

# Rajendra Institute of Medical Sciences, Ranchi.

## NOTICE

### REPORTING FOR THE ADMISSION OF MBBS COURSES 2020-21

#### FOR STATE COUNSELLING

All the candidate who have been allotted MBBS seat in the Round-2nd of UG State Counselling in RIMS are hereby directed to submit the Self Attested documents as mentioned in the checklist enclosed below as well as submit with original affidavit which had been given format from RIMS, Ranchi at the time of Counselling.

Reporting Date for admission: - 22-12-2020 To 23-12-2020

Timing: - From 9:00 AM onwards

Venue of admission:-3<sup>rd</sup> floor ,Education Unit, Administrative Building, RIMS, Bariatu, Ranchi.

Contact details of officials /staffs handling admission process: -

1. Prabhat Oraon - 9110079848

Note:-

Anti Ragging Affidavit - Aman Movement  
website address [www.amanmovement.org](http://www.amanmovement.org)

Fee Structure only for the time of admission :-

1. General & OBC Category Boys –Rs. 10,050/-
2. General & OBC Category Girls – Rs. 4050/-
3. ST/SC Category Both Girls and Boys – Rs.4050/-

  
18/12/2020  
Dean,

Rajendra Institute of Medical Sciences, Ranchi.

  
18/12/20

CHECK SHEET FOR ADMISSION TO M.B.B.S. COURSE.-2020

01. Name of the candidate :
02. NEET -2020 Roll No. :
03. Date of birth certificate whether completes 17<sup>th</sup> years on 30.06.2020.: Yes/No
04. I.Sc./+2 equivalent examination marks with requisite subjects. Phy. Chem. Bio. Eng. L/L
05. Martric/equivalent Certificate Available /Not available
06. Martric/equivalent Admit Card Available /Not available
07. I.Sc./10+2/ equivalent Certificate Available /Not available
08. I.Sc./10+2/ equivalent Marks Sheet Available /Not available
09. I.Sc./10+2/ equivalent Admit Card Available /Not available
10. Character Certificate Available /Not available
11. Migration Certificate Available /Not available
12. Category and related Caste Certificate Available /Not available
13. Residential Certificate as per Prospectus Available /Not available
14. C.L.C./S.L.C. Available /Not available
15. NEET Examination -2020 Admit Card Available /Not available
16. Comparison of Photographs of Admit Card & Application Form.
17. Comparison of Signature on Admit Card
18. Comparison of Signature on Admit Card & on placement letter.
19. Call letter : Available /Not available
20. Placement letter of NEET -2020 Available /Not available
21. Mobile No.
22. Remarks. Available /Not available

Fit for admission/ Pending/ Not fit for admission.

1.

2.

3.

---

Signature of the panel of officers.

APPLICATION FORM TO BE FILLED UP AT THE TIME OF ADMISSION TO MBBS  
COURSE AT RAJENDRA INSTITUTE OF MEDICAL SCIENCES, RANCHI.

01. Name of the candidate. : \_\_\_\_\_
02. Date of Birth : \_\_\_\_\_
03. Category (For NEET candidates) : SC/ST/OBC/RCG/BC/Gen.
04. Father's Name : \_\_\_\_\_
05. Address. Correspondence

\_\_\_\_\_

\_\_\_\_\_

06. Address. Permanent

\_\_\_\_\_

\_\_\_\_\_

07. Local Guardian's Name & address (if any)

\_\_\_\_\_

08. Roll No. in NEET Examination : \_\_\_\_\_

09. Merit No. in NEET Result : \_\_\_\_\_

10. Details regarding passing +2 or I.Sc. or equivalent examination.

(a.) Name of the Institution from where passed :

(b) Subject	Phys.	Chem.	Bio.	Eng.as L/L	RBH
Full Marks					
Pass Marks					
Marks Obtd.					

Result : Pass/Fail

(c) Year of passing :

11. Name of the institution in which the candidate is admitted/has remained studying after Passing +2 or I.Sc. or equivalent Exam.

**DECLARATION**

Certified that the above statements are true and if either of the above is proved to be false, legal action (including removal of my name from college register) may be taken against me.

Date : \_\_\_\_\_

Signature of the candidate.

: 2 :

I understand that my admission to M.B.B.S. course is provisional and subject to the subsequent judgment of the Hon'ble High Court/order of Jharkhand Govt. if any, and status of my admission to M.B.B.S. course will be Governed accordingly and I shall not claim continuation in the course on the grounds of this provisional admission.

Date : \_\_\_\_\_

Signature of the candidate

I undertake that I will maintain high standards of discipline in the college and hostel campus and shall be governed by the rules and regulation of the college and the hostel in force at the moment and the rules and regulation to be framed in future by the Director or any other competent authority. I further undertake that if my conduct is found to be contrary to the above, legal action (including removal of my name from college register) may be taken against me by the college authorities or any other such competent authority.

Date : \_\_\_\_\_

Place : \_\_\_\_\_

Signature of the candidate

I am in full agreement with the above statement and undertaking of my son/daughter/ward.

Date : \_\_\_\_\_

Place : \_\_\_\_\_

Signature of the parent/guardian

I (Name) \_\_\_\_\_ address/designation \_\_\_\_\_  
\_\_\_\_\_ Father/Mother/Guardian of (Name  
of student) \_\_\_\_\_ do hereby undertake the full responsibility  
of his/her stay in this Institution on the college roll.

I further undertake that if my son/daughter/ward is found indulging in any action which is  
contrary to law or against the discipline of the campus including hostel the actions taken by the  
college and or hostel authorities will be acceptable to me which may include removal of name of  
my son/daughter/ward from college register.

I further undertake that whenever I am called by the Director and or Hostel authorities to  
have discussion regarding conduct of my son/daughter/ward I will turn up positively at the earliest.

Date : \_\_\_\_\_  
Place : \_\_\_\_\_

Full Signature of the Father /Mother (Guardian in  
case if Father /Mother both are not alive.)

### शपथ-पत्र

मैं एतद् द्वारा शपथ लेता/लेती हूँ कि मैंने राँची विश्वविद्यालय के राजेन्द्र आयुर्विज्ञान संस्थान,  
राँची में नामांकन हेतु आवेदन दिया है। यदि इस संस्थान में मेरा नामांकन हो जाता है, तो मैं  
विश्वविद्यालय द्वारा घोषित किसी भी परीक्षा के कार्यक्रम में परिवर्तन की माँग नहीं करूँगा/करूँगी यदि  
मैं इस घोषणा के विपरीत किसी तरह का आचरण करता/करती हूँ तो विश्वविद्यालय मेरे विरुद्ध  
किसी भी तरह की अनुशासनात्मक कार्रवाई करने को स्वतंत्र होगा।

आवेदक का हस्ताक्षर

पिता अथवा अभिभावक का हस्ताक्षर

I understand that

I (Name) \_\_\_\_\_ NEET Roll No \_\_\_\_\_ undertake voluntarily that my admission to 1<sup>st</sup> year M.B.B.S. course at Rajendra Institute of medical Sciences, Ranchi is provisional and the status of my this provisional admission will be governed by (subject to) the decision (s) of the Jharkhand Govt./Hon'ble High Court, in the matters related to above.

I further undertake that the decision (s) of the Jharkhand Govt. /Hon'ble High court in the matters related to above will be binding on me and I will be abided by those.

Signature of Father/Legal Guardian

Signature of candidate & date.

शपथ-पत्र

मैं \_\_\_\_\_ प्रथम वर्ष एम0बी0बी0एस0 कोर्स में सत्र \_\_\_\_\_ के अन्तर्गत इस संस्थान (राजेन्द्र आयुर्विज्ञान संस्थान, राँची) में नामांकन लिया हूँ/ली हूँ/ले रहा हूँ/ले रही हूँ अगर मैं इस संस्थान में किसी भी छात्र/छात्रा के साथ भविष्य में रेगिंग करता हुआ/करती हुई पाया जाऊँगां/पायी जाऊँगी तो माननीय सर्वोच्च न्यायालय के निर्देशानुसार जो भी कार्रवाई होगी उसे मैं सहस्त्र स्वीकार करूँगा/करूँगी (जिसमें शैक्षणिक संस्थान से बाहर निकाल दिया जाना भी शामिल होगा)।

छात्र/छात्रा का हस्ताक्षर \_\_\_\_\_

सत्र \_\_\_\_\_

प्रथम वर्ष एम0बी0बी0एस0 छात्र/छात्रा

# राजेन्द्र आयुर्विज्ञान संस्थान, राँची।

## घोषणा पत्र

- (1) मैं \_\_\_\_\_ पुत्र/पुत्री/पिता/पत्नी \_\_\_\_\_  
राजेन्द्र आयुर्विज्ञान संस्थान, राँची एतद् द्वारा घोषणा करता हूँ/करती हूँ कि मैं अन्तिम काउन्सेलिंग के उपरान्त नामांकन नहीं लेता हूँ/लेती हूँ तो उक्त कोर्स में नामांकन हेतु राज्य सरकार द्वारा नामित अन्य संस्थानों द्वारा आयोजित परीक्षा में सम्मिलित होने के लिए अगले एक शैक्षणिक सत्र के लिए वंचित कर दिया जाऊँगा/जाऊँगी। (A per Govt. notification vide letter No.9/चि०महा०-07-08/2014 (खड-1)-179(9)/राँची dated 24/04/2014)
- (2) इसके अतिरिक्त यदि मैं अगले शैक्षणिक सत्र में NEET U.G द्वारा चयनित होता हूँ/होती हूँ। तब अगले एक सत्र में चिकित्सा महाविद्यालयों में नामांकन से वंचित हो जाऊँगा/जाऊँगी।
- (3) यदि कोर्स पूर्ण करने के पूर्व छोड़कर किसी अन्य महाविद्यालय में नामांकन कराता हूँ/करती हूँ तो अर्थिक दण्ड के रूप में रू० 20,00,000/- (रूपये बीस लाख) भुगतान करूँगा/करूँगी तथा उक्त अवधि छात्रवृत्ति के मद में जो राशि प्राप्त करूँगा/करूँगी एक मुश्त संस्थान को वापस करूँगा/करूँगी। तत्पश्चात् ही मैं अपना मूल प्रमाण-पत्र संस्थान से वापस प्राप्त करने का हकदार रहूँगा/रहूँगी।

एम०बी०बी०एस० छात्र/छात्रा का नाम \_\_\_\_\_  
एवं हस्ताक्षर \_\_\_\_\_

प्रथम वर्ष एम०बी०बी०एस० सत्र \_\_\_\_\_

**RAJENDRA INSTITUTE OF MEDICAL SCIENCES, RANCHI.**

**Affidavit-Letter**

I, \_\_\_\_\_ Son/Daughter of \_\_\_\_\_ a student of MBBS course \_\_\_\_\_ session, Rajendra Institute of Medical Sciences, Ranchi hereby declare that (As per Govt. notification vide letter No.9/चिसहा0-07-08/2014 (खड-1)-179(9)/रॉची dated 24/04/2018)

1. I will be debar (debarred) from appearing in entrance examination for admission in Medical College nominated or funded by the state government, for one academic year.
2. Apart from this, even if I am selected for admission in next session through NEET U.G, I will be debarred from taking admission.
3. If I leave, the institution after last counselling for admission and before completion of the course and take admission in some other institution. I will have to deposit Rs. 20,00000/- Twenty lacs only as penalties.

Then only I will be eligible for getting back my original certificates deposited in the institute the live of admission.

Signature of MBBS Students





झारखण्ड संयुक्त प्रवेश प्रतियोगिता पराक्षा पत्र  
आईस सिटी परिसर, सिरखा टोली, नामकुम-तुपुवाना रोड, नामकुम, राँची - 834023

स्वास्थ्य जाँच प्रतिवेदन  
(आवेदक द्वारा भरा जाएगा)

1. अभ्यर्थी का नाम .....
2. क्रमांक ..... कोटी ..... भेदा क्रमांक .....
3. पिता/अभिभावक/पति का नाम .....
4. स्थायी पता .....
5. पत्राचार का पता .....

अभ्यर्थी का हस्ताक्षर  
(हिन्दी में)

अभ्यर्थी का हस्ताक्षर  
(अंग्रेजी में)

(स्वास्थ्य जाँच पदाधिकारी (डॉक्टर) द्वारा भरा जाएगा)

6. लिंग :- स्त्री/पुरुष
7. जन्म तिथि :-
8. उम्र :- वर्ष - माह - तिथि -
9. उँचाई (Height) सामान्य अवस्था (Normal Condition)  
फैलाव के साथ (With Expanded)

10. आँखों का जाँच :-  
क) बिन चश्मा के L R  
ख) चश्मा के साथ I R

11. वजन (कि० ग्रा० में) :-

12. शरीर पर उपलब्ध दो पहचान (1)  
(2)

13. क्या अभ्यर्थी किसी विमारी से ग्रस्त है अथवा इसे कोई असामान्य (Abnonmality) से श्री/श्रीमती/श्री स्वास्थ्य परीक्षण किया गया एवं उन्हे शरीरिक रूप से योग्य (Fit) अयोग्य (Unfit) पाये गये।

अभ्यर्थी का हस्ताक्षर (हिन्दी में)

अभ्यर्थी का हस्ताक्षर (अंग्रेजी में)

अभ्यर्थी का बायें हाथ के अंगुठे का निशान

स्वास्थ्य जाँच पदाधिकारी का हस्ताक्षर  
पंजीयन संख्या

## **NOTICE FOR ADMISSION MBBS/BDS 2020**

Please submit this affidavit along with other documents compulsorily.

### **AFFIDAVIT**

1. I..... son /daughter of .....resident of .....
2. I am having application no....., registration no. ....in Jharkhand merit list (neet UG 2020) .....
3. All the documents, certificates including domicile and caste certificate submitted by me are true and correct to the best of my knowledge.
4. If any document, certificate pertaining to my education/claim of reservation/claim of caste/the residential status/domicile status found wrong, false, forged, fabricated upon verification at any point of time during verification, I am liable to be disqualified and will undergo penal action as provided by court of law.

By the order of  
Admission committee