



Maratha Vidya Prasarak Samaj's

Dr.Vasantrao Pawar Medical College, Hospital & Research Centre,

Vasant Dada Nagar, Adgaon, Nashik-422 003 (Maharashtra, INDIA) Phone- 0253-2303923, 2303802

Website: www.drvasantraopawarmedicalcollege.com



(Recognised by M.C.I., Govt. of Maharashtra & Affiliated to the Maharashtra University of Health Sciences, Nashik)

Round No. _____ Admitted Quota: STATE / I.Q. / NRI

Dt.: / / 2024.

STUDENTS INFORMATION

Photo

Personal Information:

Full Name of Student: _____

(Last Name)

(First Name)

(Middle Name)

Full Name of Devnagri: _____

Sex: Male Female Transgender

Admission Details:

Admission Quota: _____ Student Category: _____

Application No. (NEET): _____ State Merit No (NEET): _____ NEET Marks: _____

All India Rank _____ Roll No _____

Nationality: _____ Religion: _____

Domicile: _____ Caste: _____

Date of Birth: _____ Birth Place: _____

Blood Group: _____ Father's Occupation: _____

Aadhar NO:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Votar ID No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Residential Address: _____

_____ Pin Code _____

Phone (STD Code):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Mob

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email (CAPITAL LETTER) _____

Permanent Address: _____

_____ Pin Code _____

Phone (STD Code):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mobile No:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Parents Mobile No:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Emali (CAPITAL LETTER) _____

Son / Daughter of MVP Member: Yes No

SSC and HSC Details:

SSC Board: _____ SSC School Name: _____

SSC passing year: _____ SCC Total Marks: _____

HSC Board: _____ HSC Passing Year: _____

HSC College Name: _____

Physics Marks: _____ Chemistry Marks: _____ Biology Marks: _____

English Marks: _____ PCB Total: _____ PCBE Total: _____

Date of Admission: / /2024.

Certification: I hereby certify that above information given by me is true to the best of my knowledge and belief.

(Parents Signature)

(Student Signature)

Date: / /2024
Place: Nashik.

Dean
Dr.Vasantrao Pawar Medical College,
Hospital & Research Centre, Nashik.



Maratha Vidya Prasarak Samaj's

Dr.Vasantrao Pawar Medical College, Hospital & Research Centre,

Vasant Dada Nagar, Adgaon, Nashik-422 003 (Maharashtra, INDIA)

Phone- 0253-2303923, 2303802 Fax- 0253-2303930 Website: www.mvpmcn.com

(Recognised by M.C.I., Govt.of Maharashtra & affiliated to the Maharashtra University of Health Sciences, Nashik)

Dt. / / 2024

RECEIPT OF ORIGINAL DOCUMENTS

Ku. _____ is admitted to MBBS Course in the College on / / 2024 NEET UG-2024 Roll No. _____ Category _____ Quota _____ He / She has submitted the following ducouments in original at the time of admission along with **2 attested Color Xerox copies** of each and prepare additional 2 seats of same and one set of Xerox copies of said documents kept with yourself, and another one set should be submit to HOD of respective department :

Sr.No.	Name of the Documents	Original	Attested Copy
1	State CET Cell Selection Letter-2024		
2	Admit Card of NEET UG 2024		
3	CET CELL Online Application From with Fee Receipt		
4	Nationality, Domicile Certificate or Passport Xerox Attested copy.		
5	NEET - UG 2024 Mark Sheets		
6	Voter ID (Photo Copy) Or Annexure – “C”		
7	Adhar Card (Photo Copy)		
8	HSC (or equivalent) Examination Marksheet		
9	SSC (or equivalent) Passing Certificate (for Date of Birth)		
10	Leaving Certificate (HSC) or T.C.		
11	Cast Certificate (if applicable)		
12	Validity Certificate (if applicable)		
13	Non-Cremay layer Certificate (if applicable) Valid Up to 31/03/2024		
14	Medical Fitness Certificate (As per NEET-2024 Brochure)		
15	Self Gap Certificate (if applicable)		
16	Migration Certificate (if applicable)		
17	If NRI student, a) Affidavit from NRI Sponsor in format, b) Address proof of Sponsor, c) Family Tree, d) Documents for proof of relation between sponsor & student. F) Any other		
18	Income Prof - A) From No. 16 b) IT Return, c) Income Certificate (If Applicable) with Father & Mother Aadhar & PAN Card		

- This Certificate required fro your registration Eligibility at Maharashtra University of Health Sciences
- **SCAN COPY OF EACH ORIGINAL DOCUMENT IN PDF FORMAT AS PER CHECK LIST (SIZE 300KB)**

Tuition fee	DD NO.	Date	Amount

	DD NO.	Date	Amount
Mess Fee			
Hostel Fee			

Document Verification
Committee Signature

Student Signature

Admission Section
Signature