

**FAKIR MOHAN MEDICAL COLLEGE AND HOSPITAL,
BALASORE, ODISHA-756019**

**ADMISSION BROCHURE FOR MBBS ADMISSION
2021-22**

FOR OFFICE USE ONLY

ADMISSION REGISTER Sl.No & PAGE No.....

FAKIR MOHAN MEDICAL COLLEGE & HOSPITAL, BALASORE

Institute Admission Procedure Steps

(All steps will be completed at Medical College, Remuna, Balasore except Step-5)

- 1. Report at Admission Desk at Education Section (Medical College building at Remuna).*
- 2. Put signature in the attendance sheet and collect Institute Admission Folder.*
- 3. Fill up the relevant pages of Brochure.*
- 4. Deposit the documents as listed in document submission form.*
- 5. Proceed for Medical Checkup as directed by the admission desk.*
- 6. Go to Document Verification Desk.*
- 7. Report for online admission at Computer Desk.*
- 8. Deposit the DD towards Admission Fees at Accounts Clerk.*
- 9. Sign in the Admission Register.*
- 10. Receive in original the following papers from the office before leaving:*
 - a. Admission Letter Duly Signed By the College Authorities*
 - b. Original Document Retention Certificate*
 - c. Original Fee Receipt*

KEY CONTACTS (for emergency)

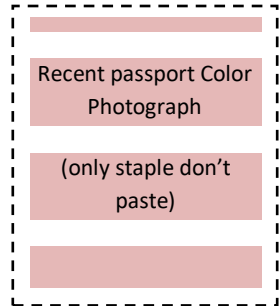
- | | |
|---|--|
| 1. Vice- Principal: Prof.(Dr.) Manorama Swain: | Mob: +919437486400 |
| 2. Admission Nodal Officer: Prof.(Dr.) N.C. Sahani: | Mob: +919439336734 |
| 3. Edu-Clerk: Mr. Pramod Kumar Pati : | Mob: +919861841206 |
| 4. Office Telelines (College/Dean office): | Phone: 06782-224901 |
| 5. College Email Id: | dean.fmmchb@gmail.com |
| 6. Website: | www.blsmch.nic.in |

Institute Profile

Name of College :	Fakir Mohan Medical College & Hospital,Balasore
State:	Odisha
Address of College:	Remuna,Balasore
State/Pin Code:	Odisha/ 756019
Name of Affiliated University:	Fakir Mohan University
Session Start Date:	Will be notified latter in college website
Class Start date	Will be notified latter in college website
Annual Fee for AIQ Candidate:	Rs.38,256 /- (as demand draft drawn in favour of "DEAN AND PRINCIPAL FMMCH STUDENT" Payable at 'Balasore')
Amount to be paid at the time of admission:	Rs. 38,256/-
Hostel facility:	Available for all.
Annual Hostel dues :	Rs.14,000/-[Mess /Record charges extra] (Hostel fee will be collected at the time of Hostel admission)
Fees to be deducted in case of re-allocation in subsequent All India Quota Round :	10% of Annual Fee for AIQ Candidate
Fees to be reimbursed in case candidate resigns during counseling period :	(Annual Fee for AIQ Candidate)-(10% of Admission fee)
Fees to be reimbursed in case candidate resigns after counseling period :	Rs.0
Time period of reimbursement:	120 days
The amount of fine to be given in case candidate resigns after the end of admission procedure : (May vary as per the admission brochure)	Rs. 1,00,000/- (Rupees 1 Lakh)
Other information:	Admission will be conducted only on official working days as per calendar of Govt. of Odisha from 10 am till 5pm

STUDENT'S BIODATA

1. Name of the Student :
2. Date of Birth :
3. Blood group :
4. Father's Name :
5. Mother's Name :
6. Caste (Sub-caste)/Tribe:
7. Occupation of Father :
8. Occupation of Mother :
9. Annual Income of father as per record:
10. Permanent Address:



Vill/Town..... P.O.....
P.S..... Dist.....
State..... Pin.....

11. Present Communication Address:

Vill/Town..... P.O.....
P.S..... Dist.....
State..... Pin.....

12. Proof of identity submitted(Aadhar/ PAN/ Driving Licence/ Passport) : _____

13. Telephone No. of Student:

MobileMail Id.....

14. Telephone No. of Father/ Guardian:

Land LineMobile Email Id.....

15. Qualifying last academic Examination Details:

Examination.....Year of Passing:..... State.....

College.....University.....

16. Bank Accounts details for fees refund:(if required)

Accounts Number.....Bank.....

Branch..... IFSC Code.....

Signature of Student...../Date:.....

Fakir Mohan Medical College and Hospital, Balasore

Student Data for Website

Date of Admission: - ____ / ____ / _____

Sl.No.	Data details	To be filled by the student		
1	Name of the Student (in block letters):-			
2	Date of Birth: -	____ / ____ / _____		
3	Sex:-	Male / Female		
4	Religion(Hindu/Muslim/Christian/Sikh/any other):-			
5	Mother Tongue:-			
6	Sub –Category :-	ST / SC / OBC / UR		
7	Whether Physically Handicapped : -	Yes / No		
8	NEET Rank: -			
9	NEET Roll No.:-			
Marks obtained				
Exam details		Maximum Marks	Marks secured	percentage
NEET Entrance				
+2 Science	PCB			
	English			

Full Signature of the Student

DOCUMENT SUBMISSION SHEET (To be filled in by Candidate)

Sl.no.	Documents [Tick at appropriate box on the right column] One set original & one set self signed photocopies	Yes	No
1	NEET Admit Card		
2	NEET Rank Letter		
3	Online generated Self-declaration Slip [only for -JK natives]		
4	Provisional Allotment Letter		
5	Proof of identity (Aadhar / PAN/ Driving Licence/ Passport)- Xerox		
6	Relieving Letter (if applicable) (applicable for second round)		
7	HSC Certificate(DOB_____)		
8	+2 Pass Certificate		
9	+2 Mark Sheet		
10	Transfer Certificate/College Leaving Certificate		
11	Conduct Certificate		
12	Eight passport size photographs same as on Application form signed at the back		
13	Reservation Certificate[ST/SC/OBC/PWD/GC/ES/SG]		
14	Medical Fitness certificate by Institute Medical Board		
15	Undertaking against Ragging		
16	Undertaking towards 2nd round counseling, Deficient documents, institute rules		
17	DD towards Admission Fees for Rs.38,256/- in favour of "DEAN AND PRINCIPAL FMMCH STUDENT" Payable at 'Balasore', self signed at the back with NEET Roll Number. DD no _____/Dated _____		
18	For State Quota -Residency/Nativity/Employee/Odia belonging to outlying odia speaking track		
19	Any other document[mention]		

Declaration:

1. I am submitting herewith the documents as listed above in Original along with photocopy of each for verification and institutional custody for admission in to MBBS course during the year 2021-22 at FMMCH, Balasore.
2. I undertake that in case I am found to have submitted forged documents at the time of admission then my admission to the course stands cancelled and I shall be entitled to legal action as deemed proper.

.....
Signature of the Candidate
NEET Roll Number-.....
Name.....
Date.....

UNDERTAKING

I. WILLINGNESS TOWARDS UPGRADATION DURING COUNSELING

I do/donot express my willingness to participate in SECOND ROUND of NEET counseling for up gradation.

II. UNDERTAKING TOWARDS TIME BOUND SUBMISSION OF DEFICIENT DOCUMENTS

I do hereby undertake to produce the following deficient documents within a time limit ofdays failing which my conditional admission into the course will stand cancelled and I shall forfeit my claim for admission into the college.

- 1.....
- 2.....
- 3.....
- 4.....
- 5.....

III. UNDERTAKING TOWARDS CONDUCT AND DISCIPLINE

I do hereby undertake that:

- a. *I will attend all theory and practical classes in all subjects of MBBS course regularly.*
- b. *If I fail to attend the required number of classes as per MCI norm, (i.e. 75% in both theory and practical), the Head of the Department will not be held responsible for shortage of attendance and consequent non eligibility to the sent up for university examination.*
- c. *I will not put any undue pressure on the Head of the department or Dean & principal, FMMCH, Balasore for taking extra classes to make up for my attendance shortage due to reasons whatsoever.*
- d. *I will appear in the internal assessment tests and University Examination as notified by the authorities and will never adopt pressure tactics to shift the examination.*
- e. *I will abide by the prevalent rules and regulation of the college, hostel and hospital .*

Full Signature of candidate/Date.....

Signature of Father/Legal Guardian...../Date.....

[Name.....Relationship.....]

UNDERTAKING AGAINST RAGGING

I. UNDERTAKING BY THE STUDENT

1. I,.....,S/o. D/o. of Mr./Mrs./Ms....., have carefully read and fully understood the law prohibiting ragging and the directions of the Supreme Court and the Central/State Government in this regard.
2. I have read/received a copy of the MCI Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009.
3. I hereby undertake that-
 - a. I will not indulge in any behaviour or act that may come under the definition of ragging,
 - b. I will not participate in or abet or propagate ragging in any form,
 - c. I will not hurt anyone physically or psychologically or cause any other harm.
4. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the MCI Regulations mentioned above and/or as per the law in force.

Signature...../date.....

II. UNDERTAKING BY PARENT/GUARDIAN

1. I,..... F/o. M/o. G/o....., have carefully read and fully understood the law prohibiting ragging and the directions of the Hon'ble Supreme Court and the Central/State Government in this regard as well as the MCI Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009.
2. I assure you that my son/ daughter/ ward will not indulge in any act of ragging.
3. I hereby agree that if he/she is found guilty of any aspect of ragging, he/she may be punished as per the provisions of the MCI Regulations mentioned above and/or as per the law in force.

Signature...../Date.....

Medical Board Report

We have examined the following candidate for Physical Fitness for Admission into MBBS Course and the findings are as noted below.

1. Name
2. Father's Name.....
3. Age..... Sex.....Weight.....kg.Height.....cm
4. Personal Marks of identification:
 - i.....
 - ii.....
5. Vitals: HR-.....bpm RR-.....bpm BP-.....mmhg TMP.....degrees C.
6. General Examination:.....
7. Cardiovascular System:
8. Respiratory System:.....
9. Central Nervous System :.....
10. Gastro-intestinal System:.....
11. Vision:.....
12. Hearing:
13. Genitourinary System :.....
14. Locomotor System:.....
15. Any Other Disability/observations:.....

Recent passport Color Photograph

(only staple don't paste)

REMARKS: The Candidate is medically fit/unfit for admission into MBBS course.

Gen. Medicine	Gen. Surgery	Ophthalmology	Orthopedics	ENT	OG[(For Girls)]
Fit/ Not Fit	Fit/ Not Fit	Fit/ Not Fit	Fit/ Not Fit	Fit/ Not Fit	Fit/ Not Fit
..... Consultant [AP or Senior] Gen. Med. Opd. FMMCH, Balasore Name- Desgn- Seal Consultant [AP or Senior] Gen.Surg.Opd FMMCH, Balasore Name- Desgn- Seal Consultant [AP or Senior] Eye opd FMMCH, Balasore Name- Desgn- Seal Consultant [AP or Senior] Ortho opd FMMCH, Balasore Name- Desgn- Seal Consultant [AP or Senior] ENT opd FMMCH, Balasore Name- Desgn- Seal Consultant [AP or Senior] OG opd FMMCH, Balasore Name- Desgn- Seal

SCRUTINY SHEET(For Office use)

Name:

Category of allotment: GEN ST SC OBC PH ES GC

SL. No.	Document Submitted [original-one set & self-signed photocopy-one set]	Verified and Authenticated
1.	NEET Admit Card[Roll No _____]	Yes <input type="checkbox"/> No <input type="checkbox"/>
2.	NEET Rank Letter [NEET Common Rank _____]	Yes <input type="checkbox"/> No <input type="checkbox"/>
3.	Online Generated Self-declaration Slip [only for JK natives][Verified online- yes/no]	Yes <input type="checkbox"/> No <input type="checkbox"/>
4.	Provisional Allotment Letter	Yes <input type="checkbox"/> No <input type="checkbox"/>
5.	Relieving Letter (if applicable) [applicable for second round]	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.	Proof of Identity-(Aadhar/PAN/DL/Passport)	Yes <input type="checkbox"/> No <input type="checkbox"/>
7.	HSC Certificate(DOB _____) [Whether completed 17 years of age as on 31.12.2021]	Yes <input type="checkbox"/> No <input type="checkbox"/>
8.	+2 Pass Marks [P _____ C _____ B/BT _____ E _____] Must have passed Individually	Yes <input type="checkbox"/> No <input type="checkbox"/>
9.	+2 Mark Sheet :In PCB or PCBT to be eligible: [GEN-50% in aggregate/GEN-PH-45%/SC-ST-OBC/SC-ST-OBC-PH-40%] Secured Marks: _____ out of _____ . = _____ %	Yes <input type="checkbox"/> No <input type="checkbox"/>
10.	Transfer Certificate/College Leaving Certificate	Yes <input type="checkbox"/> No <input type="checkbox"/>
11.	Conduct Certificate	Yes <input type="checkbox"/> No <input type="checkbox"/>
12.	Eight passport size photographs signed at the back	Yes <input type="checkbox"/> No <input type="checkbox"/>
13.	Reservation Certificate(ST/SC/OBC/PH/GC/ES/SG) Mention: _____ Issued by native state- yes/no [OBC status verified from Central OBC List online-yes/no]	Yes <input type="checkbox"/> No <input type="checkbox"/>
14.	Medical Fitness certificate by Institute Medical Board [declared Fit-Yes/No]	Yes <input type="checkbox"/> No <input type="checkbox"/>
15.	Undertaking against Ragging	Yes <input type="checkbox"/> No <input type="checkbox"/>
16.	Undertaking towards 2nd round counseling, Deficient documents, institute rules	Yes <input type="checkbox"/> No <input type="checkbox"/>
17.	DD towards Admission Fees for Rs.38,256/- in favour of "DEAN AND PRINCIPAL FMMCH STUDENT" Payble at 'Balasore' self signed at the back with NEET Roll Number. DD no _____/Dated _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
18.	For State Quota-Residency/Nativity/Employee/Odia belonging to outlying odia speaking track	
19.	Other documents if any [Mention]	Yes <input type="checkbox"/> No <input type="checkbox"/>

DEFICIENCY IF ANY..

Eligible for Admission / Not Eligible for Admission **Scrutinizing Officer**
 ADMISSION OFFICER..... ADMISSION NODAL OFFICER.....

Admission Allowed /Admission Disallowed

DEAN & PRINCIPAL, FMMCH, Balasore

Reference- Admission Register Serial numberRegister page..... date.....
 Signature of Education Clerk.....Signature of Bursar.....

APPLICATION FOR ALLOTMENT OF HOSTEL SEAT

To

The Chairman,
Hostel Council
Fakir Mohan Medical College,
Balasore.

The Dean & Principal
Fakir Mohan Medical College,
Balasore.

Sub: Application for allotment of Hostel Seat – Requesting for.

Respected Sir,

I beg to state that I have taken admission into M.B.B.S. Course on and my Roll number being I am a resident of and there is no other alternative facility is available at Balasore for my stay during my M.B.B.S. study at this Medical College. I would request you to kindly allot me a seat in hostel so as to enable me to prosecute my studies smoothly. I undertake to deposit the required Hostel fee etc including Electricity & Water consumption charges, as admissible under Govt. rules from time to time and I will abide by the Hostel Rules.

ResidentialAddress

.....
.....
.....

Date.....

Yours obediently,

Signature of the applicant

Rank No.....

Roll No.....

Class MBBS

(For Office use only)

Hostel Fees amounting to Rs. 14,000/- (Rupees fortune thousand) only paid vide DD No

Date

Allotted Room No..... in the
.....Hostel.

Accountant I/c

Chairman, Hostel Council//Warden.....Hostel,

Fakir Mohan Medical College, Balasore.

FAKIR MOHAN MEDICAL COLLEGE AND HOSPITAL, BALASORE

IDENTITY CARD PROFORMA

Affix your
passport size
Photograph

N.B: FILL IN BLOCK LETTERS

Name of the Course: MBBS

Name of the Student:

Mobile no.:

***Name of the Father/
Guardian:***

Mobile no.:

Date of Birth:

Gender:

Blood Group:

Admission Batch:

Enrollment No:
(for office use)

Correspondence Address:

Full Signature

DOCUMENT RETENTION CERTIFICATE

[Office copy]

Sl.no.	Documents in ORIGINAL [Tick at appropriate box on the right column]	Yes	No
1	Provisional Allotment Letter		
2	Online generated Self-declaration Slip [only for-JK natives]		
3	Relieving Letter (if applicable)(applicable for second round)		
4	HSC Certificate(DOB_____)		
5	+2 Pass Certificate		
6	+2 Mark Sheet		
7	Transfer Certificate/College Leaving Certificate		
8	Conduct Certificate		
9	Reservation Certificate (ST/SC/OBC/PH/GC/ES/SG) Mention:_____		
10	Any other desired.....mention		

RECEIPT

Certified that the Original documents (as enlisted above) submitted by the candidate Name. _____ NEET Rank. _____ during admission is kept in the custody of this office till the MBBS study is complete or the candidate gets relieved or resigns from the course.

Signature of Office Clerk / Signature of Bursar

Signature of Dean & Principal/Nodal Officer, MBBS Admission
Fakir Mohan Medical College, Balasore

DOCUMENT RETENTION CERTIFICATE

[student's copy]

Sl.no.	Documents in ORIGINAL [Tick at appropriate box on the right column]	Yes	No
1	Provisional Allotment Letter		
2	Online generated Self-declaration Slip [only for-JK natives]		
3	Relieving Letter (if applicable)(applicable for second round)		
4	HSC Certificate(DOB_____)		
5	+2 Pass Certificate		
6	+2 Mark Sheet		
7	Transfer Certificate/College Leaving Certificate		
8	Conduct Certificate		
9	Reservation Certificate (ST/SC/OBC/PH/GC/ES/SG) Mention:_____		
10	Any other desired.....mention		

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Signature of Office Clerk/Signature of Bursar

Signature of Dean & Principal/Nodal Officer, MBBS Admission
Fakir Mohan Medical College, Balasore