

महाराष्ट्र शासन
GOVT. MEDICAL COLLEGE, AURANGABAD.
शासकीय वैद्यकीय महाविद्यालय, औरंगाबाद.
Phone Numbers: 0240-2402412 – 17 Ext.510 Fax: 0240-2402418 - 19
Web site: www.gmcaurangabad.com e-mail: deangmca@gmail.com

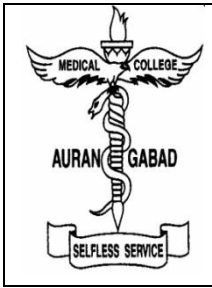
Date: 08/09/2017

NOTIFICATION

All the selected students for Certificate Course in Modern Pharmacology 2017-18 at Govt. Medical College, Aurangabad should follow following instructions and accordingly report with all details required.

- 1) Download & print this PDF file and fill all the details. Holding Certificate & Admission order in two copies.
- 2) All original documents enlisted below to be kept in a Button Folder file.
- 3) Prepare two sets of attested photocopies & Two Passport size photo of all original documents.
- 4) Students to note that the Demand Drafts (D.D.) of Fees should not have any error/spelling mistakes in the name desired. Fees will not be accepted in cash.

Sd/-
DEAN
Govt. Medical College
Aurangabad



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GOVT. MEDICAL COLLEGE, AURANGABAD.
शासकीय वैद्यकीय महाविद्यालय, औरंगाबाद.
Phone Numbers: 0240-2402412 – 19, 2402028 Fax: 0240-2402418 - 19
Web site: www.gmcaurangabad.com e-mail: deangmca@gmail.com

No.GMCA/ACAD/Mod.Pharma.Adm. / /2017, Date:-

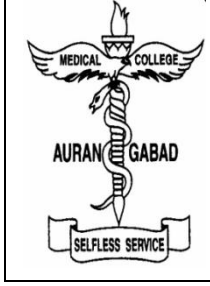
HOLDING CERTIFICATE
CERTIFICATE COURSE IN MODERN PHARMACOLOGY

This is to certify that Dr. _____
is Admitted in this college on / /2017 to Certificate Course In Modern
Pharmacology for the Academic Year 2017-18. His/Her following **ORIGINAL**
CERTIFICATES are retained in this College. (*Sets to be prepared in the following
sequence*)

Sr. No.	Original Documents Required	Available YES/No
1	Selection letter with allotment of college	
2	Date of Birth Proof (Date of Birth Certificate/SSC Certificate/T.C./Driving Licence/ Pan Card/Aadhar Card)	
3	Homeopath Degree Certificate	
4	Registration Certificate of Maharashtra Homeopathic Council, Mumbai.	
5	Change of the Name..(if Applicable)	
6	Caste Certificate....(For Reserve Category)	
7	Caste Validity Certificate	
8	Non Creamy Layer Certificate..	
	Demand Drafts Of Fees as Applicable...	
	D.D. No: Rs. Dt. / /2017	
	Eligibility Fees: D.D. No: Rs. Dt. / /2017	
	(Please write-down ' <u>YES/No</u> ' carefully)	

DEAN
Govt. Medical College,
Aurangabad

To,
Dr. _____
Govt. Medical College, Aurangabad.



महाराष्ट्र शासन
GOVT. MEDICAL COLLEGE, AURANGABAD.
शासकीय वैद्यकीय महाविद्यालय, औरंगाबाद.
दुरध्वनी क्रमांक 0240-2402412 - 19, 2402028 फॅक्स क्र.0240-2402418 - 19
e-mail: deangmca@gmail.com

No.GMCA/ACAD/

/2017,

Date:-

OFFICE ORDER

Sub: - Govt. Medical College, Aurangabad.
Admission to Certificate Course in Modern Pharmacology
for the year 2017-18

Ref: - MUHS Letter No. _____ Date:-

With reference to above cited subject, you are provisionally admitted to Certificate Course in Modern Pharmacology on dt. / /2017 at Govt. Medical College, Aurangabad for the year 2017-18 subject to the following conditions.

1. You will have to pay prescribed fees (Demands Draft only) as per rules before joining the course.
2. You will have to obtain Eligibility Certificate from the **Maharashtra University of Health Sciences, Nashik.**
3. Your admission is provisional & subject to final confirmation from **Maharashtra University of Health Sciences, Nashik.**
4. You should report to this College on Prescribed date as per MUHS Notification.

DEAN,
Govt. Medical College,
Aurangabad.

To,
Dr. _____

Govt. Medical College, Aurangabad.

Application for admission

**Recent
Passport size
Photograph**

Name: _____

Address (In Capital): _____

Mobile No.Student_ _____

Phone No. (Res.)with code _____

Date: / /2017

To,
The Dean,
Govt. Medical College,
Aurangabad.

Sub: - Joining in Certificate Course in Modern Pharmacology at Govt. Medical
College, Aurangabad

Ref:- Selection letter/List : (printout attached)

R/Sir,

I the undersigned Dr. (Full Name in Capital) _____
_____ has been selected for Certificate Course in Modern Pharmacology in Govt.
Medical College, Aurangabad as per the Selection letter/list of MUHS Nashik.

Kindly enroll me in your college as Certificate Course in Modern Pharmacology student
for the Academic Year 2017-2018.

Thanking you.

Yours faithfully,

(Name _____)

STUDENT INFORMATION

GOVT.MEDICAL COLLEGE, AURANGABAD 431 001
ADMISSION For Certificate Course in Modern Pharmacology
YEAR 2017-2018

1	Name of the Student as mentioned on SSC Certificate (in Capital)	
2	a) Date of Birth	
	b) Place of Birth	
3	Aadhaar No.	
4	e-mail Address of Student	
5	Gender (√)	Male / Female
6	Date of Admission	/ /2017
7	a) Category	
	b) Caste	
	c) Religion	
8	Domicile State	
09	Homeopath Degree Passing Year	
	Registration Certi No. of Maha Homeopathic Council, Mumbai	
10	Blood Group	
	Mark of Identification (two)	1)
		2)
11	Guardian / Father's Full Name	
	Name of Mother	
12	Residential Address with PIN code	
	Mobile No. of Student	
	Phone No. of Res. with STD Code	
13	*Willingness about organ donation after Accidental Death	Yes / No

* As per Maharashtra University of Health Sciences eligibility form.

Date: / /2017

Place: Aurangabad

Signature of Candidate

Demand Draft Details

For Certificate Course in Modern Pharmacology Admission in the year 2017-18

Selected students are instructed to submit the DD as follows

Demand drafts to be drawn from Nationalized banks

(No errors or spelling mistakes in the DD will be accepted)

For All Open Category/Reserve category Students

Two Separate DD as Follows

1. Rs.50,000/- as D.D.

In Favor of : **DEAN, GOVT. MEDICAL COLLEGE, AURANGABAD**

(Payable at Aurangabad)

2.Rs.5000/- as DD

In Favor of: **Registrar MUHS Nashik**

(Payable at Nashik)

Note:

- ***At any cost cash/cheque will not be accepted.***
- ***The demand draft will be deposit in the accounts only after final confirmation of the admission by MUHS Nashik./status retention by the student.***
- ***If students are allotted another college in subsequent rounds of In such situation, all the DDs will be refunded back to the student, all such students will be required to pay an amount of **Rs.1500/- as cash** in the cash section of accounts department.***

