## Swargiya Dadasaheb Kalmegh Smruti Dental College & Hospital

Wanadongri Road, Hingna, Dist-Nagpurr-441110

Date: 07.05.2022

#### CIRCULAR-1564

This is to inform all II, III, IV year BDS Students and III year MDS Students who will appear for MUHS Summer 2022 Examination, have to submit their Examination forms by 26/05/2022 in the Student section.

| 123        |  | Without Late fee |            |                      |        |  |  |
|------------|--|------------------|------------|----------------------|--------|--|--|
| Sr.<br>No. | Category   | Exam<br>fee      | Cap<br>Fee | Examination form Fee | Total  |  |  |
| 1          | Repeater appearing for 1 Subject                         | 2050/-           | 600/-      | 20/-                 | 2670/- |  |  |
| 2          | Repeater appearing for 2 Subject                         | 2400/-           | 600/-      | 20/-                 | 3020/- |  |  |
| 3          | Fresh Candidate or Repeater for 3 or more than 3 Subject | 2850/-           | 600/-      | 20/-                 | 3470/- |  |  |

| Sr.<br>Nu | Course           | Exam<br>Fee | CAP<br>Fcc | Passing<br>Certificate | Degree<br>Cortificate | Internship<br>Completion<br>Certificate | Exam<br>Form<br>Fee | Total<br>Fee |
|-----------|------------------|-------------|------------|------------------------|-----------------------|---|---------------------|--------------|
| 1         | UG(IV<br>– Year) | 2850/-      | 600/-      | 1300/-                 | 3000/-                | 2050/-                                  | 20/-                | 9820/-       |
| 2         | PG (III<br>Year) | 11450/-     | 800/-      | 1300/-                 | 3000/-                |   | 20/-                | 16570/-      |

Note:- Students have to follow following procedure:

Download the blank copy of Examination form from College Website- <a href="https://www.sdk-dentalcollege.edu.in">https://www.sdk-dentalcollege.edu.in</a>

b. To pay the Examination fees in cash at Front Desk to Mr. Pawan Dahe.

### Time Slots (For Cash Payment At Front Desk)

| Sr.<br>No | Year    | Time Slot  |  |
|-----------|---------|------------|--|
| 1         | BDS II  | 23/05/2022 |  |
| 2         | BDS III | 24/05/2022 |  |
| 3         | BDS IV  | 25/05/2022 |  |
| 4         | MDS III | 26/05/2022 |  |

<u>OR</u>

c. To pay the Examination fees online by RTGS/NEFT.
Bank Nmae – Central Bank of India
Account No- 3897157197
Type of Account- Savings
IFSC CODE- CBIN0284427
Branch- Hingna

d. Submit Exam form on or before 26/05/2022 between 4.30 pm to 5.30 pm. without fail to the Student section.

For Swargiya Dadasaheb Kalmegh Smruti Dental College & Hospital

Dean

Swargiya Dadasaheb Kalmegh Saara Dental College & Hospital

Copy to: Hon'ble President Sir

#### Appendix-I



# महाराष्ट्र आरोग्य विज्ञान विद्यापीठ,नाशिक

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

|                   | JHS                         | UNDER-GRA                                      |   |   |                           |              |                     |                           | THE LOTE LABOR PARTY. |
|-------------------|-----------------------------|--|---|---|---------------------------|--------------|---------------------|---------------------------|-----------------------|
| To,<br>The        | Controller of Ex            |  | nurs muns muns muns muns muns mu          | Exami   | nation Form e Code        | Train .      | IS MUHS MUHS MUHS M | SOUTH MUSTS MUSTS MUSTS M | ure sture MUHS        |
|                   |                             | Univer   | sity Eligibility                          | Status  |                           |              | uc r                | — р                       | c —                   |
| Sir,              |                             | Admitted Acad.<br>Year (speci                  | Eligibility Sattus<br>ty only one: Grante | d Not   | Eligibility<br>Department |              | UG [                |                           |                       |
|                   |                             | anicorate the second                           | ed, Provisionally Gr                      | AND CONTRACTOR OF THE PARTY OF | Letter Date               |              | FRESH               | REPEAT                    |                       |
| 1000 Texas (1000) |                             |  |   |   |                           |              |                     | (Please √ Ma              |                       |
| I red             | quest permission            | to present myself at of <b>20</b> I furnish my | the ensuing                               | ed below:   | (Class 8                  | & Course)    | Exami               | ination to                | be held in            |
| 1.                | CANDIDATE'S                 | NAME In Capital Lat                            | ters (Strictly a                          | s per Clas  | s XII or GAZ              | ZETTE I      | Notificatio         | n): English               |                       |
|                   |                             |  |   |   |                           |              |                     |                           |                       |
|                   | (Surname                    |  | (Fir                                      | st Name)  |                           |              | (Mic                | ddle Name                 | )                     |
| Î                 | CANDIDATE'S                 | NAME In Marathi:                               |   |   |                           |              |                     |                           |                       |
| 2.                | MOTHER'S F                  | IRST NAME in Capi                              | tal Letters:                              |   |                           |              | 11                  | 11                        |                       |
| 3.                |                             | USBAND FIRST NAI                               |   | l Letters:  |                           |              |                     |                           |                       |
| 4.                |                             | ailing address in CAF                          | _   |   |                           |              |                     |                           |                       |
|                   |                             |  |   |   |                           |              |                     |                           |                       |
|                   |                             |  |   |   |                           |              |                     |                           |                       |
|                   |                             |  |   |   | Pin                       | code:        |                     |                           |                       |
| 5.                | State:                      |  |   |   |                           |              |                     |                           |                       |
| 6.                | College Name:               |  |   |   |                           |              |                     |                           |                       |
| 7.                | Email Address               | :  |   |   |                           |              |                     |                           |                       |
| 8.                | Adhar No.                   |  |   |   |                           |              | 1                   |                           |                       |
| 9.                | Mobile (Adhar               |  |   |   |                           | -            |                     |                           |                       |
| 10                | Mobile (Whats               |  | PEMALE                                    |   |                           |              |                     |                           |                       |
| 11<br>12          | Gender :<br>Date of Birth : | MALE:  | FEMALE:                                   |   |                           |              |                     |                           |                       |
| 12                | Date of Birtin.             | Date Month                                     | 1   | Year  |                           |              |                     |                           |                       |
| 13                | Date of Admiss              |  | Month                                     | Year  |                           |              |                     |                           |                       |
| 14                | Admitted in Ad              | cademic Year: 🔲                                |   |   |                           |              |                     |                           |                       |
| 15                |                             | m Attempts Permissa                            | ble as per                                | 1   |                           |              |                     | 11.3                      | 11.8                  |
|                   |                             | I / University Norms                           | ogo:                                      | _<br>   |                           |              |                     |                           |                       |
| 16                | Date of Fee Payn            | nent by Student to Coll                        |   | ∟∟∟∟<br>Month   | <br>Year                  |              |                     |                           |                       |
| 17                | Current Exam                | Attempt  | Date                                      | WIOHTH  | Tear                      |              | Left Hand           | Thumb Impi                | ression               |
|                   |                             | 8 3 2  |   |   |                           |              |                     |                           |                       |
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| NOTE              | : It is to be ensure        | d that this Photograph a                       | nd Signature sh                           | ould matc   | h with the Ph             | <br>otograph |                     |                           | Ticket.               |
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|                   | Stud Type                   | Candidate Name                                 | Fees Appl                                 | icable as o   | on 30-11-202              | 21           | Heady               | vise Fee De               | etails                |
|                   |                             |  |   |   |                           |              |                     |                           |                       |

| 10 Ties   | t of Documents  | /Items to b   | ne attac  | hed/ver  | ified:  |   |  |   |   |   |
|---|---|---|---|--|---|---|--|---|---|---|
| Sr.<br>No.  | t of Documents  | ricins to k   | 31 3  | articulars   |   | 7   |  | Documents<br>attached<br>Yes/No   | For<br>College<br>Use only              | For<br>MUHS<br>Use only                       |
| 1.  | Photograph duly at  | tested by the   | Dean/Prin   | ncipal   |   |   |  |   |   |   |
| 2.  | Photocopy of mark<br>Photocopy of Eligib  | s statement of  | f latest ex   | amination  | only) O   | P Transfer lette  | r (If Applicable)  |   |   |   |
| 3.  | Photocopy of Eligit   | owing docum   | nent is al  | so to be s   | submitte  | ed:   | (II Applicable)  |   |   |   |
| 4.  | Attendance Certific   | ate of Resear   | ch Method   | dology wo  | rkshop  |   |  |   |   |   |
|   | Log book (for Fre<br>Faculties.   | esh students)   | (Soft Co  | opy for M  | ledical F   | aculty & Hard   | Copy for other   |   |   |   |
| 6   | Students passed of  | ut from other l   | Universitie   | es, UG De  | gree cer  | tificate of respec  | ctive University.  |   |   |   |
| NOTE:   | : Incomplete Exam   | ination form  | and with  | out docur  | ments w   | ill be rejected   | by the Universit   | у.  |   |   |
|   | ess Code:   |   |   |  |   |   |  |   |   | Yes/No*                                       |
| Sr.<br>No.  | Particulars   |   |   |  |   |   |  |   |   | 19-200-1 Figure                               |
| 1.  | University exam   | nandatory to  | o reamin<br>proper f  | riskina (c   | at Exa  | mination Cent a)].  | tre before 01 h  | nour of commer  |   |   |
| I will b  | e appearing for   | the follow  | ing Sub   | jects (f   | or Sub  | ject Name a   | nd Subject Co  | ode, please re  | er Theory                               | Time-Table                                    |
| publish   | ed by the Unive   | ersity on th  | e webs  | ite):-   |   |   |  |   |   |   |
|   | Subject   |   |   |  |   | Attenda   |  | esh Students (  | VIIIY                                   |   |
| Sr. No  | Codes   | S   | ubject l  | Name   |   | Theory  | Practical  | HOD Name  | Н                                       | OD Sign                                       |
|   |   |   |   |  |   |   |  |   |   |   |
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| pre.  | sent one hour b   | efore comi  | <u>mencen</u>   | nent of L  | xamin   | ations.   |  |   |   |   |
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| Date:   |   |   | 2 0   |  |   |   | Signatu  | re of Candidat  | e in runnin                             | g nand  |
|   |   |   |   | CERT   | IFIED B   | Y THE HEAD (  | OF INSTITUTIO  | N   |   |   |
| I certify   | that,<br>i/Smt/Kum  |   |   |  | ic a l  | nonafide studen   | t of this college a  | nd has satisfactor  | ily attended t                          | ne classes and                                |
| 4 460   | + bic/bor attendance  | a ic not loce   | than as r   | rescribed  | hy the  | University & res  | spective council   | norms in lecture  | eaching and                             | practical work,                               |
| hov   | vever, in case preso  | ribed attenda   | nce is not  | fulfill up   | to comm   | encement of ex  | amination, Hall t  | icket of the Candi  | date will be m                          | arked as "NOT                                 |
| ELIO<br>2. that   | GIBLE" against the<br>t the candidate has   | respective sub<br>completed th  | niect   |  |   |   |  |   |   |   |
| rule  | es (wherever applica<br>t he/she is not adm   | able).  |   |  |   |   |  |   |   |   |
| 4 11  | Ltldidata bac   | completed he  | uca joh (   | For PG On  | ly- wher  | rever applicable  | )  |   |   | 5 1   |
| 5. tha  | at the information  | 1 furnished b   | by the sa   | aid candi  | date is   | verified from   | his/her docum  | ents and that th  | e candidate                             | is Eligible to                                |
| apı   | pear for Universit  | y Examinati   | on.   |  |   | 700   |  |   |   |   |
| Place:  |   |   |   |  | 1   |   |  |   |   |   |
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|   |   |   |   |  |   |   |  |   |   | nnendiy-1                                     |

# <u>Undertaking to be Submitted by I,II,III & IV BDS (N/O)</u> <u>(Fresh/Repeater ) Student</u>

| Į,                                | am         | the    | bon      | afide  | stu      | dent     | of  |
|-----------------------------------|------------|--------|----------|--------|----------|----------|-----|
|                                   | (college)  | admi   | tted in  | the    | BDS      | course   | in  |
| academic Year 20 - 20 and I       | am fully a | ware c | f follow | ing co | ndition  | prescrib | ped |
| by the Dental Council of India, N | New Delhi  | publis | hed by   | the L  | Jniversi | ty vide  | its |
| Examination Notification No. / 2  | 015 dated  | 1      | /2015    |        |          |          |     |

"Any student, who does not clear the BDS course in all the subjects within a period of 9 years, including one year compulsory Rotatory paid Internship from the date of admission, shall be discharged from the course."

Keeping in view of above rule and Examination Notification No. /2015, I am aware that my attempt in Summer/Winter ........... University Examination will be my last attempt to pass the BDS course. I shall not claim to appear for any further BDS course University Examinations due to exhaustion of prescribed time limit. I am fully aware that my admission shall be automatically stands discharged from the BDS course as per conditions prescribed by the Dental Council of India.

Date:

Name of Student:

Signature:

## Certification by the Dean/Principal of the college

The above named student has been counseled by the college in view of University Examination Notification No. /2015 dated / /2015 and he/she is found to be eligible to appear for ensuing University Examination.

Date:

Dean/Principal
Seal & Stamp of college

Error! No bookmark name given.

Page (1)

|   |                                   | MAH                     | ARASI     | ITRA UN                   | IVERSI    | TY (  | OF HEALTH SC                            | CIENCES, NASHIK                         | <u>Appendix</u> |  |
|---|-----------------------------------|-------------------------|-----------|---------------------------|-----------|-------|---|---|-----------------|--|
|   |                                   |                         |           | COL                       | UNSELIN   | NG FC | ORM                                     |   |                 |  |
| Nac   |                                   | (TO BE                  |           | IITTED B'                 | Y THE F   | REP   | EATER STUDE                             |   |                 |  |
|   | e of College<br>e of Student      |                         | :         |                           |           | ••••• |   |   |                 |  |
| 2. Name   |                                   |                         |           |                           |           |       |   |   |                 |  |
| 13. Name of Course<br>14. Date of Admission to 1 <sup>st</sup> year |                                   |                         |           |                           |           |       |   |   |                 |  |
|   | of Admission to<br>gory of paymen |                         | :         | / Daymor                  | -+ / NIDI | ••••• |   |   |                 |  |
| 6. Perce  | entage of Marks                   |                         |           | / Paymen                  |           |       | 07 Marks of                             | t CET :                                 |                 |  |
|   | Merit Number                      |                         | . 550     |                           |           |       | 00 Regiona                              | Merit Number :                          |                 |  |
|   |                                   |                         | it:       |                           |           | ***** | 09. Regiona                             | Ment Mannber                            |                 |  |
| irst Attempt  | E.                                | Maria Salamana Mariana. | At Minter |                           |           |       |   |   |                 |  |
|   |                                   |                         |           |                           |           | Sul   | bject                                   |   | ·               |  |
| Theory  |                                   |                         |           |                           |           |       |   |   |                 |  |
| Oral  |                                   |                         |           |                           |           |       |   |   |                 |  |
| Practical   |                                   |                         |           |                           |           |       |   |   | 4               |  |
| Internal  |                                   |                         |           |                           |           |       |   |   |                 |  |
| Assessment  |                                   |                         |           | L_                        | ř.        |       |   | v                                       |                 |  |
| Second Atten  | npt:                              |                         |           |                           |           |       |   |   |                 |  |
| TI  |                                   |                         |           |                           |           | Sub   | ject                                    |   | 7               |  |
| Theory  |                                   |                         | -         |                           |           |       |   | 15                                      |                 |  |
| Oral<br>Proctical   |                                   |                         |           |                           |           |       |   |   |                 |  |
| Practical<br>Internal   |                                   |                         |           |                           |           |       |   |   |                 |  |
| Assessment  |                                   |                         |           |                           |           |       |   |   |                 |  |
| Third Attempt   | <del></del>                       |                         |           |                           |           |       |   |   |                 |  |
| ilina /   | ••                                |                         |           |                           |           | Subj  | act                                     |   |                 |  |
| Theory  |                                   |                         |           | T                         |           | Juby. | J.                                      | T T                                     |                 |  |
| Oral  |                                   |                         |           |                           |           |       |   |   |                 |  |
| Practical   |                                   |                         |           |                           |           |       |   |   |                 |  |
| nternal   |                                   |                         |           |                           |           | -     |   |   |                 |  |
| Assessment  |                                   |                         |           |                           |           |       |   |   |                 |  |
|   |                                   |                         |           | ooor :                    |           |       |   |   |                 |  |
|   | ance of the                       | candidate in            | n the     | last                      | ******    |       |   |   |                 |  |
| examina   |                                   | 188911                  | (A)       |                           | •••••     |       |   | *************************************** |                 |  |
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|   | ance of the can                   |                         |           | ****                      | ,         |       |   |   | *****           |  |
|   | e college orga                    |                         |           |                           | *******   | ••••• | •••••••                                 |   |                 |  |
| the pare student?   | ents about p                      | poor penoi              | mance     | OT                        | *******   |       | *************************************** |   |                 |  |
|   | extra classe                      | oo / revisio            | n clas    |                           |           |       |   | *************************************** |                 |  |
|   | exira classe<br>nducted for stu   |                         |           |                           |           | ••••• |   |   |                 |  |
|   | examination.                      | dent who he             | au iano.  | J 111                     |           |       |   |   |                 |  |
|   | the student is                    | is made aw              | are of    | the :                     |           |       | *************************************** | ••••••                                  | 4               |  |
|   | aximum no. of                     |                         |           |                           |           |       |   |   |                 |  |
| Central   | Council /                         |                         |           | 39.7-20.4 <del>-</del> 0. | ******    |       |   |   |                 |  |
| administr   | ration.                           |                         |           |                           |           |       |   |   | 2               |  |
| 6. Please   | furnish the fol                   | llowing inform          | mation    | about the                 | studen    | ıt    |   |   |                 |  |
| A) Edu  | ıcational backg                   | ground of fan           | nily:     |                           |           |       |   |   |                 |  |
|   |                                   | Illiterat               | e         | Non-g                     | graduate  | е     | Graduate                                | Post-gradua                             | ate             |  |
| <b>—</b>  | Father                            |                         |           |                           | - 10      |       |   |   |                 |  |
|   | Mother                            |                         |           |                           |           |       |   |   |                 |  |
|   | Brother                           |                         |           |                           |           |       |   |   |                 |  |
|   | Sister                            | and the second second   |           |                           |           |       |   |   |                 |  |
| B) Whe  | ther the stude                    | nt was gettir           | ng any    | financial a               | assistar  | ice / | scholarship etc                         | c., please specify:                     |                 |  |
|   | alth problem w                    |                         |           |                           | •         |       |   |   |                 |  |
| 8. Whethe   | er Counseling                     | of student &            | parent    | has beer                  | i done t  | pefor | re sending the a                        | application form? If y                  | /es,            |  |
|   | ature of the stu                  |                         |           |                           |           |       |   |   |                 |  |
|   | ature of parent                   |                         |           |                           |           |       |   |   |                 |  |
| 9. Counse   | eling of student                  | t done by:              |           |                           |           | - mag |   |   |                 |  |
| 0. The abo  | ove information                   | n is correct t          | o the p   | est of my                 | knowie    | dge.  | •                                       |   |                 |  |
| 0. The abo  | ove information                   | n is correct t          | o the b   | est of my                 | knowle    | dge.  | 1                                       |   |                 |  |

STRUCTURE OF EXAMINATION FEE AS PER UNIVERSITY NOTIFICATION NO. 82/2020 DATED 26/11/2020

(For UG Repeater and Fresh Candidate)

| P   |  | A Promis Persons | out Late F | 99   | l Wit    | h Late Fee |       | With Add | itional Lat |      |
|-----|--|------------------|------------|------|----------|------------|-------|----------|-------------|------|
| Sr. | Category   | Exam Fee         | CAP Fee    |      | Exam Fee | CAP Fee    | Total | Exam Fee | CAP Fee     |      |
| No. |  | 2050             | 600        | 2650 | 2250     | 600        | 2850  | 2850     | 600         | 3450 |
| 1)  | Repeater appearing for 1 subject   | 2400             | 600        | 3000 | 2600     | 600        | 3200  | 3200     | 600         | 3800 |
|     | Repeater appearing for 2 subjects  (i) Fresh Candidate or Repeater appearing for 3 or more than 3 subjects | 2850             | 600        | 3450 | 3000     | 600        | 3600  | 3500     | 600         | 4100 |

Important Note:

A candidate appearing for the final examination of a degree course will have to pay following additional convocation related fees in advance. Please note that these fees will not be applicable for Repeater Students who have already paid it during previous examination. 1.

a) Passing Certificate Fee

b) Internship Completion Certificate fee c) Degree Certificate fee

d) Internship Completion Certificate fee for B.Sc. in Paramedical Technology (BPMT) Course - 1,300/-- 2,050/- (As applicable)

- 3,000/-

- 2,050/- (Any Candidate appearing for BPMT Course w.e.f Summer - 2018 Exam will have to remit requisite fees)

College shall submit list of students year wise (alphabetically by surname) giving fee details mentioned against their name. A consolidated D.D. / RTGS / NEFT for all students should be submitted.

2. Convocation Related Fee details alongwith the relevant details about the student should be submitted as per the format enclosed. Examination forms of final year students will not be accepted if not accompanied by above mentioned convocation related fees and photographs.

|  |          | Repeater Can |                        |                       |                    |
|--|----------|--------------|------------------------|-----------------------|--------------------|
|  | WITHOUT  | LATE FEE     |                        |                       |                    |
| Courses  | Exam Fee | CAP Fee      | Passing<br>Certificate | Degree<br>Certificate | Total<br>Fee (Rs.) |
| P.G. Medical and Dental Degree Courses   | 11,450   | 800          | 1,300                  | 3,000                 | 16,550             |
| All Other Diploma Courses  | 11,450   | 800          | 1,300                  | 3,000                 | 16,550             |
| D.M.L.T. Course  | 6,800    | 800          | 1,300                  | 3,000                 | 11,900             |
| Ornication of the control of the con | 4,900    | 800          | -                      | -                     | 5,700              |
| P.G. Final Year Ayurved, Unani and Homoeopathy   | 6,800    | 800          | 1,300                  | 3,000                 | 11,900             |
| Degree Courses Final Year P.G. Allied Health Sciences Degree Courses   | 10,250   | 800          | 1,300                  | 3,000                 | 15,350             |
| MBA (HFALTH CARE ADMINISTR.) &   | 3,950    | 800          | 1,300*                 | 3,000*                | 9,050              |
| MPH(N) – Master in Public Health (Nutrition)  M.Sc. Pharmaceutical Medicine.   | 9,750    | 800          | 1,300                  | 3,000                 | 14,850             |
| Final M.Sc. Pharmaceutical Medicine (2017)   | 4,900    | 800          | 1,300                  | 3,000                 | 10,000             |
| Diploma in Optometry / Diploma in Optometry (2017) /<br>Diploma in Opthalmic Assistant & Paramedical Diploma<br>Courses. / Diploma in Opthalmic Assistant (2017)   | 2,400    | 800          | 1,300*                 | 3,000*                | 7,500              |
| Courses. 7 Diploma in Operating 7 desistant (2017)   | WITH L   | ATE FEE      |                        |                       |                    |
| Courses  | Exam Fee | CAP Fee      | Passing<br>Certificate | Degree<br>Certificate | Total<br>Fee(Rs.)  |
| P.G. Medical and Dental Degree Courses   | 11,500   | 800          | 1,300                  | 3,000                 | 16,600             |
| All Other Diploma Courses  | 11,500   | 800          | 1,300                  | 3,000                 | 16,600             |
| D.M.L.T. Courses   | 7,150    | 800          | 1,300                  | 3,000                 | 12,250             |
| Preliminary (Ayurved/Unani), First Year (M.Sc. Nursing, M.A.S.L.P., M.P.O. /First M.P.O. (2017) First MPT-2016), M.D. Hom.(Regular) Part (I), First M.Sc. Pharmaceutical Medicine (2017), First Year MDS (From   | 5,200    | 800          | -                      | 1 =                   | 6,000              |
| A.Y. 2018-19 & onwards) P.G. Final Year Ayurved, Unani and Homoeopathy Degree Courses  | 7,150    | 800          | 1,300                  | 3,000                 | 12,250             |
| Final Year P.G. Allied Health Sciences Degree Courses  | 10,400   | 800          | 1,300                  | 3,000                 | 15,500             |
| MBA (HEALTH CARE ADMINISTR.) & MPH(N) – Master in Public Health (Nutrition)  | 4,200    | 800          | 1,300*                 | 3,000*                | 9,300              |
| M.Sc. Pharmaceutical Medicine.   | 10,000   | 800          | 1,300                  | 3,000                 | 15,100             |
| Final M.Sc. Pharmaceutical Medicine (2017)   | 5,200    | 800          | 1,300                  | 3,000                 | 10,300             |
| Diploma in Optometry / Diploma in Optometry (2017) / Diploma in Opthalmic Assistant & Paramedical Diploma Courses. / Diploma in Opthalmic Assistant(2017)  | 2,600    | 800          | 1,300*                 | 3,000*                | 7,700              |