

**For Any MBBS /PG/Nursing/Paramedical Admission Related
Queries Contact: 9911188208**

As per the orders of Directorate General of Medical Education, Uttar Pradesh, the PG admission of the academic session 2022-2023 of the following medical/dental colleges will be done by Government Institute of Medical Sciences, Greater Noida:

S. No.	Medical College	Dental College
1	School of Medical Sciences & Research, Sharda University Greater Noida	ITS Dental College, Greater Noida
2	GS Medical College, Hapur	School of Dental Sciences, Sharda University

**SOP FOR UP NEET P G COUNSELLING 2022 AT
GIMS**

Room no -1 [Enquiry section]

- Representative from each college to be present to inform candidates regarding fee structure, DD, Bond document.
- Issuing of form for document verification.
- Candidate is asked to arrange all document and two sets of photocopy in desired format .



[PROCEED FOR DOCUMENT VERIFICATION]

Room No-2 [Document verification]

- All original document needs to checked.
- All passport size photograph
- Affidavit should be present
- DD amount to be verified different college or different branch (Clinical and pre-para clinical
- For in service candidate, date of relieving to be verified
- Relieving should be through CMO from Lucknow.

- Register to be maintained.
- Anything missed should be mentioned in bold & communicated to desk 4 immediately.



[MEDICAL EXAMINATION]

Room Desk-3

- Candidate should give sample in central lab till 2 PM
- Radio OPD -1 for X-ray
- ENT
- Ophthalmology
- Medicine
- Surgery
- Final medical fitness certificate to counter signed by Chairperson.



[PORTAL ENTRY] & [DOCUMENT SUBMISSION]

Room Desk-4

- Once documents are verified and the medical examination done, candidate is admitted on UP NEET portal.
- Candidate is asked to verify the entered details before submission
- Once submission is done, candidate should take screenshot of it and also verify it in admitted candidate list
- Register to be maintained
- Once the portal entry is done, the candidate reaches this desk.
- He is provided with document and DD submission from which is also "Admission receipt".
- Candidate fills this form.
- An entry register is to be maintained for DD details and document submission it should contain contact details of candidate and sign.
- Once all original documents, photocopies and DD are collected, Admission Receipt should be mentioned on the receipt and register.
- At the end of day, synchrony b/w registers of Desk -2,3& 4 to be established to avoid discrepancy.



GOVERNMENT INSTITUTE OF MEDICAL SCIENCES

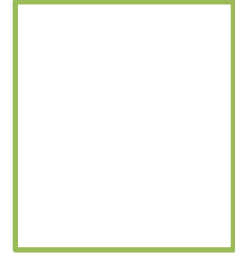
Greater Noida, Gautam Buddha Nagar-201310, Tel-0120-2341738, 9999683844

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

(An Autonomous Institute under Govt. of U.P)

UP NEET PG-2021 COUNSELLING DOCUMENT VERIFICATION & ADMISSION

Please ensure that you have the following documents in original
Along with one set of self-attested photocopies of the same and
arrange them in the sequence as per checklist.



Name of Candidate:

Father's/Mother's name:.....

Address:

.....

NEET PG Roll No.:.....Counselling Regd. No.....

Contact Number & e-mail:

D. D. No.....Amount Date.....Bank.....Branch.....

CHECKLIST

S. No.	Cheek List	Yes/No.
1.	UNIQUE ID – Aadhar/Pan/Voter ID	
2.	High School (10 th) Certificate as proof of date of birth	
3.	10 th & 12 th Mark Sheet	
4.	Mark sheet of all professional examinations	
5.	MBBS/BDS passing out certificate or degree	
6.	Compulsory Rotatory Internship completion certificate before 31/07/2022	
7.	Permanent Registration certificate (U.P. State/MCI/DCI)	
8.	Employers relieving certificate if employed	
9.	SC/ST/OBC/EWS/Physically handicapped Certificate, if applicable	
10	Copy of Allotment letter (as downloaded)	

11	Admit Card of NEET PG 2021	
12	NEET PG COUNSELLING Registration	
13	NEET PG Score Card	
14	Ten Coloured Passport Size Photos	
15	D.D. of prescribed Fee : <ul style="list-style-type: none"> G.S.M.C – 21,63,946 for clinical Branch Sharda University – (25,40,649), (13,68,025) & 9,77,116) for Clinical, Pathology & Non Clinical	
16	BOND	

Date:

Signature of Candidate

Place:

Signature Verified BY



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DEMAND DRAFT RECEIVING CERTIFICATE

This is to certify that the Dr. S/o. D/o.

W/o with NEET P.G. Rank

..... Roll No.has been admitted in M.D/M.S

Course in the subject of of

.....

Collage for 2022-23 academic year through UP NEET P.G. counselling 2022 and has submitted the Demand Draft with following details.

1. Amount
2. D.D. Number
3. Name of Bank
4. D.D. Date

On In Government Institute of medical sciences, Greater Noida

Dr Priyanka
Associate Professor
Government Institute of medical sciences,
Greater Noida

AFFIDAVIT BY THE STUDENT

IS/O,D/O,W/O.....

Residence

NEET P.G. Roll No.Rankagree to the following:

1. Candidate leaving the seat **after** the mop-up counselling or at any time before completion of the course. Will deposit total amount of tuition fee the entire course.
2. Candidate leaving the seat at least **Two days before mop-up** round then only his security deposit and 50% tuition fee deposit at admission will be forfeited.

Declared thisDay ofMonthYear

NameTelephone

Address

Verified that the contents of the affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been cancelled or misstated therein.

Verified at(place) on this the(day) ofmonth..... Year.

Solemnity affirmed a signed in presence on this the(day) ofmonth
..... (Year) after reading the contents of the affidavit.

Signature of Deponent

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Website: gims.ac.in, Email-medicaluniversitygnoida@gmail.com,
director@gims.ac.in

STUDENT MEDICAL EXAMINATION PROFORMA – 2020-21

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

(As done on NEET apply Form)

2. Father's Name.....

3. Address with Mobile No.....

4. Roll No. (NEET).....Rank (NEET).....

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

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

(a)

(b)

Nominated Member Sign.

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 (iii) Ideal Wt.....Kg (iv) BMI..... (v)

Waist.....cm

(vi) Chest Full Expiration.....cm (vii) Range of Expansioncm

1. Surgery: (a) Locomotors System NAD/ (b) Spine NAD/

Other:-

2. EYE: (a) Distant Vision	R	L	(b) Near Vision	R	L	Other:-
Without Glasses			Without Glasses			
With Glasses			With Glasses			

Audiometry record

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 (NEET-2020).....who has been allotted GIMS, Greater Noida for MBBS Course is found eligible/ illegible after medical examination.			
Date:	President Med. Board		

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9911188208

Website: gims.ac.in, gimsgnoida16@gmail.com

UNDERTAKING /AFFIDAVIT BY THE STUDENT

1. Name of student- _____ GIMS ID (File No)----
 2. Fathers name _____
 3. Tel No— _____ Email ID---
 4. Aadhar No.
 5. Address (as per Aadhar)
 6. Cast - General / Reserved cat ----- (Enclose UP state certificate of 2022)
 7. Domicile state (If applicable)- (UP state Certificate Enclosed)
- [CASTE AND DOMICILE CERTIFICATES MUST BE FROM UTTAR PRADESH & OBC CERTIFICATE OF CURRENT YEAR]**
8. Date of Birth

-
9. NEET UG /PG. Roll No.
 10. NEET Marks _____ All India Rank _____ State Rank _____
 11. MBBS College (PG)
 12. College Alloted _____
 13. Demand Draft: No..... Date.....DD Amount..... Bank Name..... Branch.....

This is to certify that all the information / documents submitted by me are true and correct to the best of my knowledge. No part of the declaration is false and there is nothing to hide on my part. I am eligible for Seat allotted in Uttar Pradesh as per current state guidelines.

I will be held responsible for any discrepancies/false statement or document and will bear all the consequences there upon and would lead to cancellation of my seat.

Declared thisDay ofMonthYear

Signature of
Parent/ Guardian

Signature of
Student /Deponent