

Check List of Documents & Undertaking

(Admission to MBBS Course in Govt. Medical College, Kathua session 2026-27)

S. No.	Documents	Status/Remarks
1.	Particulars of Student (Annexure-I)	
2.	Domicile Certificate(Original)	
3.	Date of Birth Certificate (10 th Diploma/Marks Card) (Original)	
4.	Marks Certificate of 10th(Original)	
5.	Marks Certificate of 12th(Original)	
6.	Provisional Allotment Letter	
7.	Admit Card of NEET issued by NTA	
8.	NEET/BOPEE Result/Merit Rank issued by NTA	
9.	Proof of Identity (Aadhaar Card)	
10.	Transfer & Migration & Provisional Certificate(Original)	
11.	Category Certificate (If Any)	
12.	Income Certificate of Parents from all sources in case of EWS, Poor & Backward Class	
13.	Character Certificate issued from School/Gazetted Officer(Original)	
14.	Affidavit by student regarding abiding rules & regulations of Institution (Annexure-II)	
15.	Medical Fitness Certificate (Annexure-III)	
16.	Online Anti-Ragging Affidavit by Student and Parent	
17.	Admission & Degree Fee (Rs. 27330/- For JK Bose & Rs.28450/- for other than JK Bose) Note: Deposit the fee to this account through Online Mode and Enclose the Transaction Proof. Account No.: 0026040510000010 IFSC Code: JAKA0KATHUA	
18.	Five Recent Passport Size Photographs	
19.	Self Attested two sets photocopies of above documents	
20.	Original Set of Academic Qualification and other documents (Wherever Applicable)	
21.	Dak Pad 01 (For purpose of safeguarding documents)	
22.	Gap Affidavit (If any) (issued by 1 st class Magistrate for candidates above 18 years of age)	

Signature of the Student with Date

RAGGING IS PROHIBITED IN THIS INSTITUTION

Annexure-I

(Particulars of the Candidate seeking admission to MBBS Course in Govt. Medical College, Kathua for the session 2026-27)

1.	NEET/BOPEE Notification NO:		Dated		Affix your photograph here and self attest		
2.	Name of the Student						
3.	Mother's Name						
4.	Father's Name						
5.	Date of Birth						
6.	Aadhaar Card No.						
7.	Present Address						
8.	Permanent Address						
9.	Mobile No. (Student)		Mobile No. (Parents)				
10.	Email (Student)		Email (Parents)				
11.	Religion		Caste				
12.	Domicile Certificate No.		Date of Issuance:				
13.	Domicile District		Sex/ Gender				
14.	Father's Occupation		Mother's Occupation				
Academic Qualification							
10+2	University /Board	Roll No.	Year of Passing	PCB Marks	English Marks	Total Marks 12th	12 th %age
				Max. Obtained	Max Obtained	Max. Obtained	
NEET Roll No.	NEET Score	NEET Rank	State Rank	Selection Category	NEET Percentage		

Signature of the Student with Date

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Annexure-II

AFFIDAVIT

I _____ S/o, D/o _____

R/o _____

do hereby solemnly affirm and declare on oath as under:-

1. That I have passed 10+2 examination under Roll No. _____ from CBSE/JKBOSE/Others in year _____.
2. That after passing my 10+2 now I have been selected for MBBS course in Government Medical College, Kathua.
3. That I will maintain the discipline during my studies of MBBS course in Govt. Medical College, Kathua as well as in Hostel/ Campus.
4. That I will not indulge in any anti-social activities and will abide by terms and conditions and maintain the decorum and discipline of the college.
5. That I am soliciting this affidavit for reference and records of the concerned authority.
6. That I am not on the rolls of any other college/Institution/Governmental or semi-governmental organization nor am I working in any private institution.

Deponent

Verification:-

That the contents of the affidavit are true and correct to the best of our knowledge and belief, no part of it is false or wrong, hence verified at _____(place)on _____.

Deponent

GAP AFFIDAVIT

I _____ S/O, D/O _____ R/O _____

do hereby solemnly affirm and declare on oath as under:-

1. That I have passed 10 +2 examination during the session _____ as a regular student from (board)_____.
2. That I am seeking the admission in MBBS course during the session _____.
3. That during the gap period of _____ year/years I _____
4. That, after passing my 12th examination , I have not joined any Professional/Non Professional Degree or Diploma Course in any Institution/College/University in or outside the UT of J&K.
5. That, in case this statement proved incorrect I shall be personally responsible for the consequences arising there upon.

Deponent

Verification:-

Verified at _____ (Place) on _____ that the contents of this affidavit are true and correct and nothing has been concealed there upon.

Deponent

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Annexure-III

Medical Fitness Certificate

(To be signed by a registered medical practitioner holding a Medical Degree)

(TO BE SUBMITTED AT THE TIME OF ADMISSION)



I certify that I have carefully examined Mr./Ms.* _____
Son/daughter of Shri _____ whose
signature is given below. Based on the examination, I certify that he/she is in good mental and
physical health and is free from any physical defects which may interfere with his/her studies
including the active outdoor duties required of a professional.

Marks of Identification _____

Signature of the Candidate _____

Place:

Date:

Name & signature of the Medical Officer
with seal and registration number

* Strike whichever is not applicable.