

**Calcutta National Medical College**  
**32, Gorachand Road, Kolkata – 700 014**

**The documents that are required during UG admission 2020 in original and one self-attested photocopy are stated below**

- i. Admit Card of NEET UG 2020.
- ii. Score card/ Result/ Rank letter NEET UG 2020
- iii. Provisional Allotment Letter issued by competent authority.
- iv. Date of Birth Certificate/ Class 10 Certificate/Class 10 admit card as Age Proof {age of candidate must be 17 years by 31.12.2020}
- v. Class 10+2 Certificate
- vi. Class 10+2 Marks Sheet.
- vii. Aadhaar Card and any one Valid Proof of identity (Voter Id Card/Passport/Driving License/PAN Card/Bank Pass Book).
- viii. Domicile certificate (**For state Quota Candidate**).
- ix. Medical Certificate from Registered Allopathic Medical Practitioner.
- x. Discontinuation Bond with Notary on Non-Judicial Stamp Paper of Rs 10/-. (format attached)
- xi. Relieving Letter (for upgraded candidate only from 2<sup>nd</sup> round onwards).
- xii. The Candidate should also bring the following certificate, if applicable:
  - (a) SC/ST/ OBC /OBC /EWS Certificate issued by the competent authority. The OBC candidates should not belong to Creamy Layer to claim OBC reservation benefit.
  - (b) Benchmark Physical Disability Certificate issued from an appropriate authority within stipulated time frame. No other PH certificate, issued by any other Authorities/Hospital will be entertained. The benchmark disabilities are as per disability act of 2016.

**During admission, college authorities will keep all the self-attested photocopies and all the original documents except Age proof, ID card and Caste certificate and will issue a receipt stating that such and such original documents are kept in the custody of the college authorities.**

- **Quarantine rules as per ICMR guidelines to be followed strictly.**
- **The ArogyoSetu app status of the candidates shall be checked compulsorily**

Payments: **ONLY DIGITAL MODE OF PAYMENTS WILL BE ACCEPTED.**

The payment hyperlinks for the digital payments are as follows:-

<https://www.onlinesbi.com/sbicollect/icollecthome.htm?corpID=1053171>

College Email ID (Students Section): **sscnmc@gmail.com**

**Fees Structure:**

Admission Fee: Rs. 1000/-

Tuition Fees (for six months @ Rs. 750/- per month): Rs. 4500/-

Caution Money: Rs. 1000/-

Total: Rs. 6500/-

**For Upgraded candidate:** - Original Moneyreceipt of previously admitted at **State Govt. Medical College (for State Quota)**

- More details please follow the website –[www.wbmcc.nic.in](http://www.wbmcc.nic.in) (for State quota) and [www.mcc.nic.in](http://www.mcc.nic.in) (for AIQ)

**Bond Details:**

The candidate has to submit the bond in each round of admission/up gradation to the respective college in non-judicial stamp paper of Rs 10/- minimum along with demy paper if required for.

**Bond Format**

**Execution of bond by the candidate for Under Graduate degree seat at  
Calcutta National Medical College, Kolkata**

I, Sri/Smt..... Son/Daughter of .....residing at..... Dist. .... Pin..... having been selected for MBBS/BDS degree course at **Calcutta National Medical College, Kolkata** , do hereby affirm and solemnly declare that I shall deposit a sum of Rs. 1, 00,000/- (Rupees one lakh) only as prescribed by the Government in pursuance of G.O. No. HF/O/MERT/1542/Admn/ME/STM-28-10/2 (10) dated 25.10.2010, if I resign/discontinue the course before completion of tenure of the course.

Moreover it shall be obligatory on my part to observe or perform all terms and conditions prescribed by the Government for the aforesaid purpose.

The original documents which are in the custody of the **Calcutta National Medical College, Kolkata** will not be returned to me unless and until I pay the penalty of Rs. 1, 00,000/- (Rupees one lakh) only to the authority of Calcutta National Medical College, Kolkata .

This bond is imposed as there will be no further provision on behalf of the W.B.M.C.C. (West Bengal Medical Counselling Committee), Department of Health & Family Welfare, Govt. of West Bengal to allot another candidate for the same seat in the next round/s of counselling.

Signature of the candidate: .....

Name of the candidate:.....

Date:.....

Place:.....

Signature of the witness:.....

Name of the witness:.....

Date:.....

Place:.....

**CALCUTTA NATIONAL MEDICAL COLLEGE**  
**32, GORACHAND ROAD, KOLKATA - 700 014**

**ADMISSION FORM OF MBBS COURSE – 2020**

Paste a  
recent  
colour  
photograph

Roll No. of NEET Exam. \_\_\_\_\_ and Rank \_\_\_\_\_,

01.	Name in full (in CAPITAL Letters)			
02.	Date of Birth (dd/mm/yyyy)			
03.	Father's Name			
04.	Nationality			
05.	Caste: GEN/SC/ST/OBC/EWS		Male / Female	
06.	Residential address	Vill./Road/Ward - PO - PS - Dist. - State - PIN Code -		
07.	Local address (if any)	Vill./Road/Ward - PO - PS - Dist. - PIN Code -		
08.	Contact details:	Student's Mobile No. - Father's/Guardian's Mobile No. - Student's E-mail-		
09.	If Father is dead, Guardian's Name (Relation with guardian)			
10.	Occupation & approx. Annual income of Father/Guardian			
11.	Sources of maintenance while a student (Will sustain on whose income)			
12.	Identification marks			
13.	Name of the Board (HS/10+2 Exam. Passed), Year of passing and division.	Board: Year of passing:		

14.	Subjects taken in HS/10+2 Exam. and marks obtained in each subject with full marks	i) ii) iii)	iv) v) vi)
15.	a) Total Marks obtained in Physics + Chemistry + Biology and percentage	..... out of ....., .....%	
	b) Total Marks obtained in English and percentage	.....out of ....., ..... %	
16.	Total marks obtained in NEET Exam. - 2020	..... out of ....., ..... %	

I do hereby certify that the above statements of particular are true.

“I do hereby agree to the rules and regulations at present in force or that may hereafter be made for the Govt. College and I undertake that so long as I am a student of the College, I will do nothing either inside or outside the College that will interfere with its governance and discipline.”

\_\_\_\_\_  
(Full signature of Father/Guardian  
of the Candidate)

\_\_\_\_\_  
(Full signature of the Candidate)

Date:

Date:

Ph. No.

Ph. No.

Calcutta National Medical College  
32, Gorachand Road, Kolkata – 700 014

**Online Admission Slip**  
**M.B.B.S. - 2020**

1	Name (in Capital Letters)								
2	Roll No. NEET-UG 2020								
3	Category (UR/SC/ST/OBC-A/ OBC-B/PH/EWS)								
4	Date of Birth	D	D	M	M	Y	Y	Y	Y
5	Willing to attend the counseling for (write 'Yes' or 'No')	2 <sup>nd</sup> Round				3 <sup>rd</sup> Round/ Mop Up Round			
6	Phone No.								
7	E-mail ID								

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of the Candidate

**Medical Certificate for NEET UG 2020 qualified candidates**

Roll No.....

Application No.....

NEET UG All India overall rank.....

I, Dr ..... have examined Sri/Sm .....

son/daughter of ....., residing at .....

.....[verified from Aadhar card/passport/voter card/school or college ID card], a candidate for admission into the MEDICAL /DENTAL UG degree colleges in West Bengal for 2019-20 admission session and observed as follows:-

1. Personal mark of identification.....
2. Apparent age .....years
3. Any history of Pulmonary Tuberculosis.....yes/no ( put tick to appropriate one)
4. Chest measurement:
  - a. Normal respiration.....cm
  - b. In Full inspiration.....cm
  - c. In Full expiration.....cm
5. Height .....cm
6. Weight .....Kg
7. BMI .....
8. Eye sight visual acuity:
  - a. Right eye .....
  - b. Left eye.....
  - c. Colour blindness .....present/absent ( put tick to appropriate one)

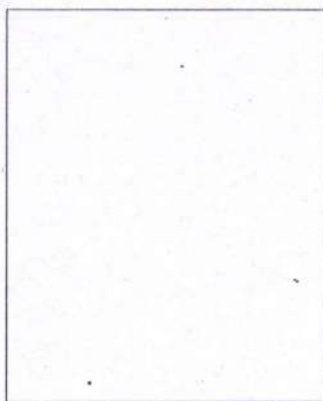
9. Immunization status ..... ( whether up to date as per latest National Immunization Schedule)
10. General physique.....
11. Heart .....
12. Lungs .....
13. Abdominal viscera.....
14. Blood Group.....
15. Any neurological deficits.....
16. Any orthopedic disability.....

I do hereby certify that I cannot discover that he/she has any disease physical and or mental that makes him/her unsuitable to continue studying UG Medical/Dental course.....

I consider the above candidate **FIT / UN FIT** to join his/her Medical or Dental UG institution (please put tick to appropriate one)

Date.....

Place.....



.....  
Signature of Registered Medical Practitioner  
Registration No.....  
Council of registration.....  
Contact No.....

SEAL.....

(Candidate to paste recent passport  
Size photograph on which  
Medical practitioner has to attest)



**Check list**

Name of Candidate :

NEET Roll :

Original Set *			Photocopy Set *		
SI	Documents	Tick (√)	SI	Documents	Tick (√)
1	Online admission slip		1	Admission Form <b>(Original duly filled)</b>	
2	Allotment Letter				
3	Rank and Result		2	Rank and Result	
4	NEET Admit		3	NEET Admit	
5	10+2 Mark Sheet		4	10+2 Mark Sheet	
6	10+2 Certificate		5	10+2 Certificate	
7	Age proof		6	Age proof	
8	Medical Certificate		7	Caste certificate / EWS certificate (if any)	
9	Domicile certificate (for SQ)		8	Physically Challenge certificate (if any)	
10	Bond with notary		<b>* Submit the Original set in a Plastic Folder and Submit the Photocopy set with the filled up original Admission Form.</b>		
11	Caste certificate / EWC certificate (if any)				
12	Physically Challenge certificate (if any)				
13	Relieving letter for <b>Upgraded</b> candidates only (if any)				