



**KONKAN EDUCATION SOCIETY'S
C.H.K. HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL,
ALIBAG - RAIGAD (M.S.)**

To,
The Principal,
K.E.S., C. H. Keluskar Homoeopathic
Medical College & Hospital, Alibag, Dist.- Raigad.

Passport Size
Photograph of the
Candidates

Ref. : APPLICATION FOR ADMISSION TO **FIRST YEAR B.H.M.S.**
COURSE FOR THE ACADEMIC YEAR _____

PARTICULARS

- Instructions :**
- 1) All entries must be filled in Capital letters
 - 2) ✓ Tick Mark wherever applicable
 - 3) Application must be accompanied with 01 original set & 03 attested photo copies of required certificates.

1. Candidates Name

Surname :

First Name :

Father's Name :

2. Date of Birth : Date: Month: Year :

3. Age in Complete Years :

4. Place of Birth :

5. Blood Group : _____

6. Admission Quota : DMER/Management/NRI : _____

7. Gender : Male Female

8. Category : Open / Reserved (SC/ST/SBC/VJ/NT1/NT2/NT3/OBC)

9. Father's Full Name & Occupation :

Occupation : Service / Business / Profession / Farmer / Labour / Retired

10. Mother's Name & Occupation : _____ Service/House Wife
(write only First Name)

11. Father/Guardians Income per Annum : _____

12. Address for Correspondence :

P I N

FOR OFFICE USE ONLY

Date of Admission	Clerk			Recommended	Principal

**DOCUMENTS REQUIRED IN FOLLOWING ORDER
(All the Original & 03 sets of Attested photocopies)**

Sr.No.	Tick	Name of Certificate
1.		Admit card of NEET UG 2017
2.		Copy of Online Application Form(Latest)filled on www.dmer.org
3.		NEET UG - 2017 Mark sheet
4.		Nationality certificate issued by District Magistrate/Addl.District Magistrate of Metropolitan Magistrate (Competent Authority for issue of such certificate)/valid Indian passport/School Leaving Certificate of HSC / 12 th Std. indicating the nationality of the candidate as 'Indian'.
5.		Domicile Certificate issued by District Magistrate/Metropolitan Magistrate/Addl.District Magistrate or Competent Authority for issue of such certificate.
6.		HSC (or equivalent) examination Mark sheet
7.		SSC (or equivalent) passing certificate (for date of Birth)
8.		Aadhar Card
9.		Medical Fitness certificate (Anexure-H)
		If applicable :
10.		Caste Certificate
11.		Caste Validity certificate
12.		Non-Creamy layer Certificate valid up to 31/03/2018 (for VJ, NT1, NT2, NT3, & OBC including SBC)
13.		D1/D2/D3 : Ex-servicemen Certificate, actual service certificate.
14.		D1/D2 : Domicile Certificate of Defence person.
15.		D3 : Transfer certificate.
16.		MKB : Disputed area certificate, Mother tongue certificate, SSC/HSC from MKB area.
17.		HA : Parent Domicile certificate, SSC/HSC of candidate from hilly area.
18.		For Person with disability (PWD) candidates-Medical Fitness Certificate of Authorized Medical Board.
19.		Leaving Certificate / T. C.
20.		Report of Hemogram (CBC)
21.		Selection Letter issued by D.M.E.R., Mumbai (for Govt. Quota only)
22.		Gap Certificate (made by the student duly certified by Executive Magistrate/Notarized (If applicable)
23.		SSC Mark sheet
24.		T.C. & Migration Certificate (If applicable) a) Students who have passed HSC examination from Outside Maharashtra b) After passing HSC/Qualifying examination, students who have joined any other course for period of more than Six months.
25.		Anti-Ragging form.
26.		Voter ID
27.		Four color Passport Size Photographs
28.		Two Envelopes with Correspondences Address

ANNEXURE - H
MEDICAL FITNESS

A candidate must be medically fit to undergo the professional course applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed proforma, as given below on a **Letterhead** :

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Mr./Ms..... who is desirous of admission to Health Sciences Courses.

He/she has not given any personal history of any disease incapacitating him/her to undergo the professional course. Also, on clinical examination it has been found that he/she is medically fit to undergo the professional course.

Certified that he/she fulfills the following criteria.

- (1) Absence of any incapacitating and/or progressive systemic disease/disorder /condition.
- (2) Absence of any disability of Upper limb/s.
- (3) Absence of any major visual/auditory disability.
- (4) Absence of psychosis/neurosis/mental retardation.
- (5) Ability to maintain erect posture.
- (6) Reasonable manual dexterity.

Though, following deviations have been revealed, in my opinion, these are not impediments to pursue a carrier as a Medical / Dental / Ayurved / Unani / Occupational Therapy / Physiotherapy / Audiology & Speech, Language Pathology / Prosthetics & Orthotics / B.Sc. Nursing. **(Strike, which is not applicable):**

Address of the Registered Medical Practitioner	Signature
	Name
	Registration No.
	Seal of Registered Medical Practitioner
Date :	