramedical Science, GIMS Greater Noida For 2024-25 academic
year through ABVMU counseling 2024 and submitted the following documents (**Original
/Photocopy documents**) for verification at timeof
Admission in Institute of Paramedical Science, GIMS, at Greater Noida to the respective faculty.

List of certificates Submitted:

S.NO.	Check List	Yes/No.
1.	CPET Admit Card	
2.	Provisional Allotment Letter	
3.	CPET Marks sheet /Rank Card/Score Card	
4.	10 th Mark sheet and certificate.	
5.	12 th Mark sheet and certificate	
6.	Date of Birth certificate.	
7.	Five passport size photographs	
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9.	Migration certificate of concerned board/university	
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13.	Government issued Photo Identity Card /Aadhar Card/Pan Card/Voter ID	
14.	Fee Receipt of Deposited at ABVMU For Seat Confirmation	
15.	Fee Receipt of Deposited at allotted college for Document Verification	
16.	Guardian & Local Guardian Photographs	

The candidate has also submitted the Demand Draft with the following details

Amount

D.D. Number

Name of Bank with branch.....

D.D. Date On In Institute of
Paramedical Science, GIMS Greater Noida.

Name & Signature of Candidate

Name & Signature of Verification Officer

Name & Signature of Coordinator

Principal
Institute of Paramedical Science, GIMS



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ADMISSION FORM - 2024- 2025 (CANDIDATE INFORMATION)

Fill the form in capital letter

Mode of Admission: Quota/ Reserved / State Quota / Others.....

CPET Roll No / Registration No..... Marks / Score.....

Percentage.....

Rank..... Rank category Sub category rank.....

Category..... (General / SC/ ST/OBC/Others.....

Religion..... Caste.....

Name of the candidate

Candidates Mobile No..... Email Id.....

Fathers Name: Phone / Mob No.....

Email ID:

Mothers Name: Phone / Mob No.....

Email ID.....

Date of Birth: Single / Married.....

Duration of stay in Uttar Pradesh state (In years).....

Permanent Address:.....

Pin code:



Right finger	Left Finger

Impression of Index Finger

Fathers Occupation.....Annual Income.....

Mothers OccupationAnnual Income.....

Local Guardians Name & Address:

Pin code No.....Phone / Mobile No.....

EDUCATIONAL QUALIFICATION

Name of The Exam	Year of Passing	University / Board	School/College Name	Marks Obtained	Percentage
High school					
Intermediate				Physics	
				Chemistry	
				Biology	
				Computer Science/Statistics	
				Electronics/Psychology	
B.Sc					
Others					

1. Have You Obtained Certification In Any Other Course.....
2. Have You Received Any Awards / Recognitions Received From Local, State or International Bodies? Mention
.....
3. Have You Participated or Have Interest In Any Co - Curricular Activities Like Sports, Cultural Activities Etc.?
.....
4. Specify Your Strength & Weakness?
.....
5. Have You Received Any Scholarship During Schooling? Yes / No Specify The Same.....
6. Have You Undergone Any Disciplinary Action Against You During Your Study Period, If Yes Mention?
.....
7. Have You Been Subjected, Witnessed or Punished Under Any Legal or Offensive Act?
.....
8. Do You Have Any Known Illness? Are You on Medication? Specify?
.....
9. Have You Been Vaccinated Against Covid/ Hepatitis (Yes / No).....
Mention The Name of The Vaccine.....

Guardians Signature: Relationship with the candidate.....

Candidates Name:

Mobile No:

Date:

Candidates Mail Id.....

Adhar Card No.....

Candidates Signature.....



GOVERNMENT INSTITUTE OF MEDICAL SCIENCES

Greater Noida, Gautam Buddha Nagar-201310, Tel-0120-2341738, 9911188208

Website: www.gims.ac.in, Email: gimgnoida16@gmail.com

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GIMS file No.....

Date:.....

STUDENT MEDICAL EXAMINATION PROFORMA – 2024-25

1. Name of Student.....DOB..... Sex- M / F

(As done on CPET apply Form)

2. Father's Name.....

3. Address with Mobile No.....

.....

4. Roll No. (CPET).....Rank (CPET).....

Cat. Rank.....Sub Cat. Rank.....

5. Identification Mark (As filled in CPET Application Form and would be verified by Dept. of Sur.):

(a)

(b)

Candidate's
Photo with
Signature

Signature of Student

Date:.....

Investigation: CBC: Blood sugar: RBS..... Blood Urea / S Creatine - X-ray chest (No.....Date.....) Blood Group:Other:.....						
Physical Capacity (i) Height.....cm (ii) Weight actual..... Kg						
1. Surgery: (a) Locomotors System NAD/ Other:-		(b) Spine			NAD/	
2. EYE: (a) Distant Vision	R	L	(b) Near Vision	R	L	Other:-
Without Glasses			Without Glasses			
With Glasses			With Glasses			
3. ENT: (a)Hearing	R	L	Both			
FW	cms	cms	cms			
CV	cms	cms	cms			
TM, Nose, Throat & Sinuses						
4. Gynaecological Exam (For Female Candidates)						
5. Medicine: (i) Pulse...../m (ii) Resp..... (iii) BP mm/Hg (iv) CVS..... (v) Respiratory System (vi) Gastro Intestinal System (vii) Central Nervous System Any other Physical/ mental disability.....						
This is to certify that Mr/Ms.....Roll No (CPET -2024)...who has been allotted for UG Paramedical Course is found eligible/ illegible after medical examination.						
Member 1		Member 2		Chairperson, Medical Board		

ANNEXURE-I

AFFIDAVIT BY STUDENT

I,.....S/O,D/O,W/O.....

Residence.....

CPET Roll No.....Rank No..... Rank

Category.....

1. Having been admitted to Institute of Paramedical Science, GIMS Greater Noida UP. (Name of the institution) have received a copy of the AICTE/UGC regulation on curbing the menace of ragging in higher Education Institute, 2009, (hereinafter called the "Regulation") carefully and understood the provisions contained in the side Regulations.
2. I have in particular perused clause 3 of the Regulation and am aware as to what constitute ragging.
3. I have also in particular perused clause 7 and clause 9.1 of the regulation and am fully aware of the penal and administrative action that is liable to be taken against my ward in case of he/ she is found guilty of or abetting ragging, actively or passively or being part of conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that
 - a) My ward will not indulge in any behavior or act that may be constitute as ragging under clause 3 of the Regulations.
 - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constitute as ragging under clause 3 or the Regulations.
5. I hereby affirm that, if found guilty of ragging my ward is liable for punishment according to the clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for time being in force.
6. I hereby declare that my ward has not been expelled or debarred from admission in any institutions in the country of the declaration is found to be untrue admission of my ward is libel to be cancelled.

Declared thisday of monthyear.

Signature of Deponent

Name

.....Telephone.....

Address.....

VERIFICATION

Verified that the content of this affidavit is true to the best of my knowledge and belief. No part of the affidavit is false and noting has been concealed or misstated therein.

Verified at(place) on this the(Day) of (Month) and (Year).

Signature of Deponent

Solemnly affirmed and signed in my presence on this the (Day) of..... (Month).....(year) after reading the contents of this affidavit.

ANNEXURE-II

AFFIDAVIT BY THE PARENTS/GUARDIAN

I, Mr. /Mrs. /Ms. (Father/Guardian Name) of Mr. /Ms..... (Students Name)CPET Roll No.....RankRank category.....

1. Having been admitted to(Name of the institution) have received a copy Of the UGC regulation on curbing the menace of ragging in Higher Education 2009. (Hereafter called the "Regulation") carefully read and fully understood the provision contained in the said Regulations.
2. I have in particular perused clause 3 of the Regulation and am aware as to what constitute ragging.
3. I have also in particular perused clause 7 and clause 9.1 of the regulation and am fully aware of the penal and administrative action that is liable to be taken against my ward in case of he/ she is found guilty of or abetting ragging, actively or passively or being part of conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that
 - a) My ward will not indulge in any behavior or act that may be constitute as ragging under clause 3 of the Regulations.
 - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constitute as ragging under clause 3 or the Regulations.
5. I hereby affirm that, if found guilty of ragging my ward is liable for punishment according to the clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for time being in force.
6. I hereby declare that my ward has not been expelled or debarred from admission in any institutions in the country of the declaration is found to be untrue admission of my ward is libel to be cancelled.

Declared thisday of month.... year.

Signature of Deponent.....

Name.....

Address..... Telephone/ mobile

No.....

VERIFICATION

Verified that the content of this affidavit is true to the best of my knowledge and belief. No part of the affidavit is false and noting has been concealed or misstated therein.

Verified at (Place) on this the(Day) of (Month) and (Year).

Signature of Deponent

Solemnly affirmed and signed in my presence on this the (Day) of..... (Month)..... (Year) after reading the contents of this affidavit.