



कार्यालय प्रधानाचार्य स्वशासी राज्य चिकित्सा महाविद्यालय कानपुर देहात।

Email:asmcknpdehat2023@gmail.com

www.asmckanpurdehat.in



### ADMISSION FORM(A)-2025-26

#### AUTONOMOUS STATE MEDICAL COLLEGE, KANPUR DEHAT

(To be filled by candidate in his/her own hand writing)

ADMISSION THROUGH: (A.I.Quota./State Quota/Govt.Nom.).....

NEET ROLL NO: ..... A.I.R.: .....

CAT. RANK: .....SUB CAT.RANK:.....

STATE RANK: .....CAT. RANK: .....SUB. CAT. RANK: .....

NAME:(ENGLISH): .....

(HINDI): .....

CASTE:.....SUB CASTE:.....RELIGION:.....

DATE OF BIRTH: .....MOB.NO. :..... E-MAIL ID:.....

AADHAR NO: .....SIGNLE /MARRIED:

FATHER'S NAME:..... MOB. NO.:.....

FATHER'S OCCUPATION:.....ANNUAL INCOME IN RS.: .....

MOTHER'S NAME: .....MOB.NO.: .....

MOTHER'S OCCUPATION: .....ANNUAL INCOME IN RS.: .....

PERMANENT ADDRESS: .....

.....PIN CODE NO.: .....

CORRESPONDENCE ADDRESS: .....

.....PIN CODE NO.: .....

LOCAL GAURDIAN'S NAME: ..... MOB.NO.: .....

ADDRESS:.....RELATION.....

Photograph as  
affixed on  
application form  
of NEET 2025

### NEET- 2025

Total marks obtained NEET 2025	PHYSICS MARKS/PERCENTILE	CHEMISTRY MARKS/PERCENTILE	BIOLOGY MARKS/PERCENTILE	TOTLA PERCENTILE
/720				

### EDUCATIONAL QUALIFICATION

EXAMINATION	PASSING YEAR	BOARD/UNIVERSITY		STATE	PERCENTAGE%
CLASS 10 <sup>TH</sup>					
CLASS 12 <sup>TH</sup>					
CLASS 12 <sup>TH</sup> MARKS DETAILS	PHYSICS MARKS	CHEMISTRY MARKS	BIOLOGY MARKS	TOTAL MARKS (PCB)	ENGLISH MARKS
OTHER					

SIGNATURE OF GAURDIAN:.....

SIGNATURE OF CANDIDATE:.....

NAME OF GAURDIAN:.....

NAME OF CANDIDATE:.....

RELATION WITH CANDIDATE: .....

DATE: .....



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**AUTONOMOUS STATE MEDICAL COLLEGE KANPUR DEHAT .**

**ADMISSION LETTER**

The is to certify that Mr./Km. ....  
.....S/D/o Mr. ....  
.....bearing NEET Roll no. ....  
..A.I.R./State Rank No. ....has been granted  
admission to 1st year MBBS course in .....  
.....(College Name) against AIQ/State Quota 2025  
After depositing requisite fee. His/Her following original documents have been  
deposited in this office.

Sr.No	Documents	Check List
1	NEET EXAM. ADMIT CARD/SCORE CARD/RANK CARD	
2	NEET EXAM. ALLOTMENT LETTER	
3	CLASS 10 <sup>TH</sup> MARKSHEET & CERTIFICATE	
4	CLASS 12 <sup>TH</sup> MARKSHEET & CERTIFICATE	
5	TRANSFER CERTIFICATE/MIGRATION CERTIFICATE/CHARACTER CERTIFICATE	
6	CATEGORY/DOMICILE/EWS(OBC/SC/ST/PH/FF/NCC/EX.ARMY /(IF APPLICABLE)CERTIFICATE	
7	D.D.	
8	ANY OTHER	

Total Number of Documents Submitted \_\_\_\_\_

This office has no objection if he/she attends IInd counseling.

DATE: .....

Scrutiny Committee

Nodal/Co-Nodal,Admission Committee

Scrutiny Committee officer-2



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**ADMISSION FORM(B)-2025-26**

**AUTONOMOUS STATE MEDICAL COLLEGE, KANPUR DEHAT**

(To be filled by candidate in his/her own hand writing)

Photograph as  
affixed on  
application  
form of NEET  
2025

NAME OF CANDIDATE (ENGLISH)	:
	.....
(HINDI)	:
	.....
FATHER'S NAME	:
	.....
NEET ROLL NO.	:
	.....
ALL INDIA RANK	:
	.....
STATE RANK	:
	.....
SIGNATURE OF CANDIDATE	English
	.....
(As done in NEET Appl.form)	:Hind
	.....

DATE: .....



# कार्यालय प्रधानाचार्य स्वशासी राज्य चिकित्सा महाविद्यालय कानपुर देहात।

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## FOR OFFICE USE ONLY

(The following documents and self attested photocopy to be submitted by the student)

Left.	Right
Impression of Index Finger	

Sr.No.	Documents	RECEIVED
1	FEE RECEIPT PHOTOCOPY(TO BE DEPOSITED ONLINE/CASH IN MEDICAL COLLEGE KANPUR)	YES/NO
2	NEET 2025 ADMIT CARD/SCORE CARD/RANK CARD	YES/NO
3	NEET 2025 ALLOTMENT LETTER	YES/NO
4	CLASS 10 <sup>TH</sup> MARKSHEET & CERTIFICATE	YES/NO
5	CLASS 12 <sup>TH</sup> MARKSHEET & CERTIFICATE	YES/NO
6	B.Sc. MARKSHEET OR OTHER QUALIFICATION (IF APPLICABLE)	YES/NO
7	TRANSFER CERTIFICATE/MIGRATION CERTIFICATE/CHARACTER CERTIFICATE	YES/NO
8	CATEGORY CERTIFICATE (OBC/SC/ST/PH/FF/NCC/EX.ARMY/(IF APPLICABLE) CERTIFICATE	YES/NO
9	AADHAR CARD	YES/NO
10	DOMICILE CERTIFICATE(सामान्य निवास प्रमाण पत्र)(IF APPLICABLE) (यदि अभ्यर्थी ने हाईस्कूल एवं इन्टरमीडिएट अथवा समकक्ष दोनों परीक्षा अथवा दो में से एक भी परीक्षा उत्तर प्रदेश राज्य के बाहर से उत्तीर्ण की हो)	YES/NO
11	AFFIDAVIT OF SERVICE BOND/GAP/RAGGING	YES/NO

## FEE STRUCTURE

1	TUTION FEE	
2	OTHER FEE	
3	DEVELOPMENT FEE	
4	ADMISSION FEE	
5	CAUTION MONEY	

उत्तर प्रदेश के सभी आरक्षित श्रेणी (OBC/SC/ST) के अभ्यर्थियों से शिक्षण शुल्क आधी(50 प्रतिशत)जमा होगी।

General Candidate-Rs. 40800/- and OBC/SC/ST Candidate-Rs. 31800/-

अभ्यर्थी के पहचान की पुष्टि होने, समस्त शैक्षिक प्रमाण पत्रों के सही पाये जाने एवं स्वास्थ्य परीक्षण में सफल घोषित होने के पश्चात अभ्यर्थी को एम0बी0बी0एस0 पाठ्यक्रम में प्रवेश हेतु संस्तुति की जाती है।

## Admission Committee

MEMBER

Co.Nodal(1):

ADMISSION ALLOWED  
Nodal  
Admission COMMITTEE

Co.Nodal(2):

MEMBER



### UNDERTAKING BY THE STUDENT

1. I, ..... S/O/D/O, 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 hereby Undertake that:
  - I will not indulge in any behavior or any act that come under the definition of ragging.
  - I will not participate in or abet or propagate ragging in any form.
  - I will not participate in or abet or propagate ragging in any form.
3. I hereby agree that if found guilty of any respect of ragging, I may be punished as per the provisions of the UGC Regulations mentioned or as per the law in force.
4. I hereby affirm that I have not been expelled or debarred from admission by any institution.
5. I solemnly affirm that I shall maintain good conduct and behavior throughout my stay in the ASMC Kanpur Dehat, and shall not indulge in any undesirable or anti-social activities. I also affirm that I shall maintain discipline and abide by the provisions of act, ordinances, regulations and other instructions enforced by the college from time to time. In case of breach of this undertaking, I shall be liable to be expelled, rusticated or otherwise decided or quantified by the college authorities.
6. I hereby affirm that I will not keep two wheeler/Four wheeler without the permission of college administration.

Date: .....

Signature of Student .....

(As done in Appl. Form)

### UNDERTAKING BY THE PARENT(S)/GUARDIAN OF THE STUDENT

1. I ..... F/O, M/O, G/O.(Name of Candidate)  
..... 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 hereby assure and undertake that my son/daughter/ward being admitted to the Autonomous State Medical College, Kanpur Dehat shall maintain good conduct and behavior at all times during his/her stay in the college. In case of breach of this undertaking, he/she shall render himself/herself liable to be expelled, rusticated or otherwise decided or quantified by the college authorities.

(.....)

SIGNATURE OF FATHER/GAURDIANS

NAME .....

MOB.NO. ....



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**AUTONOMOUS STATE MEDICAL COLLEGE KANPUR DEHAT U.P**

**FEE STRUCTURE FOR NEET-UG ADMISSION 2025**

Fee Structure: ( As per G.O. No. 2240/71-3-10-328/91 dated 20/8/2010)

FEES DESCRIPTION	GENERAL FEE STRUCTURE	OBC/SC/ST FEE STRUCTURE	REMARKS
Tuition fee	18000/-	9000/-	Annual
Other fee	4000/-	4000/-	Annual
Development fee	2000/-	2000/-	Annual
Admission fee	2000/-	2000/-	Only at the time of admission
Caution Money	10000/-	10000/-	Only at the time of admission(Refundable)
Hostel fee	2400/-	2400/-	Annual double seater
Electricity fee	2400/-	2400/-	Annual
Total	40800/-	31800/-	

**Mode of fee payment:**

By **demand draft** deposited by candidate in favor of “**Principal, Medical College, Kanpur Dehat, UP-209101**” payable at Kanpur Dehat.

Note:

- Fee will be valid only after document verification at the Admission Counter of the college.

Nodal officer Admission Cell

Asmc Kanpur Dehat, U.P



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MEDICAL FITNESS CERTIFICATE- 2025

AUTONOMOUS STATE MEDICAL COLLEGE, KANPUR DEHAT

NAME OF ALLOTTED COLLEGE:.....

ALLOTTED COURSE: (MBBS) .....

NAME OF CANDIDATE : .....

FATHER'S NAME : .....

NEET 2025 ROLL NO.:.....

ALL INDIA RANK : .....

MOBILE NO. : .....

DATE : .....

• IDENTIFICATION MARKS

1-..... (.....)

2-..... (Signature of Candidate)  
(As done in NEET ApII.Form)

\* VERIFIED PHOTOGRAPH AND IDENTIFICATION MARK OF THE CANDIDATE AS MENTIONED IN APPLICATION FORM OF NEET- 2025.

(छात्र/छात्रा द्वारा वही पहचान चिन्ह भरा जायेगा जो उनके नीट-2025 परीक्षा आवेदन पत्र में दर्ज है। अभ्यर्थी के पहचान चिन्ह एवं छायाचित्र का सत्यापन मेडिसिन विभाग के नामित सदस्य द्वारा किया जायेगा)

We do hereby certify that we have examined Sri/Km. ....  
candidate for admission at ASMC, Kanpur Dehat,. He/She is found to be medically fit/unfit for  
the admission.

MEDICINE

SURGERY

OPHTHALMOLOGY

RADIOLOGY

ORTHOPEDICS

E.N.T.

OBG .& GYN  
FOR FEMALE CANDIDATE

CHAIRMAN  
ADMISSION COMMITTEE