

#### प्राचार्य का कार्यालय

#### OFFICE OF THE PRINCIPAL

वर्धमान महावीर मेडिकल कॉलेज एवं सफ़दरजंग अस्पताल

### VARDHMAN MAHAVIR MEDICAL COLLEGE & SAFDARJUNG HOSPITAL

नई दिल्ली - 110029

NEW DELHI - 110029

स्वास्थ्य सेवा महानिदेशालय, स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार गुरु गोबिंद सिंह इंद्रप्रस्थ विश्वविद्यालय, दिल्ली से संबद्ध

Directorate General of Health Services, Ministry of Health & Family Welfare, Govt of India Affiliated to Guru Gobind Singh Indraprastha University, Delhi

Ref.No 1-20/25/VMMC

Dated: /07/2025

### **NOTICE**

### List of Required Documents at the Time of Reporting at VMMC & SJH for the purpose of MBBS admission via UG Counselling

All candidates who have secured admission into MBBS and who have been allotted this institution by MCC, DGHS, have to bring following original documents with 2 sets of self-attested photocopies for the purpose of admission. These documents will be physically verified by the Institute and will be kept with the Institution till the completion of the course.

- 1. Provisional Allotment letter (issued by MCC)
- 2. NEET Admit Card (issued by NTA)
- 3. Rank letter and Result issued by NTA (Both)
- 4. Class 10<sup>th</sup> Passing Certificate
- 5. Class 10th Mark sheet
- 6. Class 11th Mark sheet
- 7. Class 12th Passing Certificate
- 8. Class 12th Mark sheet
- 9. Eight passport size photographs (2 thumb size) in plastic case.
- 10. Character certificate from head of the institution from where qualifying exam was
- 11. Aadhaar Card (latest downloaded with print date)
- 12. Certificate from Competent Authority on prescribed format if belonging to reserve category SC/ST/OBC/EWS. (OBC certificate issued by central Govt.)
- 13. Migration Certificate/Transfer Certificate
- 14. Affidavit by Parent Guardian and Student (Anti Ragging). (Format on website)
- 15. Bond & Solvency as prescribed. (format on website)
- 16. Gap Affidavit (if applicable)
- 17. PWD Certificate (Physically challenged Certificate for physically challenged candidates, as per guidelines, if applicable) Annexure information bulletin issued by MCC
- \*\*Note: Bring two (2) Photocopy sets of all the above documents at the time of Admission

## **ANNEXURE I** AFFIDAVIT BY THE STUDENT (On a Non – Judicial Stamp Paper of Rs.50/-)

Ι,	- full
name of student with admission/ registration/	
Mr./Mrs./Ms.	
admitted to	(name of the
institution), have received a copy of the UGC Regul	ations on Curbing the Menace of
Ragging in Higher Education Institution, 2009, (her	einafter called the "Regulations")
carefully read and fully understood the provisions conta	ined in the said Regulations.
2) I have, in particular, perused clause 3 of the Re	gulations and am aware as to what
constitutes ragging.	
3) I have also, in particular, perused clause 7 and c	lause 9.1 of the Regulations and am
fully aware of the penal and administrative action that	t is liable to be taken against me in
case I am found guilty of or abetting ragging, activel	ly or passively, or being part of a
conspiracy to promote ragging.	
4) I hereby solemnly aver and undertake that	
<ul> <li>a) I will not indulge in any behavior or act a under clause 3 of the Regulations.</li> </ul>	that may be constituted as ragging
b) I will not participate in or abet or propag	gate through any act of commission
or omission that may be constituted a	s ragging under clause 3 of the
Regulations.	
5) I hereby affirm that, if found guilty of raggi	ing, I am liable for punishment
according to clause 9.1 of the Regulations, without prej	judice to any other criminal action
that may be taken against me under any penal law or an	y law for the time being in force.
6) I hereby declare that I have not been expelled o	or debarred from admission in any
institution in the country on account of being found gu	ilty of, abetting or being part of a
conspiracy to promote, ragging; and further affirm that	, in case the declaration is found to
be untrue, I am aware that my admission is liable to be c	ancelled.
Declared this day of month of	vear
	<i>y</i> • • • • • • • • • • • • • • • • • • •
	Signature of deponent
	Name:
VERIFICATION	
Verified that the contents of this affidavit are true to the	best of my knowledge and no part
of the affidavit is false and nothing has been concealed or	misstated therein.
	•
Verified aton this the	<u>(day)</u> of <u>(month)</u> ,
(year).	
	C1 4
Solemnly offirmed and signed in war and a district of the state of the	Signature of deponent
Solemnly affirmed and signed in my presence on this the	(day)of
(month), (year) after reading the c	contents of this affidavit.

**OATH COMMISSIONER** 

## ANNEXURE II AFFIDAVIT BY PARENT/GUARDIAN (On a Non – Judicial Stamp Paper of Rs.50/-)

I, Mr./Mrs./Ms.		(full name of
parent/guardian) father/mother/guardian of,		(ful
name of student with admission/registration/enrolment nur	nber), having be	en admitted to
(name of the in	nstitution), have	been informed
of the UGC Regulations on Curbing the Menace of I	Ragging in Hig	her Education
Institution, 2009, (hereinafter called the "Regulations")I	have carefully	read and fully
understood the provisions contained in the said Regulations.	•	
2) I have, in particular, perused clause 3 of the Regula	tions and am aw	are as to what
constitutes ragging.		
3) I have also, in particular, perused clause 7 and claus	e 9.1 of the Regu	lations and am
fully aware of the penal and administrative action that is li	iable to be taken	against me in
case I am found guilty of or abetting ragging, actively or	r passively, or b	eing part of a
conspiracy to promote ragging.	•	
4) I hereby solemnly aver and undertake that		
a) My ward will not indulge in any behavior or	act that may be	constituted as
ragging under clause 3 of the Regulations.	•	
b) My ward will not participate in or abet or	propagate throu	igh any act of
commission or omission that may be constitute	ed as ragging un	der clause 3 of
the Regulations.	00 0	
I hereby affirm that, if found guilty of ragging, my	ward is liable fe	or punishment
according to clause 9.1 of the Regulations, without prejudic	ce to any other c	riminal action
that may be taken against me under any penal law or any lay	w for the time be	ing in force.
I hereby declare that my ward has not been expelled	or debarred from	n admission in
any institution in the country on account of being found guil	lty of, abetting or	r being part of
a conspiracy to promote, ragging; and further affirm that, i	n case the declar	ation is found
to be untrue, the admission of my ward is liable to be cancelle	ed.	
Declared this day of month of	Noor	
month of	year.	
	Signature of d	lenonent
Name:	- Signature or u	сроиси
Address:		
Telephone/I	Mobile No ·	
VERIFICATION	WIODIIC IVO	
Verified that the contents of this affidavit are true to the best	t of my knowledg	re and no nart
of the affidavit is false and nothing has been concealed or mis	stated therein	se and no part
g		
Verified at (place) on this the	(day) of	(month).
year)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Signature of d	eponent
	9	T. 1 2 1
olemnly affirmed and signed in my presence on this the	(day)of	(month).
year)after reading the contents of this affidavit.		1

OATH COMMISSIONER

# VARDHAMAN MAHAVIR MEDICAL COLLEGE & SAFDARJUNG HOSPITAL, NEW DELHI

### BOND FOR STUDENTS SEEKING ADMISSION TO MEDICAL COLLEGE

(On a Non – Judicial Stamp Paper of Rs.100/-)

KNOW ALL MEN BY THESE THAT WE	
	hereinafter called the student (in case he/she has
completed 18 Years of age) or Father or Natural G	uardian of the student (in case he/she is a minor) (which
	he context include his/her heirs, administrators and assigns)
and son/daughter of Sh.	hereinafter called the surety
	nant to the context include his/her heirs, administrators and
assigns) blind ourselves jointly and severally	to pay to the President of India/Governor of
(hereinafter called the	ne Government) on demand and without demur a sum of Rs.
25.000/- (Rupees Twenty Five Thousand only) or if	payment is to be made in a Country other than India, the
equivalent of the said sum in the currency of that Cou	ntry converted at the Official rate of exchange between that
Country and India.	
Dated this day of Two	Thousand and
State/Union Territory of Delhi for the MBBS Course (I admitted shall complete said Course) from the Colleg College in any part of the Country and that on such com in any part of the Country in the rural areas for a miniprescribed therefore and shall furnish a suitable bond for	
AND WHEREAS THE student who had applied for AcCollege (hereinafter referred to as the said College CONDITIONS FOR THE ABOVE WRITTEN OBLIG.	Imission for the said Course in Vardhman Mahavir Medical e) has been admitted for the said Course. NOW THE ATION IS THAT IF THE STUDENTS SHALL:
(i) Diligently prosecute and complete the said Cou Country and pass the prescribed University Exa	urse at the said College or any other Medical College in the mination for the said Course.
in the state for a minimum period of Two Years a event the student being not so called upon by Medical Services and serve them for two years of the C.H.S. or S.M.S. for the aggregate period of the required to serve under the provisions of this bone.	me within a period of Six Months from the receipt of the rest/State Medical Services and serve in rural area anywhere at such remuneration as may be prescribed before and in the the Government to join the Central Health Services/State a serve the Central or State Government in the rural areas or two years and during the period during which the student is d faithfully discharge the duties assigned to by Government and efficiency and shall observe the rules for time being in the receipt of the restriction.

AND in the event of student committing a breach of any of the above terms and conditions the whole Amount of Rs. 25,000/- (Rupees Twenty Five Thousand only) or such lesser sum as the Government may absolute discretion decide shall become payable jointly or severally by the student or the Father/Natural of the student in case of a minor student and the above surety (full name of forthwith and the Government may without prejudice to any other rights and remedies of the Government	ay in its
the same form the student or the Father/Natural Guardian of the student in case of minor student and the surety PROVIDED further that the liability of the surety hereunder shall not be imputed discharged by reason of time being granted or any fore bearance, act or omission of the Government without the knowledge or consent of the surety) in respect of or in relation to the several obligations and control to be performed or discharged by the student nor shall it be necessary for the Government to sue the streather/Natural Guardian of minor student before suing the surety for Amounts due hereunder and provided that this bond shall in all respects be Governed by the Laws of India. The expenses of stamp duty on the any shall be borne by the Government.	f surety) recover the above the abov
IN WITNESS there of the said student or Father/Natural Guardian of the student in the case he/she is mit the said surety have put their respective hands the day and the year herein above written.	nor, and
Signed and delivered by the within  Named student or Father/Natural Guardian  Of student in case he is a minor in the presence of  (Signature of student/Father/Natural Guardian of student in case he is a minor)	lian
Signed and delivered by the within new of	
Signed and delivered by the within named  Surety in the presence of (Signature with full Address of surety	
ATTESTED	
Signature	
Name	
Designation	
Address of attestation authority with official s	seal if any
The Officer attesting the bond should be GAZETTED OFFICER in the employ of the GOVER	NMENT

# ACCEPTED FOR AND ON BEHALF OF THE PRESIDENT OF INDIA/GOVERNMENT OF INDIA

### **CERTIFICATE OF SOLVENCY**

This is to certify that			
(Full Name with Address of surety)			
Who has stood surety to			
(Full Name wit	th Address of Student)		
	Mahavir Medical College is solvent to the extent of the tudent or Father/Natural Guardian of the student (in case oned Admission.		
Signature of the Collector			
argument of the concetor	Dy. Commissioner/Dist.		
	Commissioner/		
	Dy. Collector/ Tehsildar /1st Class		
	Magistrate/Gazetted Officer		
	Designation:		
	OFFICE SEAL		
Date :			
Place :			