

PERSONAL INFORMATION

NAME OF THE STUDENT (block letters)

.....

NAME OF THE COURSE:

ROLL NO (for office use only):

RESIDENTIAL ADDRESS:

.....

.....

.....

MOBILE NUMBER:

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E-MAIL ID:

PERMANENT ADDRESS:

.....

.....

.....

PHONE NUMBER OF PARENT/GUARDIAN

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BLOOD GROUP:

AADHAAR CARD NUMBER:

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CAR / MOTOR CYCLE NUMBER:



ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BIBINAGAR,
 HYDERABAD METROPOLITAN REGION (HMR) TELANGANA-508126, INDIA
अखिलभारतीय आयुर्विज्ञानसंस्थान, बीबीनगर
 हैदराबाद मेट्रोपोलिटन क्षेत्र (एच एम आर), तेलंगाना - 508126, भारत

CHECKLIST FOR VERIFICATION OF DOCUMENTS

S.No	Documents	YES/NO	Remarks
1.	Class 10 th marks sheet		
2.	Class 10 th passing certificate		
3.	Class 12 th marks sheet Subject: BMLS: English, Physics, Chemistry & Biology BMRIT: English, Physics, Chemistry & Biology/Mathematics (Marks Obtained-----out of-----%) 50% for Gen / OBC (NCL)/EWS (45% in case of SCs / STs Categories)		
4.	Class 12 th passing certificate		
5.	Migration certificate		
6.	Date of Birth Certificate (if Metric Certificate does not bear the same)		
7.	Offer letter		
8.	Seat Allocation Letter		
9.	Final Registration Slip		
10.	Admit card issued by AIIMS		
11.	Nationality Religion, state of Domicile		
12.	Caste certificate (in case of SC/ST/OBC/EWS candidates)		
13.	Disability certificate (PWBD)		
14.	Eight passport size colored photograph		
15.	Admission fee; Rs 1,145/- (bank draft/online transaction receipt)		
16.	Signed affidavit by parents / guardian and student regarding anti-ragging (softcopy is available at AIIMS Bibinagar website)		
17.	Willing for participation in next round		

Signature of candidate

Above mentioned original certificate verified by -

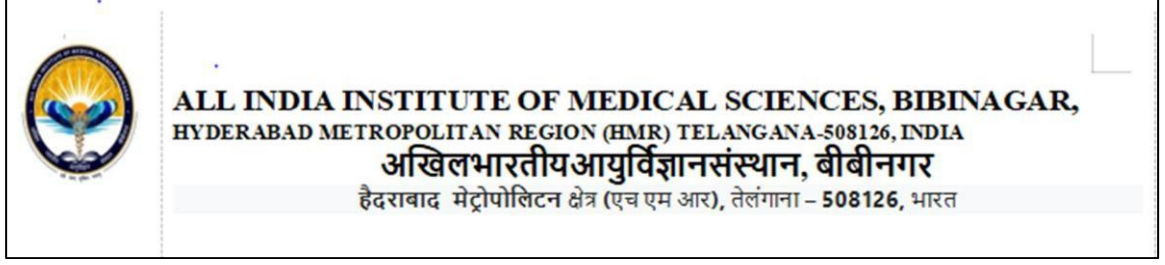
Admission officials - Name Signature

1) -----

2) -----

3) -----

4) -----

**DOCUMENT RECEIPT**

This is to certify that following Original/Xerox documents of Mr/Ms

.....

Roll no.

Reg. no.....

Rank S/D/o Are deposited in AIIMS

Bibinagar in compliance with legal provisions regarding admission in MBBS 2021 counselling

	Documents	Yes/No	Remarks
1.	Class 10th marks sheet		
2.	Class 10th passing certificate		
3.	Class 12th marks sheet		
4.	Class 12th passing certificate		
5.	Migration certificate		
6.	Date of Birth Certificate (if Metric Certificate does not bear the same)		
7.	Offer letter		
8.	Seat Allocation Letter		
9.	Final Registration Slip		
10.	Admit card issued by AIIMS		
11.	Caste certificate (in case of SC/ST/OBC/EWS candidates) & Disability certificate (whenever required)		

Registrar,
 AIIMS, Bibinagar.

Authorized Signatory

Dean (Academics),
 AIIMS, Bibinagar.



ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BIBINAGAR,
HYDERABAD METROPOLITAN REGION (HMR) TELANGANA-508126, INDIA

अखिलभारतीयआयुर्विज्ञानसंस्थान, बीबीनगर
हैदराबाद मेट्रोपोलिटन क्षेत्र (एच एम आर), तेलंगाना - 508126, भारत

Affidavit format non-judicial stamp paper of Rs. 10/- or above and notarized
I, son/daughter ofhereby solemnly affirm that the following statements made by me are true to the best of my knowledge and belief that

1. I am a citizen of India.
2. I have completed 17 years of age on...../will be completing 17 years of age on
3. I fulfill the eligibility criteria as specified in the prospectus.
4. I have studied and understood the rules governing admission procedure, fee structure and agree to abide by these rules.
5. If admitted to AIIMS Bibinagar, I will abide by all its rules and regulations framed time to time regarding discipline, attendance, examinations and patient care etc. I understand that failure to comply with the rules and regulations may invite disciplinary action from the Institution authorities.
6. I will not involve myself in any action of ragging during the course of my education at AIIMS Bibinagar. I understand that involvement in ragging is a cognizable offence and it will result in police action and would result into cancellation of my admission to the course.
7. I will not be using any motorised vehicle (bike & car) in the campus of AIIMS Bibinagar.

Name of the candidate:

Date:

Place:

Left Thumb Impression of the Candidate

I, The father /mother/guardian of
..... an applicant for admission to MBBS/
Nursing course at AIIMS, Bibinagar, hereby solemnly affirm that all the above statements made by my son/daughter/ward are true to the best of my knowledge and belief. I will be responsible for his/her conduct.

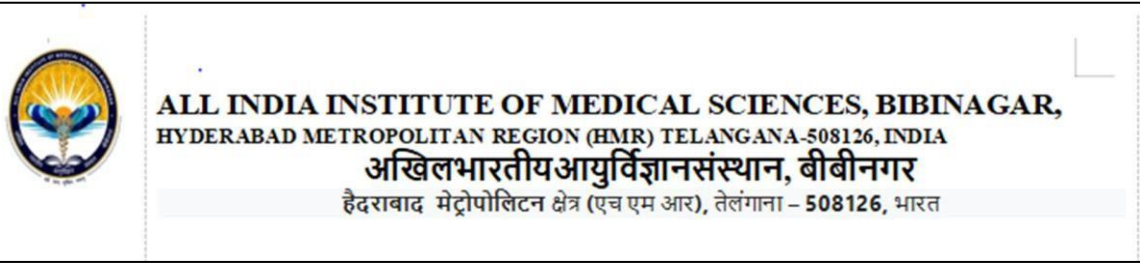
Name of the Parent/guardian:

Relationship to candidate:

Date:

Address with Phone No. and Email -
Signature of the Parent/Guardian

Left Thumb Impression of the Parent/Guardian



ANRI-RAGGING UNDERTAKING BY THE STUDENT

1. I, Son/Daughter of having been admitted to AIIMS Bibinagar Hyderabad , have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the Regulations) carefully read and fully understood the provisions contained in the said Regulations .
2. I have, in particular perused clause 3 of the Regulations and am aware as to what constitutes ragging
3. I have, in particular perused clause 3 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty for abetting ragging, actively or passively, or being part of a conspiracy to promote ragging
4. I hereby solemnly aver and undertake that I will not indulge in any behavior or act that maybe constituted as ragging under clause 3 of the Regulations. I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations
5. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations , without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force. 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 , abetting or being part of a conspiracy to promote, ragging ; and further affirm that, in case of declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared on ----- Signature of Deponent -----

Name : -----

VERIFICATION - Verified that the contents of this undertaking are true to the best of my knowledge and no part of the undertaking is false and nothing has been concealed or misstated therein.

Signature of Deponent -----



**ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BIBINAGAR,
HYDERABAD METROPOLITAN REGION (HMR) TELANGANA-508126, INDIA**

**अखिलभारतीयआयुर्विज्ञानसंस्थान, बीबीनगर
हैदराबाद मेट्रोपोलिटन क्षेत्र (एच एम आर), तेलंगाना - 508126, भारत**

Reference Number - 2141707

UNDERTAKING BY PARENT/GUARDIAN

1. I, ----- father/mother/guardian of, -----
having been admitted to AIIMS Bibinagar Hyderabad, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the Regulations) carefully read and fully understood the provisions contained in the said Regulations .

2. I have, in particular perused clause 3 of the Regulations and am aware as to what constitutes ragging

3. I have also, in particular perused clause 7 and clause 9.1 of the Regulations and am fully aware of the the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging

4. I hereby solemnly aver and undertake that My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations. My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations

5. I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law for the time being in force

6. I hereby declare that my ward has not been expelled or declared from admission in any institution in the country on account of being guilty of, 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

Declared on -----

Signature of deponent -----

Name :

Address :

VERIFICATION - Verified that the contents of this undertaking are true to the best of my knowledge and no part of undertaking is false and nothing has been concealed or misstated therein.

Signature of deponent-----

The form of certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under the Government of India

This is to certify that Shri/Shrimati/Kumari*.....
son/daughter* of of village/town*
..... in District/Division*
..... of
the
State/Union Territory* belongs to the.....
caste/tribe* which is recognised as a Scheduled Caste/Scheduled Tribe*
under:—

@ The Constitution (Scheduled Castes) Order, 1950 @ The Constitution (Scheduled Tribes) Order, 1950

@ The Constitution (Scheduled Castes) Union Territories Order, 1951 @ The Constitution (Scheduled Tribes) Union Territories Order, 1951

[as amended by the Scheduled Castes and Scheduled Tribes List (Modification) Order, 1956; the Bombay Reorganisation Act, 1960, the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganisation) Act, 1971, the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976., the State of Mizoram Act, 1986, the State of Arunachal Pradesh Act, 1986 and the Goa, Daman and Diu (Reorganisation) Act, 1987.]

@ The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956
@ The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976

@ The Constitution (Dadar and Nagar Haveli) Scheduled Castes Order, 1962 @ The Constitution (Dadar and Nagar Haveli) Scheduled Tribes Order, 1962 @ The Constitution (Pondicherry) Scheduled Castes Order, 1964

@ The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967

@ The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968

@ The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968

@ The Constitution (Nagaland) Scheduled Tribes Order, 1970

@ The Constitution (Sikkim) Scheduled Castes Order, 1978 @ The Constitution (Sikkim) Scheduled

Tribes Order, 1978

@ The Constitution (Jammu & Kashmir) Scheduled Tribe Order, 1989 @ The Constitution (SC) Order (Amendment) Act, 1990

@ The Constitution (ST) Order (Amendment) Act, 1991

@ The Constitution (ST) Order (Second Amendment) Act, 1991 @ The Scheduled Castes and Scheduled Tribes Orders (Amendment) Act 2002 @ The Constitution (Scheduled Castes) Order (Amendment) Act, 2002

@ The Constitution (Scheduled Castes and Scheduled Tribes) Orders (Amendment) Act, 2002

@ The Constitution (Scheduled Castes) Orders (Second Amendment) Act, 2002

% 2. Applicable in the case of Scheduled Castes/Scheduled Tribes persons who have migrated from one State/Union Territory Administration to another.

This certificate is issued on the basis of the Scheduled Castes/Scheduled Tribes certificate issued to

Shri/Shrimati*.....

Father/Mother of

Shri/Shrimati/Kumari of

village/town*

..... in District/Division*..... of the State/Union Territory*..... who

belongs to the caste/tribe* which is recognised as a Scheduled Caste/Scheduled Tribe in the State/Union Territory* of

.....

issued by the dated

% 3. Shri/Shrimati/Kumari*..... and/or*

his/her* family

ordinarily resides in village/town* of

..... District/Division* of

of the State/Union Territory* of.....

Signature.....

**Designation.....

(With Seal of Office) State/Union Territory*

Place: Date:

*Please delete the words which are not applicable. @ Please quote specific

Presidential Order.

% Delete the paragraph which is not applicable.

NOTE: The term “ordinarily reside (s)” used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

****List of authorities empowered to issue Scheduled Caste/Scheduled Tribe Certificate.**

- (i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/1st Class Stipendiary Magistrate/† Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner. †(not below of the rank of 1st Class Stipendiary Magistrate).**
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.**
- (iii) Revenue Officers not below the rank of Tehsildar.**
- (iv) Sub Divisional Officer of the area where the candidate and/or his/her family normally resides.**
- (v) Administrator/Secretary to Administrator/Development Officer(Lakshadweep)**

Annexure - VII

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./Kumari_____son/daughter of
_____ of _____ village/town
_____ in _____ District/Division
_____ in the State/Union Territory_____ belongs to the _____ community which is recognised as a backward class under the Government of India, Ministry of Social Justice and Empowerment's Resolution No. _____ dated _____*. Shri/Smt./Kumari_____ and /or his/her family ordinarily reside(s) in the _____ District/Division of the _____ State/Union Territory. This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of India, Department of Personnel & Training O.M. No. 36012/22/93-Estt. (SCT) dated 8.9.1993, OM No. 36033/3/2004-Estt. (Res) dated 9th March, 2004, O.M. No. 36033/3/2004-Estt. (Res) dated 14th October, 2008 and O.M. No. 36033/1/2013-Estt. (Res) dated 27th May, 2013**.

Signature _____
Designation _____

Dated:

Seal

***- The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.**

**** - As amended from time to time.**

\$ - List of Authorities empowered to issue Other Backward Classes certificate will be the same as those empowered to issue Scheduled Caste/Scheduled Tribe certificates.

Note:- The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

Government of.....

(Name & Address of the authority issuing the certificate)

**INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY
ECONOMICALLY WEAKER SECTIONS**

Certificate No.....

Date:.....

VALID FOR THE YEAR

This is to certify that

Shri/Smt./Kumari

son/daughter/wife of.....permanent resident

of,

.....Village/Street,Post

Office,

.....Districtin the State/Union

Territory.....Pin Codewhose photograph

is attested below belongs to Economically Weaker Sections, sincethe gross annual

income* of his/her family is below Rs. 8 lakh (Rupees Eight Lakh only)**

for the financial year His/her

family does not own or possess any of the following assets* :**

I. 5 acres of agricultural land and above;

II. Residential flat of 1000 sq. ft. and above;

III. Residential plot of 100 sq. yards and above in notified municipalities;

IV. Residential plot of 200 sq. yards and above in. areas other thanthe notified municipalities.

2. Shri/Smt./Kumari belongs to

the

caste which is not recognized as a Scheduled Caste, ScheduledTribe and Other

Backward Classes (Central List).

**Recent
passport size
attested
photograph of
the applicant**

Signature with seal of Office.....

Name :.....

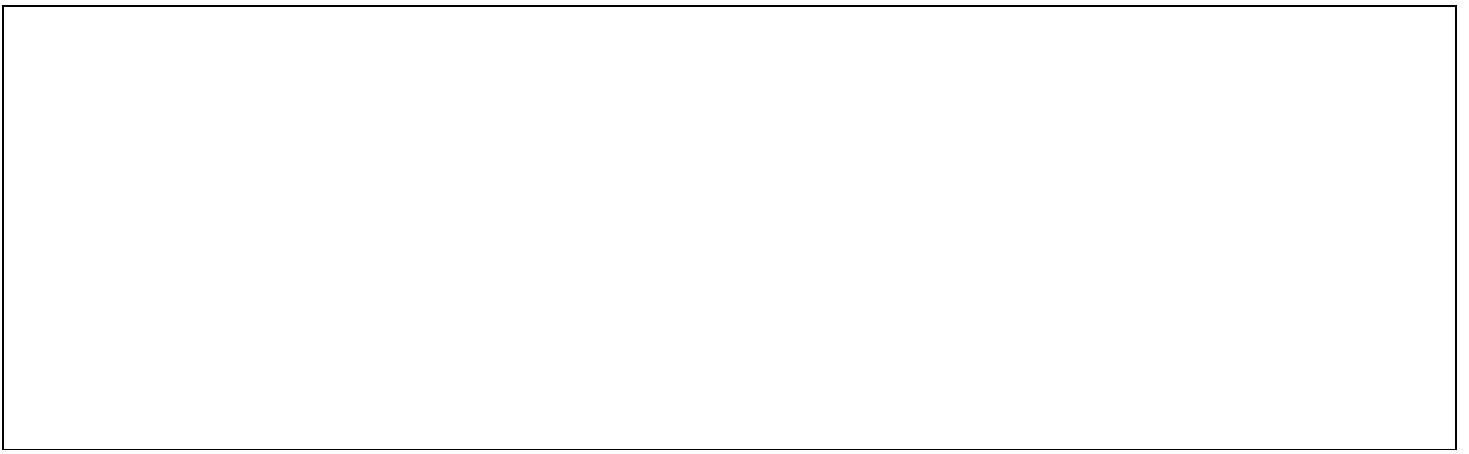
Designation.....

.....

***Note 1: Income covered all sources i.e. salary, agriculture, business, profession, etc.**

****Note 2: The term 'Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years**

*****Note 3: The property held by a "Family' in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.**



FEE STRUCTURE

TO WHOM IT MAY CONCERN

This is to certify that the following fee structure is applicable for the student of session 2022 admitted in B.Sc. Para-medical Courses at AIIMS, Bibinagar.

FEES STRUCTURE

Payable to AIIMS, Bibinagar.

S. No.	Fee details	Amount
1.	Academic & Other Fees:	Rs. 1,145/- Payable at the time of admission for the entire course (one time)
	a. Registration Fee: 25/-	
	b. Tuition Fee: 300/-	
	c. Caution Money: 100/- d. Pot Money: 720/-	

The above fees are subject to revision.

Mode of payment -

Name of Bank	Bank of Baroda
Branch	AIIMS, Bibinagar
Name of Account Holder	AIIMS BIBINAGAR
Account number	66120100000006
IFSC	BARB0(Zero)DBCHND

FEES RECEIPT

Receipt No.

Date:

Name of

Student:.....

Parent's/Guardian's

Name:.....

Address:.....

Course:.....

Roll No./Enrollment No:.....

Contact No:.....

Email ID:.....

Sr.No	ACADEMIC & OTHER FEES	Amount in Rs.
1	Registration Fee	25.00
2	Caution Money	100.00
3	Tuition Fee	300.00
4	Pot Money	720.00
	TOTAL	1145.00

Amount (in words): **ONE THOUSAND ONE HUNDRED AND FORTY FIVE RUPEES ONLY.**

Depositor Sign