To,			
The A	sst. Regist	rar (Acad	emic),
Lady	Hardinge	Medical	College,
New I	Delhi.		

Subject:	Admission	to	<b>MBBS</b>	Course	based	on	<b>National</b>	Eligibility	cum	Entrance	Test	(NEET)
	nerit/marks											,

Sir,

I hereby report for admission to UG Course (MBBS) at Lady Hardinge Medical College based on Merit/marks of National Eligibility cum Entrance Test NEET UG – 2020 for the Session 2020-21 with reference to letter of M.C.C., Director General of Health Services dated \_\_\_\_\_and submit the following documents in original:

## Step I:

- a) **Online Registration at Delhi University website (**at <a href="www.fmsc.ac.in">www.fmsc.ac.in</a>), Certificate Uploading and "Printout" of DU Form.
- b) **Online Fee Payment** at <a href="www.fmsc.ac.in">www.fmsc.ac.in</a> (amount to be verified from DU website as per category) and "printout" of Receipt.
- c) Anti-ragging undertaking (Both from the *Student* and *Parent*) (i.e. submitted through online www.antiragging.in OR www.amanmovement.org) and Acknowledgement Receipt obtained at candidate's own e-mail id (printout to be enclosed in file).

### Step II:

- a) **Surety Bond in stamp paper** of Rs.100/- for **Rs. 03 Lakh** (Rupees Three lakhs) duly signed by **two** Sureties (Aadhar Card is must of both) and attested by Notary (as per Performa available at www.fmsc.ac.in).
- b) **Affidavit in stamp paper** of Rs.10/- if there is a gap of six month or more.

<u>Step III:</u> College fee deposition of Rs. 1355/- (Rupees One thousand three hundred fifty five only) for all categories vide demand draft in favor of "Director, Lady Hardinge Medical College" payable at New Delhi. Demand draft must be issued after the date of publication of result.

Bank Name......DD No.......Date.....

## Step IV:

- 1. Provisional allotment letter issued by Medical Counselling Committee (MCC).
- 2. Aadhar Card Photocopy (original to be shown for verification).
- 3. NEET 2020 Examination Roll No. & Admit Card.
- 4. NEET 2020 Result (Score Card).
- 5. Five (05) Passport size Color Photograph.
- 6. One Passport size Color Photograph of each parents/guardians.
- 7. Matriculation (10th Class) Marksheet and Passing certificate showing date of birth.
- 8. 12th Class Passing Certificate & Marksheet.
- 9. Certificate from competent authority on prescribed form if belonging to reserve category SC/ST/OBC/Armed Forces Personnel/PWD. (The Non-Creamy Layer Certificate should be issued on or after 01.04.2020).
- 10. Father's SC/ST Certificate.

Yours faithfully

- 11. Migration Certificate for ALL India Quota Students.
- 12. School Last Attended Certificate (from Principal of concerned School on prescribed Performa available at faculty website: <a href="www.fmsc.ac.in">www.fmsc.ac.in</a>)
- 13. Latest Character Certificate prescribed by CBSE issued by Principal of school last attended or any Gazetted Officer.
- 14. Overseas Citizen of India (OCI) card, if applicable
- \* One set of photocopies from serial no. 7 to 14 duly attested by student.
- # One additional photocopy of student's Caste Certificate duly attested by student.

Step V: Online locking of seat at MCC interface and confirmation of admission.

1 our britainity,
Signature of Student & Date
Student Name:
NEET Roll No
NEET Rank (All India Rank)
Student Mobile No.



# LADY HARDINGE MEDICAL COLLEGE & SMT. S.K. HOSPITAL, NEW DELHI

# Application Form for MBBS Admission (Session 2020-21)

F-								
Im	mportant Information:  Affix Your							
	The admission will be consummed Submission & Verification Conditions at the time of Original certificates are Of admission.	Recent Passport Size Photograph Here						
	1. Course applied for	•						
	2. Candidate's Name	{In CAPITAL LETTERS as per	r qualifying exam}					
	First Name	Middle Name		Surname				
	3. Date of Birth: Da	ay Month Year	Blood	l Group				
	<b>4.</b> Quota: All India /	DU / Govt. Nominee						
	5. Parent's Name and	d Address (IN CAPITAL LETTE	ERS}:					
	Father's Name		Mother's Name					
	Profession/ Designation		Profession/ Designation					
	Address (Office Address If Employed/ Business)		Address (Office Address If Employed/ Business)					
	E-Mail		E-Mail	-				
	Landline No.		Landline No.					
	Mobile No.		Mobile No.					

E-Mail/Mobile of either parent is a must.

F	Permane	nt Address:		Addres	s for Corresponder	ice:	
N	Mobile No	o:		E-Mail:			
<b>7.</b> (	Gender:	Male Fem	ale Trar	nsgender			
<b>8.</b> F	Religion						
•							
<b>9.</b> S	State			Nationality			
10.	Categor	y: SC/ST/OBC/	General/PH/	CW			
1	Aadhar I	No. of Candidate:					
11.	Bank A	Account Details of	Student:				
		of the Bank: nt No.:		1			
	IFSC (						
12.	Gross	Annual Income of	Family from all	sources:			
13.	Educa	tional Qualification					
	Class	School/ Institution	Board/ University	Year of Passing	Subjects	% Marks	% Aggregate
	10 <sup>th</sup>						
	12 <sup>th</sup>						
	Other						

6. Candidate's Address:

<b>14.</b> Details of 12 <sup>th</sup> / Inter
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Subject	Max. Marks	Marks Obtained	Percentage
Physics			
Chemistry			
Biology			
Total(above 3)			
English			

15.	DU Rank:	EET a Rank: ry Rank:			
Г	Subject	Max. Marks	Marks Obtained	Percentage	Percentile Score
	Physics				
	Chemistry			1	
	Biology				
1	Γotal				
	Details of Passin	ng Last Hindi Examinatio Class		Year of Passing	
				1001 011 0001118	•
	I do solemn	ly declare that:			
	<ul><li>2. I under force a inside</li><li>3. If, at a applica</li><li>4. Caste</li></ul>	aformation given in this a edge and belief. ertake that if admitted, I at present or that may be the College or outside the any time subsequent to re ation form is false. The au Certificate provided for se pancy found during verific	will strictly abide all to be made/ altered/ mode at will interfere with its my admission, it is disc athorities may take any seeking admission und	he rules and regulifies hereafter an orderly administrate overed that any further action agder reserved cates	ulations of the College in ad will do nothing either ration and discipline. information given in this ainst me.
	Name	of the Candidate	S	Signature of the	Candidate

Affix Your Mother's Recent Passport Size Photograph Here	Affix Your Father's Recent Passport Size Photograph Here
Signature of Mother/Guardian	Signature of Father/Guardian
Name:	Name:
	FFICE USE ONLY
	(Course
Signature: Name: Designation:	
Signature: Name: Designation:	

Office superintendent Academic Section, LHMC Assistant Registrar (Acad.)

Note: Attested copies of all the essential documents must be attached.

# ANTI-RAGGING UNDERTAKING BY PARENT / GUARDIAN

1.	I, Mr./Mrs/Ms. (Full	Name	of	the
	Parent/Guardian),Father/Mother/Guardian of			(Full
	Name of Student) who has been admitted to Lady Hardinge Medical Colle	ge, New D	Delhi	have
	carefully read the regulations on curbing the Menace of Ragging in H	ligher Ed	lucat	ional
	Institutions, 2009, and have fully understood the provisions conta	ained in	the	said
	regulations.			
2	I have perised in particular all the clauses of the Regulations and Lan	a autore a	e to	what

- **2.** I have perused, in particular, all the clauses of the Regulations and I am aware as to what constitutes ragging.
- **3.** I have also perused, in particular, all the clauses of the Regulations and I am fully aware of the Penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of ragging, abetting ragging actively or passively, or being part of a conspiracy to promote ragging.
- **4.** I hereby solemnly aware and undertake that:
  - **a.** My ward will not indulge in any behaviour or any act that may constitute ragging under the concerned clause of the Regulations.
  - **b.** My ward will not participate in or abet or propagate through any act of commission or omission that may constitute ragging under concerned clause of the Regulations.
- **5.** I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to the concerned clause of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any other law in force at that time.
- **6.** I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of ragging, abetting or being part of a conspiracy to promote ragging. And further affirm that, In case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Note: Please also submit online anti ragging on antiragging.in/site/affidavits\_registration\_form.aspx

Digitatur	o or raione, duaran	
Name:		
Address:		
Mobile No.:		
Date:		•••

Signature of Parent/Guardian

# ANTI-RAGGING UNDERTAKING BY STUDENT

	in the said regulations.
2.	I have perused, in particular, all the clauses of the Regulations and I am aware as to what constitutes ragging.
3.	I have also perused, in particular, all the clauses of the Regulations and I am fully aware of the Penal and administrative action that is liable to be taken against me, in case I am found guilty of ragging, abetting ragging actively or passively, or being part of a conspiracy to promote ragging.
4.	I hereby solemnly aware and undertake that:
	<b>a.</b> I will not indulge in any behaviour or any act that may constitute ragging under the concerned clause of the Regulations.
	<b>b.</b> I will not participate in or abet or propagate through any act of commission or omission that may constitute ragging under concerned clause of the Regulations.
5.	I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to the concerned clause of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any other law in force at that time.
6.	I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of ragging, abetting or being part of a conspiracy to promote ragging. And further affirm that, In case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.
No	ote: Please also submit online anti ragging on antiragging.in/site/affidavits_registration_form.aspx
	Signature of Student
	Name:
	Address:
	Mobile No.:
	Date: