



ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BIBINAGAR,
Hyderabad Metropolitan Region, TELANGANA - 508126
अखिलभारतीय आयुर्विज्ञान संस्थान, बीबीनगर,
हैदराबाद मेट्रोपॉलिटन क्षेत्र, तेलंगाना - 508126

डीन (अकादमिक) का कार्यालय OFFICE OF THE DEAN (ACADEMIC)

सांख्यिक/No: AIIMS/BBN/Registrar/2023/ 1113

दिनांक/Date: 24th February, 2023

**INFORMATION BROCHURE FOR STRAY VACANCY ROUND OF COUNSELING FOR AIIMS
BIBINAGAR MD COURSES FOR INI-CET PG JANUARY 2023 SESSION ON 27.02.2023**

**SEATS AVAILABLE FOR STRAY VACANCY ROUND OF COUNSELLING AT AIIMS,
BIBINAGAR**

Vacant Seat Position Department wise						
Sl.No.	Name of the Department	Total Vacant Seats	Category			
			UR	OBC	SC	ST
1	Anatomy	01	01	00	00	00
2	Biochemistry	01	00	01	00	00
3	CFM	01	00	00	01	00
4	FMT	01	00	01	00	00
5	Microbiology	02	01	00	00	01
Grand Total		06	02	02	01	01

All reserved seats will be converted to General pool if no candidate of allotted category is available.

Important

1. Candidates who have appeared in INI-CET PG for January 2023 session held on Sunday, the 13th November, 2022 and obtained following percentile will be deemed to be provisionally eligible (subject to other criteria) to participate in the Stray Vacancy Round of Seat Allocation at AIIMS Bibinagar: -

- Unreserved (UR)/EWS - 50th percentile.
- OBC, SC, ST, PwBD - 45th percentile.

2. All the provisionally eligible candidate (point 1) and who are not holding any seat by allocation and wish to participate in Open Round of Seat Allocation are mandatorily required to submit a demand draft deposit **Rs.3.00 Lakh (Rupees Three Lakhs only)** in favor of "The Director, AIIMS, Bibinagar payable at Bibinagar" during stray Vacancy round of counseling.

This demand draft would be returned to the candidates if they fail to obtain a seat or if they join the allotted seat. The demand draft would not be returned in case any candidate does not join the seat even after being allocated the same on 27.02.2023 by 5 pm.

3. All candidates who have been allocated a seat in any previous round of seat allocation and have joined/reported on allocated seat as per procedure of joining/reporting & holding the seat ARE NOT ELIGIBLE FOR THE STRAY VACANCY ROUND OF COUNSELING AT AIIMS Bibinagar. Please take utmost care, read and understand above carefully before participating for open round.

4. All the students who will report for Spot round counselling should get DD of Rs.3,027/-(Rupees Three Thousand and Twenty Seven Only) in the name of "The Director, AIIMS, Bibinagar payable at Bibinagar at the time of reporting towards admission fee.

5. Candidates will be allowed to fill choices for any Subject/Specialty for which they want to appear for the counseling.

SCHEDULE OF STRAY VACANCY ROUND OF SEAT ALLOCATION AT AIIMS BIBINAGAR

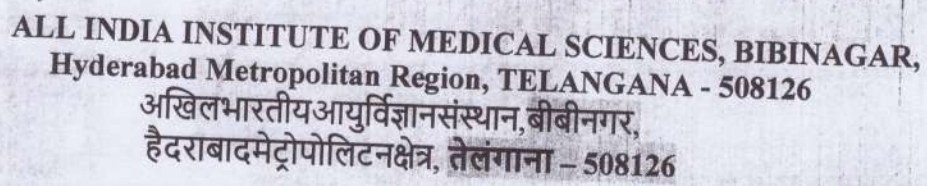
1.	Venue	Dean (Academic) Office, 2 nd Floor, AIIMS, Bibinagar
2.	Physical Registration and SUBMISSION OF APPLICATION FORM, Rs. 3.00 LAKH (Rupees Three Lakhs Only) INR DEMAND DRAFT AND ORIGINAL CERTIFICATES(Admit card issued by AIIMS, Date of Birth/ 10th / 12th certificate/ MBBS mark sheets 1st, 2nd and 3rd Professional Examinations , Permanent or Provisional Registration certificate of MBBS degree from NMC/ State Medical Council, Internship completion certificate, category certificate and PWBD Certificate, 08 Passport size Photographs along with one set of photocopies for Stray Vacancy Round of Seat Allocation	From: 27.02.2023 (Monday) 01.00 pm to 02.00 pm.
3.	Announcement of seat allocation of Stray Vacancy Round	27.02.2023 (Monday) 01.00 pm
4.	Physical Acceptance of allocated seat	From 27.02.2023 (Monday) 01.00 pm to 02.00pm
5.	Joining the Course	From 27.02.2023 (Monday) 02.00pm to 05.00pm

6. All disputes pertaining to the seat allocation will be subject to the jurisdiction of High Court of Telangana at Hyderabad only.

7. For any doubts the candidates can get clarifications from registrar.aiimsbibinagar@gmail.com

डॉ. राहुल नारंग/ (Dr.Rahul Narang)
डीन(अकादमिक)/Dean (Academic)
एम्स बीबीनगर/AIIMS, Bibinagar

डॉ. राहुल नारंग
डीन (अकादमीक)
अखिल भारतीय आयुर्विज्ञानसंस्थान, बीबीनगर
हैदराबाद महानगरक्षेत्र (HMR), तेलंगाना-508126



डीन (अकादमिक) का कार्यालय OFFICE OF THE DEAN (ACADEMIC)

INI-CET JANUARY 2023 RANK.	
Choice of Subject:	1st: 2nd: 3rd: 4th: 5th: 6th:

Personal Details (in Block Letters)

[illegible]

5. E-mail Id (In capital letters)										
6. Phone/Cell No.1										
Phone/Cell No.2										
Land Line No.										

7. Date of Birth (Please attach document for evidence)	D	D	M	M	Y	Y	Y	Y	8. Nationality	
									9. Name of the State to which you belong	
									10. Gender (Male / Female)	

11. Category	UR	OBC	SC	ST

12. Please bring original and two sets of self - attested photocopies of related documents at the time walk in interview.
13. Details of security deposit of 3 lakh INR: Demand draft No. _____ Date: _____ Amount Rs3 lakh INR
14. I hereby declare that entries made in this form as above are true and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect my candidature/ services are liable to be terminated without any notice. I _____ agree to abide by the terms and conditions of contractual appointment.

Place:

Date:

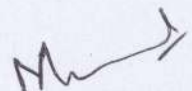
Signature of the Candidate

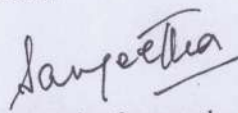
FEE STRUCTURE FOR MD/MS ADMISSION

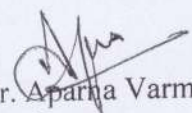
The details of fee are as follows at the time of admission:

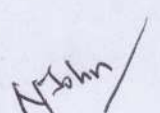
Sl. No	Details of Fee	Amount in Rs. (Non-sponsored) MD/MS/MDS (For 3 years)	Amount in Rs. (Sponsored) MD/MS/MDS (For 3 years)
1.	Registration Fee	Rs.25/-	Rs.25/-
2.	Tuition Fee	Rs.702/-	Rs.1,050/-
3.	Laboratory Fee	Rs.120/-	Rs.120/-
4.	Pot Money	Rs.720/-	Rs.720/-
5.	Hostel Rent	Nil.	Nil.
6.	Electricity	Rs.240/-	Rs.240/-
7.	Gymkhana Fee	Rs.120/-	Rs.120/-
8.	Caution Money	Rs.100/-	Rs.100/-
	Hostel Security	Rs.1000/-(Refundable)	Rs.1000/-(Refundable)
	Total	Rs.3,027/-	Rs.3,375/-

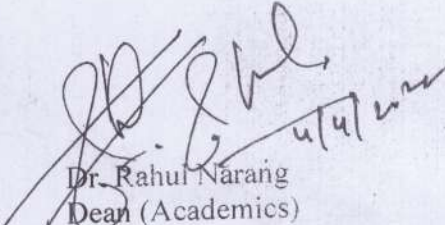
Meeting ended with vote of thank to chairs.


Dr. Mrudula Chadrupatla
HoD, Anatomy
AIIMS, Bibinagar


Dr. Sangeetha Sampath
HoD, Biochemistry
AIIMS, Bibinagar.


Dr. Aparna Varma
Registrar
AIIMS, Bibinagar


Dr. Nitin Ashok John
Dean (Examination)
AIIMS, Bibinagar


Dr. Rahul Narang
Dean (Academics)
AIIMS, Bibinagar



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HYDERABAD METROPOLITAN REGION (HMR) TELANGANA-508126, INDIA

अखिल भारतीय आयुर्विज्ञान संस्थान, बीबीनगर
हैदराबाद मेट्रोपोलिटन क्षेत्र (एच एम आर), तेलंगाना - 508126, भारत

58
155

ANNEXURE-I

Affidavit format non-judicial stamp paper of Rs. 10/- or above and notarized

I, ... son/daughter of hereby solemnly affirm that the following statements made by me are true to the best of my knowledge and belief that

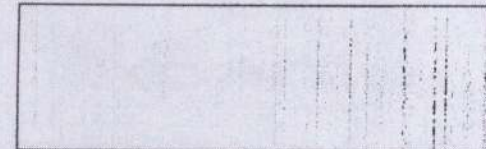
1. I am a citizen of India.
2. I have completed 21 years of age on
3. I fulfill the eligibility criteria as specified in the prospectus.
4. I have studied and understood the rules governing admission procedure, fee structure and agree to abide by these rules.
5. If admitted to AIIMS Bibinagar, I will 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. I understand that if found using the vehicle would be seized.

Name of the candidate:

Date:

Place:

Signature of the Candidate



Left Thumb Impression of the Candidate

I, ... The father /mother/guardian of
..... an applicant for admission to PG (MD/MS) 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.

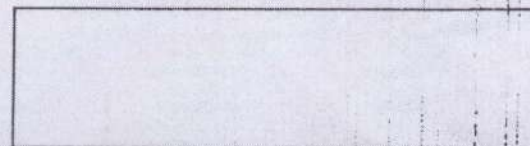
Name of the Parent/guardian:

Relationship to candidate:

Date:

Address with Phone No. and

Email:



Left Thumb impression of the Parent/Guardian

Signature of the Parent/Guardian



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अखिल भारतीय आयुर्विज्ञान संस्थान, बीबीनगर,

हैदराबाद मेट्रोपोलिटन क्षेत्र, तेलंगाना - 508126

OFFICE OF THE DEAN (ACADEMIC)

Date: _____

CHECK LIST FOR VERIFICATION OF DOCUMENTS

Sl.No	Documents	Yes/No	Remarks
1.	Offer Letter		
2.	Seat allocation Slip		
3.	Final Registration Slip		
4.	Admit Card issued by AIIMS		
5.	Mark Sheets of MBBS/BDS 1st, 2nd and 3rd Professional Examinations.		
6.	MBBS/BDS Degree Certificate.		
7.	Internship Completion Certificate/ Certificate from the Head of Institution or College that the candidate will be completing the internship by 31 st January 2022.		
8.	Permanent/Provisional Registration Certificate issued by MCI or DCI/State Medical or Dental Council.		
9.	High School/Higher Secondary Certificate/Birth Certificate as proof of date of birth. (Matriculation)		
10.	SC/ST/OBC/EWS certificate issued by Competent Authority		
11.	Affidavit		
12.	Demand Draft (DD)		
13.	Copies of the relevant documents		

Name of the Candidate

Signature of the Candidate

Above mentioned original certificates verified by:

Admission Officials:

Name:

Signature

1.

2.



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हैदराबाद मेट्रोपोलिटन क्षेत्र, तेलंगाना - 508126

OFFICE OF THE DEAN (ACADEMIC)

Date:

DOCUMENT RECEIPT

This is to certify that the following Originals/Xerox documents of Mr/Ms.
.....S/D/o Registration No.....
Rank.....Roll No are deposited in AIIMS, Bibinagar
In compliance with legal provisions regarding admission in to Post Graduate 2023 counseling.

Sl.No	Documents	Yes/No	Remarks
1.	Offer Letter		
2.	Seat allocation Slip		
3.	Final Registration Slip		
4.	Admit Card issued by AIIMS		
5.	Mark Sheets of MBBS/BDS 1st, 2nd and 3rd Professional Examinations.		
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11.	Affidavit		
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13.	Copies of the relevant documents		

(डॉ). बी.अपर्णा वर्मा / (Dr.B Aparna Varma)
रजिस्ट्रार/Registrar,
एम्स, बीबीनगर/AIIMS, Bibinagar.

(डॉ.राहुल नारंग)/ (Dr.Rahul Narang)
डीन (अकादमिक)/Dean (Academic)
एम्स, बीबीनगर/AIIMS, Bibinagar.

FORM OF SC/ST CERTIFICATE PRESCRIBED

Form of certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated the 28.1.1952, as revised in Dept. of Per-& A.R. letter No. 36012/6/76-Est. (S.CT), dated the 29.10.1977, to be produced by candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.

CASTE CERTIFICATE

This is to certify that Shri/Smt./Kum.*
son/daughter* of of village/town* in
district/Division* of the State/Union Territory* belongs to
the Caste/Tribe which is recognized as a Scheduled Caste/Scheduled Tribe* under:

- The Constitution (Scheduled Caste) Order, 1950
- The Constitution (Scheduled Tribe) Order, 1950
- The Constitution (Scheduled Caste) (Union Territories) Order, 1951
- The Constitution (Scheduled Tribe) (Union Territories) Order, 1951

% 1. (as amended by the Scheduled Caste and Scheduled Tribes Lists (Modification) Order, 1956, the Bombay Re-Organization Act, 1960, the Punjab Re-Organization Act, 1966, the State of Himachal Pradesh Act, 1970 the North Eastern Areas (Re-organization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1976). The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.

- The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
- The Constitution (Dadra and Nagar Haveli) Scheduled Caste Order, 1962.
- The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order, 1962.
- The Constitution (Pondicherry) Scheduled Caste Order, 1964
- The Constitution (Uttar Pradesh) (Scheduled Tribes) Order, 1967
- The Constitution (Goa, Daman & Diu) Scheduled Caste Order, 1968.
- The Constitution (Goa, Daman & Diu) Scheduled Tribes Order, 1968.
- The Constitution (Nagaland) Scheduled Tribes Order, 1970.
- The Constitution (Sikkim) Scheduled Caste Order, 1978.
- The Constitution (Sikkim) Scheduled Tribes Order, 1978.

% 2. Applicable in the case of Scheduled Caste/Schedule Tribe persons who have migrated from one State/ Union Territory Administration:

This certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe certificate issued to Shri / Smt* father/mother of Shri/Smt./Kum* of village/town* in District/Division* of the State/Union Territory* who belongs to the caste/tribe which is recognized as a Scheduled Caste/Scheduled Tribe* in the State/Union Territory* issued by the (name of prescribed authority) vide their No. date % 3. Shri*/Smt.*/Kum* and/or his/her* family ordinary reside(s) in village/town* of the State/Union Territory of

Signature

Place State/Union Territory

**Designation

Date

(With seal of Office)

- Please delete the words which are not applicable.

- Please quote specific Presidential Order.

% Delete the paragraph which is not applicable.

** Should be signed by the Authorities empowered to issue Scheduled Caste/Scheduled Tribe certificates as specified above.

PROFORMA FOR ECONOMICALLY WEAKER SECTIONS (EWS) CERTIFICATE

Annexure-I

Government of
(Name & Address of the authority issuing the certificate)

INCOME & ASSET 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 _____ District _____ in the State/Union Territory _____ Pin Code _____ whose photograph is attested below belongs to Economically Weaker Sections, since the 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 than the notified municipalities.

Signature with seal of Office _____

Name _____

Designation _____

Recent Passport size
attested photograph of
the applicant

*Note1: 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.

G. Sivasan