PROSPECTUS

for

POST GRADUATE DENTAL COURSES

(FOR ADMISSION TO MASTER OF DENTAL SURGERY (MDS)
COURSE SESSION 2019-20)

PANJAB UNIVERSITY

DR. HARVANSH SINGH JUDGE INSTITUTE OF DENTAL SCIENCES
AND HOSPITAL, CHANDIGARH

Website: http://dentalsciences.puchd.ac.in
<table>
<thead>
<tr>
<th>PANJAB UNIVERSITY ANTHEM</th>
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<tr>
<td>जीवन पुस्तक रोज़ पढ़ा कर</td>
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<td>जीवन पुस्तक रोज़ पढ़ा कर</td>
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<td>सही गलत की समझ बढ़ाता</td>
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<td>तेरी जय का शंख बजायें</td>
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<td>रोशन तारे बन जायें</td>
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<td>वस्त्रों तेरी शोहरत</td>
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<td>तेरी शोहरत सदा सदा रहे</td>
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<td>पंजाब विश्वविद्यालय</td>
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<td>तेरी शान—ओ—शौकत सदा रहे</td>
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MESSAGE

Dr. Harvansh Singh Judge Institute of Dental Sciences offers a stairway to aspirations and hopes in the field of Oral Health Sciences. This budding Institution, established in the year 2006 has labs and clinics, equipped with latest advancements. It is a frontrunner amongst the premier Dental Institutes in the country. Availability of Hi Tech infrastructure, experienced faculty, support of Panjab University departments and research collaboration with premier institutes like PGI, GMCH-32, CSIR-IMTech are some of its strengths. The Alumni of this Institute have secured positions in eminent institutes like AIIMS, PGI, Tata Institute of Social Sciences. They are employed in the Administrative Services, Government jobs and Foreign Universities.

The Institute has devised its curriculum according to cutting-edge technology to cater to the oral health needs of people of very stratum. Education is a lifelong process and it is important to assimilate knowledge and put it into practice. We believe in this philosophy and have taken steps in that direction to provide quality education for the holistic development of the student. I am sure that as a student; you will learn, grow and cherish your stay here.

I extend a warm welcome and best wishes to all the young dentists seeking evolution at the Dr. Harvansh Singh Judge Institute of Dental Sciences and Hospital.

(Raj Kumar)
MESSAGE

I deem it my privilege to welcome you all to Dr Harvansh Singh Judge Institute of Dental Sciences & Hospital, Panjab University, Chandigarh. I am honoured to be associated with this prestigious Institute that is a part of one of the oldest Universities in the Country. The institute is ranked amongst one of the top Institute.

Located in the City Beautiful, our Institute caters to the people of the tri-City and neighbouring areas providing would class yet affordable patient care to all strata of the society. The institute offers a 5 year BDS course with 100 admissions per batch and MDS program in 6 specialities with 17 seats. Our faculty members and dedicated in holding high the mantle of the Institute. We have an integrated learning program where the students acquire the desired skills and knowledge needed. We envisage to mould our students to be self-confident so that when they enter the world, they can face all challenges in life with conviction and success.

There is active and ongoing research carried out in the Institute by its faculty and post graduate students that are funded by various agencies such as ICMR, UGC, DST etc. We also conduct out reach programs to create oral health awareness to benefits the masses. Our Institute works in collaborations with various departments of the Panjab University as well as Institutes like PGIMER, GMCH-32 , CSIR-IMTech.

I wish you the best in the process of your becoming a part of this family and wish that you achieve excellence and serve the society with dedication..

(Jagat Bhushan)
Availability of Prospectus cum Admission Form

- Prospectus cum Admission Form is available on the Website of Dr. Harvansh Singh Judge Institute of Dental Sciences & Hospital, Panjab University, Chandigarh i.e. http://dentalsciences.puchd.ac.in/ for viewing/downloading.

- Copy of the Prospectus can also be obtained from the Dental Institute.

- Only those candidates who submit complete Admission Form along with specified annexure and fee by due date will be included in the list of candidates eligible to appear for counseling, subject to fulfillment of other eligibility criteria, specified in the Prospectus. Candidates are advised to keep a copy of the submitted Admission Form for their reference.

PROSPECTUS AND ADMISSION FEE
Rs. 1500/- (General Category) Rs. 750/- (SC/ST/PwD Category)

ADMISSION FEE MODE:
Demand Draft in favour of “REGISTRAR, PANJAB UNIVERSITY, CHANDIGARH” payable at Chandigarh. No other mode of fee shall be accepted.

FACULTY MEMBERS ARE AVAILABLE FOR CONSULTATION AND GUIDANCE OF THE STUDENTS FROM 3.00 P.M. TO 4.00 P.M. ON WORKING DAYS (MONDAY TO FRIDAY)
## CONTENTS

<table>
<thead>
<tr>
<th>S. NO.</th>
<th>DESCRIPTION</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>About Panjab University</td>
<td>7</td>
</tr>
<tr>
<td>2.</td>
<td>About the Institute</td>
<td>8</td>
</tr>
<tr>
<td>3.</td>
<td>Administration of the Institute</td>
<td>9</td>
</tr>
<tr>
<td>4.</td>
<td>Admission schedule</td>
<td>10</td>
</tr>
<tr>
<td>5.</td>
<td>Distribution of MDS Seats</td>
<td>11</td>
</tr>
<tr>
<td>6.</td>
<td>Eligibility Criteria</td>
<td>12-13</td>
</tr>
<tr>
<td>7.</td>
<td>General Instructions</td>
<td>14</td>
</tr>
<tr>
<td>8.</td>
<td>Instructions for counseling and interchangeability of seats</td>
<td>15-16</td>
</tr>
<tr>
<td>9.</td>
<td>Check List</td>
<td>17</td>
</tr>
<tr>
<td>10.</td>
<td>Admission</td>
<td>18</td>
</tr>
<tr>
<td>11.</td>
<td>Rules for refund of tuition fee</td>
<td>19</td>
</tr>
<tr>
<td>12.</td>
<td>Anti-Ragging</td>
<td>20</td>
</tr>
<tr>
<td>13.</td>
<td>Admission Form</td>
<td>21-24</td>
</tr>
<tr>
<td>14.</td>
<td>Specimen of Character Certificate (Annexure-I)</td>
<td>25</td>
</tr>
<tr>
<td>15.</td>
<td>Specimen of Scheduled Caste/Scheduled Tribe Certificate (Annexure-II)</td>
<td>26</td>
</tr>
<tr>
<td>17.</td>
<td>Specimen of Medical Examination Forms (Annexure-IV)</td>
<td>29-31</td>
</tr>
<tr>
<td>18.</td>
<td>Specimen of Person with Disability (PwD) Certificate</td>
<td>32-35</td>
</tr>
</tbody>
</table>
Since its inception 137 years ago in 1882 (at Lahore, now in Pakistan), Panjab University, Chandigarh, fourth oldest university in the country, has been in the forefront in imparting quality education and undertaking intellectually challenging as well as socially relevant research. By virtue of its achievements, philosophy and experience, it has become a university of national recognition and global stature. In the ranking analyses carried out by different agencies, PU was ranked 1st among Universities of India and 38th in Asia, Times Higher Education Asian University rankings (2015), 13th in BRICS (2014), among top 250 in World University Ranking (2013) and 2nd in the top 30 institutes from India (2012). The Panjab University has been ranked 10th in country Times Higher Education Asia University Ranking 2018. The Chandigarh campus has 85 teaching and research departments/institutes including 4 independent Chairs and 4 Regional Centres at Hoshiarpur, Muktsar, Kauni and Ludhiana and 6 constituent Institutes in rural areas as well as 192 affiliated colleges in Chandigarh and Punjab State, having a student base of more than 3.5 lacs. For more information visit Panjab University website: “http://www.puchd.ac.in”.
ABOUT THE INSTITUTE

In view of the imminent need for providing a public funded quality oral health care set up and to impart dental education and open avenues for research in the field of oral health, Dr Harvansh Singh Judge Institute of Dental Sciences was established in April 2006 under the aegis of Panjab University. The Institute aims at providing oral health care facilities to the general public and training to the students at both undergraduate and postgraduate levels. It has the ability to generate ample research avenues in dental/medical sciences which can have a far reaching affect on oral as well as general health. The Institute imparts special thrust on community healthcare and outreach programs for the children and under-served population.

Within this short span the institute has been attending to more than 450 patients everyday in the various specialty clinics. A fully equipped diagnostic lab is functional at the institute which is carrying out most of bio-chemical, histopathological and microbiological tests at the institute itself. The institute is offering BDS course with annual intake of 100 students and MDS course in six specialties namely Conservative Dentistry, Oral Surgery, Orthodontics, Periodontics, Prosthodontics and Oral Pathology.

The Institute faculty members are involved in various clinical and basic sciences research projects. The major focus area of the institution is to provide good and affordable dental treatment in various specialties to the general public, carry out clinical and basic research including surveys, diagnostic and randomized controlled clinical trials, conduct outreach program to enhance oral health awareness to the population for the benefit of the masses and to provide clinical and didactic training as part of teaching curriculum.

The institute is already working in collaboration with many institutes like PGIMER, GMCH-32, CSIR–IMT etc. The dental institute has been ranked Number One institute in the region consecutively for three years (2012-2014) by a leading daily newspaper 'The Tribune'.

The dental Institute has been granted research funding by government agencies like DST, UGC, SERB, ICMR, IUSSTF and by industry as well e.g. Waterpik. The publication profile of the dental institute is amongst the best in the country amongst the dental institutes with publications in high impact factor journals like Journal of Immunology, Cytokine, and Circulation etc.

Dental Institute is participating in cutting edge technology research by being a spoke to Design Innovation Centre (DIC), a project granted by UGC.
## ADMINISTRATION OF THE INSTITUTE

<table>
<thead>
<tr>
<th>Name &amp; Designation</th>
<th>Telephone (Office)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Dr. Jagat Bhushan, Principal-cum-Professor, Dr. Harvansh Singh Judge Institute of Dental Sciences, Panjab University Sector 25, Chandigarh</td>
<td>0172-2724813, 2534686</td>
</tr>
<tr>
<td>2. Deputy Registrar</td>
<td>0172-2534688</td>
</tr>
<tr>
<td>3. Office Superintendent (Office)</td>
<td>0172-2534687</td>
</tr>
<tr>
<td>4. Office Superintendent (Student Section)</td>
<td>0172-2534689 90410-64858 (during office hours only)</td>
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</tbody>
</table>
# ADMISSION SCHEDULE

<table>
<thead>
<tr>
<th></th>
<th>Date Description</th>
<th>Date/Time</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Date of availability of Prospectus on Institute website</td>
<td><a href="http://dentalsciences.puchd.ac.in/">http://dentalsciences.puchd.ac.in/</a> 23.03.2019 (Saturday)</td>
</tr>
<tr>
<td>2</td>
<td>Last date for receipt of complete Admission Form alongwith annexures in the office of Principal-cum-Professor</td>
<td>05.04.2019 (Friday) Till 04.00 pm</td>
</tr>
<tr>
<td>3</td>
<td>Date of Display of Merit List of eligible candidates on the Institute website/ Notice Board of the Institute</td>
<td>09.04.2019 (Tuesday) By 04.00 pm</td>
</tr>
<tr>
<td>4</td>
<td>Date of 1(^{st}) counseling (Venue: LT-1, Ground Floor of the Institute)</td>
<td>11.04.2019 (Thursday) at 11.00 am</td>
</tr>
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<td>5</td>
<td>Last date of joining the allotted seat after 1(^{st}) counseling</td>
<td>18.04.2019 (Thursday)</td>
</tr>
<tr>
<td>6</td>
<td>Commencement of Academic Session</td>
<td>01.05.2019 (Wednesday)</td>
</tr>
<tr>
<td>7</td>
<td>Date of 2(^{nd}) counseling (Venue: LT-1, Ground Floor of the Institute)</td>
<td>13.05.2019 (Monday) at 11.00 am</td>
</tr>
<tr>
<td>8</td>
<td>Last date of joining the allotted seat after 2(^{nd}) counseling</td>
<td>20.05.2019 (Monday)</td>
</tr>
<tr>
<td>9</td>
<td>Counseling for leftover seats</td>
<td>29.05.2019 (Wednesday)</td>
</tr>
<tr>
<td>10</td>
<td>Last date upto which students can be admitted/ join against vacancies arising due to any reason</td>
<td>31.05.2019 (Friday) Till 04.00 pm</td>
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Website: [http://dentalsciences.puchd.ac.in](http://dentalsciences.puchd.ac.in)
## DISTRIBUTION OF MDS SEATS

<table>
<thead>
<tr>
<th>Subject</th>
<th>Total Seats in each Speciality</th>
<th>General</th>
<th>S.C.</th>
<th>S.T.</th>
<th>B.C.</th>
<th>PwD</th>
</tr>
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<tbody>
<tr>
<td>Conservative Dentistry &amp; Endodontics</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral and Maxillofacial Surgery</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orthodontics &amp; Dentofacial Orthopedics</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Periodontics</td>
<td>3</td>
<td>2</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prosthodontics and Crown &amp; Bridge</td>
<td>3</td>
<td>2</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Oral Pathology</td>
<td>3</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>17</strong></td>
<td><strong>11</strong></td>
<td><strong>3</strong></td>
<td><strong>1</strong></td>
<td><strong>1</strong></td>
<td><strong>1</strong></td>
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</table>
ELIGIBILITY CRITERIA

1. The admission to MDS course shall be open to candidates who have qualified NEET-MDS 2019 and are eligible as per eligibility criteria for NEET-MDS 2019 laid down in Information Bulletin for National Eligibility-cum-Entrance Test-MDS for admission to MDS course 2019.

2. As per Dental Council of India guidelines, the minimum percentile of marks for eligibility for admission to postgraduate dental courses shall be 50% percentile for General Category candidates, 45% percentile for Person with Disability (PwD) and 40% percentile for the candidates belonging to Scheduled Castes/Scheduled Tribes/Backward Classes (BC).

3. Counseling / Admission shall be conducted by the Admission Committee constituted by the Panjab University for this purpose.

4. Candidates cannot claim a seat/admission on the basis of the NEET-MDS 2019 rank alone. Eligibility of a candidate for admission against any Post Graduate seat will be determined by the Admission Committee, as per rules and regulations laid down by the Panjab University & DCI from time to time. The eligibility shall also be based on other documents as specified in the check list at page No. 14, with the Admission Form.

5. Candidates shall attach the self attested downloaded copy of Result Card of NEET-MDS 2019. The candidate is also required to attach self attested photocopy of the Admit Card of NEET-MDS 2019 with ADMISSION FORM.

6. In case any candidate is found to have furnished false information or certificate, etc. or is found to have withheld or concealed information in his/her Admission Form, he/she shall be debarred from admission.

7. All candidates will be considered for admission in General Category. The candidates interested to be considered under any other category also, must write the relevant code at specified serial number 12 of the Admission Form. For Category Codes, see ‘Instructions for the Candidates’ at Sr. No. 10 of Admission Form. No candidate will be considered for a category whose code has not been entered in the Admission Form, even if the candidate actually belongs to that category.

8. For claims on reserved seats/categories wherever applicable, the candidates must support their claim by attaching self attested photocopies of appropriate certificate(s)/documents issued by competent authority as per specimen given in Annexures to this Prospectus along with the Admission Form.
9. Candidate with disability, i.e., Person with Disability (PwD) shall be considered for admission as per rules and regulations specified by Dental Council of India as appended below:

“5% seats of the annual sanctioned intake capacity shall be filled up by candidates with locomotory disability of lower limbs in between 50% to 70%.

Provided that in case any seat in this 5% quota remains unfilled on account of unavailability of candidates with locomotory disability of lower limbs between 50% to 70% then any such unfilled seat in this 5% quota shall be filled up by persons with locomotory disability of lower limbs between 40% to 50% before they are included in the annual sanctioned seats for General Category candidates”.

10. INCOMPLETE ADMISSION FORM OR WITHOUT REQUISITE FEE WILL NOT BE ENTERTAINED AND WILL BE REJECTED WITHOUT ANY INTIMATION TO THE CANDIDATE.
GENERAL INSTRUCTIONS

1. This Prospectus is subject to alteration(s) / modification(s) at any time without notice. For updates please visit Institute website ([http://dentalsciences.puchd.ac.in](http://dentalsciences.puchd.ac.in)) from time to time. There is no equity or any rights that are /or deemed to be arising in favour of candidate.

2. Changes, if any, in the Schedule / Counseling etc. shall be notified only through website of the Institute i.e. [http://dentalsciences.puchd.ac.in](http://dentalsciences.puchd.ac.in). No candidate shall be informed individually. Candidates are advised to browse the website regularly for any announcements/changes and the institute shall not be responsible for any fallout due to lack of information on the part of the candidate.

3. Candidates must retain the copy of Prospectus & Admission Form with them. They should carefully read the instructions, rules & regulations and comply with all instructions therein strictly.

4. The allotment of speciality to the applicants for admission, shall be made by the Admission Committee as per merit determined on the basis of NEET-MDS 2019 and the choice of the speciality opted by the candidate. **Physical presence is mandatory in every counseling both for General Category and Reserved Categories candidates as per the notified dates.** The candidate must bring alongwith all the original documents.

5. The candidate should read the eligibility conditions/ criteria carefully and just appearing in counseling does not entitle him/her for admission. The eligibility shall be determined by the Admission Committee on the basis of documents submitted by the candidate at the time of counseling. Those who are not eligible as per the decision of the committee will not be considered for admission. The candidates will appear in counseling at their own risk and responsibility. Eligibility is also subject to medical fitness.

6. Before applying for the admission, candidate should ensure that their BDS degree is recognized as per provisions of Dental Council of India. If it is found at any time that BDS degree is not recognized, the candidature/Admission to MDS course shall be cancelled.

7. Original certificates/documents shall have to be deposited by the candidate at the time of counseling, after the seat has been allotted to the candidate. The certificates/documents shall be returned to the candidate only on surrendering the seat or after the completion of the course.
INSTRUCTIONS FOR COUNSELING

1. Merit List for each category will be made separately based on the result of NEET-MDS 2019. Merit list will be displayed on the Institute Notice Board and at Institute Website on 09.04.2019 by 04.00 pm. Information regarding any changes in the schedule or details of counseling shall be notified on the Institute website http://dentalsciences.puchd.ac.in. No individual/separate intimation will be provided by the Institute office for the same. Candidates are advised to regularly browse the Institute website /to constantly follow the changes in information, if any.

2. The allotment of speciality will be made as per the merit determined by the NEET-MDS 2019, as per the choice of speciality by the candidate, and the availability of seats at the time of the counseling.

3. If an eligible candidate reports late for counseling when his/her turn according to his/her rank/merit has already been passed over, he/she will be considered as per available seat at the time of his/her actual reporting in the counseling.

4. The candidates shall have to produce all the certificates/ degrees/ diplomas/documents in original at the time of admission/counseling as per the check list. In case the originals are not provided at the time of counseling, the seat shall not be allocated to the candidate and shall be allotted to the next eligible candidate.

5. Any directions/order governing admissions to any of the course from the Government/Hon’ble courts/Regulatory bodies will be binding on all candidates.

6. Tuition Fee structure is given as below:

<table>
<thead>
<tr>
<th>MDS</th>
<th>Fee</th>
<th>Maintenance/ Users Charges</th>
<th>Contributio n to Funds</th>
<th>Total Fee in Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ist year (2019-20)</td>
<td>5,34,010/-</td>
<td>1,660/-</td>
<td>6,000/-</td>
<td>5,41,670/-</td>
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<tr>
<td>IIrd year (2020-21)</td>
<td>5,60,720/-</td>
<td>1,750/-</td>
<td>6,000/-</td>
<td>5,68,470/-</td>
</tr>
<tr>
<td>IIIrd Year (2021-22)</td>
<td>5,88,760/-</td>
<td>1,840/-</td>
<td>6,000/-</td>
<td>5,96,600/-</td>
</tr>
</tbody>
</table>

A. The fee is to be deposited on the day of counseling in the form of Demand Draft (DD) favouring “REGISTRAR, PANJAB UNIVERSITY CHANDIGARH” payable at Chandigarh.

B. *The fee to be charged is subject to revision by Panjab University Authorities and amendment from time to time and the revised decision will be applicable irrespective of that given in this prospectus.*

C. Post Matric Scholarship for the SC/ST students: The Vice Chancellor with approval of Syndicate meeting held on 01/15/28/29 May, 2016 and as per letter No. 2438-2537/SC/ST Cell dated 04.07.2016, “The SC/ST students of Punjab State only”, who are eligible for Post Matric Scholarship (i.e. whose family income is less than or equal to 2.5 lac), studying or taking admission in Self Financing courses of Panjab University, its Regional Centres and Panjab University Constitute Colleges, be allowed to pay only 25% of total admission fee to the respective teaching departments of Panjab University, its Regional Centres and Panjab University Constitute Colleges, for the academic session year 2019-20. The students claiming this benefit are required to submit:

i. Income Certificate in Original (full detail of total family income from all sources including the income accruing from agricultural land or any urban
property/ shop/ business/ maintenance duly attested by the Competent Authority).

ii. Copy of SC Certificate

iii. Copy of Residence Proof

iv. Copy of Bank Account Number Passbook showing IFS Code

v. Copy of Adhaar Card

vi. Copy of last exam passed certificate.

Note: The applicability of this scholarship is subject to approval by the Panjab University authorities for the current academic session 2019-20.

7. A monthly stipend of Rs.10,000/- shall be paid to the students for the three years duration of the course from the date of joining.

8. In the Reserved Categories of SC/ST, the seats shall be regarded as ‘Interchangeable’. That is to say, if sufficient numbers of eligible candidates are not available to fill up the seats reserved for Scheduled Castes the same may be filled up from amongst the eligible candidates belonging to the Scheduled Tribes and vice-versa.

9. In case sufficient numbers of eligible candidates, belonging to Reserved Categories are not available, the vacant seats at the end of second counseling shall be transferred and filled from the General Category candidates on the basis of merit/rank obtained in NEET-MDS 2019.
CHECK LIST OF ORIGINAL CERTIFICATES AND TESTIMONIALS REQUIRED FOR SCRUTINY AT THE TIME OF COUNSELLING

1. Admit Card and Result Card of NEET-MDS 2019
2. Matriculation or equivalent certificate for proof of date of birth
3. 10+2 or equivalent certificate
4. Registration certificate with State Dental Council
5. BDS Degree
6. Internship completion certificate
7. BDS Detail marks certificates – all university professional examinations
8. Character certificate from the Principal of Dental Institute last attended (Annexure-I)
9. Certificate of Scheduled Caste/Scheduled Tribe Certificate (Annexure-II) if applicable
10. Certificate of Backward Class (BC) Certificate (Annexure-III) if applicable
11. Certificate of Person with Disability (PwD) if applicable
12. No objection certificate from the appointing authority where presently working (if applicable) and candidate admission will be governed by rules for in service candidates.
13. Migration certificate for applicants from any other university other than Panjab University (can also be submitted later after admission within 10 days)
14. Copy of Aadhaar Card
Admission

1. The candidates selected for admission will have to undergo medical examination by the constituted Medical Board on the same day or succeeding day of their selection to the course. Only those candidates who are found to be medically fit shall be granted admission.

2. The candidates, who do not appear before the Medical Board or are found to be medically unfit, shall not be allowed to join the course.

3. Fee is to be paid on the day of the counseling. The candidature of the eligible candidates, who do not deposit the prescribed fees in full, shall stand automatically cancelled and vacancies so caused shall be offered to the candidates next in order of merit on the same day/ subsequent counseling. No correspondence or appeal in this connection will be entertained by the Admission Committee.

4. Admissions shall be made strictly in accordance with eligibility criteria and rules mentioned in this Prospectus and as per existing rules of Panjab University and Dental Council of India. However, in all matters which need interpretation or for which no provision exists in the Prospectus, the decision of the Admission Committee shall be final, taken as per rules of Panjab University Hand Book of Information 2019.

5. All admissions to MDS courses shall be provisional and subject to the approval by Panjab University/ Dental Council of India/ any other regulatory body.

6. All legal disputes relating to admission of students to MDS course shall have jurisdiction in Chandigarh only.
RULES FOR REFUND OF TUITION FEE

1. In the event of a candidate surrendering the seat, the fee collected from the students shall be refunded after a deposition of Rs.1000/- as administrative and processing fee in the form of Demand Draft(DD) favouring Registrar, Panjab University, payable at Chandigarh provided the seat gets filled up in the subsequent counseling. In the cases where fee has to be refunded it shall be done only after 31st May 2019.

2. However, the fee shall not be refunded to the candidate withdrawing from the MDS course if the seat thus left vacant is not filled up in the subsequent counseling or if it was not possible to hold the counseling after the seat was left for paucity of time or due to any other reasons.
ANTI RAGGING

This is for the information of the students of the Panjab University campus that "RAGGING IS COGNIZABLE OFFENCE AND IS BANNED IN ANY FORM INSIDE & OUTSIDE THE CAMPUS"

<table>
<thead>
<tr>
<th>Ingredients/forms of Ragging</th>
<th>Punishments</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Abetment to ragging;</td>
<td>- Cancellation of admission.</td>
</tr>
<tr>
<td>- Criminal conspiracy to rag;</td>
<td>- Suspension from attending classes and academic privileges;</td>
</tr>
<tr>
<td>- Unlawful assembly and rioting while ragging;</td>
<td>- Withholding/withdrawing scholarship/fellowship and other benefits;</td>
</tr>
<tr>
<td>- Public nuisance created during ragging;</td>
<td>- Debarring from appearing in any test/examination or other evaluation process;</td>
</tr>
<tr>
<td>- Violation of decency and morals through ragging;</td>
<td>- Withholding results;</td>
</tr>
<tr>
<td>- Injury to body, causing hurt or grievous hurt;</td>
<td>- Debarring from representing the institution in any regional, national or international meet, tournament, youth festival, etc.</td>
</tr>
<tr>
<td>- Wrongful restraint;</td>
<td>- Suspension/expulsion from the hostel;</td>
</tr>
<tr>
<td>- Wrongful confinement;</td>
<td>- Cancellation of admission;</td>
</tr>
<tr>
<td>- Use of criminal force;</td>
<td>- Rustication from the Institution for period ranging from 1 to 4 semesters;</td>
</tr>
<tr>
<td>- Assault as well as sexual offences or unnatural offences;</td>
<td>- Expulsion from the institution and consequent debarring from admission to any other institution for a specified period;</td>
</tr>
<tr>
<td>- Extortion;</td>
<td>- Fine ranging between Rs. 25,000/- to Rs. 1 Lakh;</td>
</tr>
<tr>
<td>- Criminal trespass;</td>
<td>- Rigorous imprisonment upto 3 years;</td>
</tr>
<tr>
<td>- Offences against property;</td>
<td>- Collective punishment: When the persons committing or abetting the crime of ragging are not identified, the institution shall resort to collective punishment.</td>
</tr>
<tr>
<td>- Criminal intimidation;</td>
<td></td>
</tr>
<tr>
<td>- Attempts to commit any or all of the above mentioned offences against the victim(s);</td>
<td></td>
</tr>
<tr>
<td>- Physical or psychological humiliation;</td>
<td></td>
</tr>
<tr>
<td>- All other offences following from the definition of &quot;Ragging&quot;.</td>
<td></td>
</tr>
</tbody>
</table>

In compliance of the 3rd Amendment in UGC Regulations on 29th June, 2016 to expand the definition of ragging by including the following: -

"Any act to physical or mental abuse (including bullying and exclusion) targeted at another student (fresher or otherwise) on the ground of colour, race, religion, caste, ethnicity, gender (including transgender), sexual orientation, appearance, nationality regional origins, linguistic identity, place of birth, place of residence or economic background".

Student becoming a victim of ragging should immediately inform to the concerned Chairperson/ Warden as the case may be besides contacting on Helpline nos. given below.

**Helpline Numbers for reporting the Ragging:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact Number</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dean Student Welfare</td>
<td>7087033309, Mail: <a href="mailto:dsw@pu.ac.in">dsw@pu.ac.in</a></td>
<td></td>
</tr>
<tr>
<td>Dean Student Welfare (W)</td>
<td>7087033310</td>
<td></td>
</tr>
<tr>
<td>Associate Dean Student Welfare</td>
<td>9878555311</td>
<td></td>
</tr>
<tr>
<td>Assistant Registrar (DSW)</td>
<td>2541176, 2534573, 2534570</td>
<td></td>
</tr>
<tr>
<td>Security Control Room Hot Line</td>
<td>0172-2771170, 9779737403</td>
<td></td>
</tr>
<tr>
<td>Security Office (24 hrs)</td>
<td>0172-2534897, 0172-2536164 (intercom)</td>
<td></td>
</tr>
<tr>
<td>Chief of University Security (Official No.)</td>
<td>09779824323</td>
<td></td>
</tr>
<tr>
<td>Anti Ragging Helpline at</td>
<td><a href="mailto:helpline@antiragging.in">helpline@antiragging.in</a></td>
<td></td>
</tr>
<tr>
<td>National Anti Ragging Free Helpline No.</td>
<td>1800-180-5522 (24x7 Toll Free)</td>
<td></td>
</tr>
</tbody>
</table>

The Ministry of Human Resource Development vide their D.O. letter No. 16-8/2013-U.5 dated 27-12-2013 has requested that the students/parents/guardians can now file their undertaking on anti ragging online through [www.antiragging.in](http://www.antiragging.in) or [www.amanmovement.org](http://www.amanmovement.org).
PANJAB UNIVERSITY, CHANDIGARH  
DR. HARVANSH SINGH JUDGE INSTITUTE OF DENTAL SCIENCES & HOSPITAL  
ADMISSION FORM (MDS)  
(Academic Session 2019-20)

Panjab University Registration No. /PUPIN (if any)   

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Last date for receipt of Admission Form: (05.04.2019 by 4.00 pm)</th>
</tr>
</thead>
</table>

1. Name of the Candidate   
2. Father’s Name   
3. Mother’s Name   
4. Guardian’s Name   
5. Date of Birth  DD/MM/YYYY   
6. Sex (M/F/Transgender)   
7. Nationality   
8. Address for Correspondence   
9. Permanent Address   

<table>
<thead>
<tr>
<th>Mobile No. (Self)</th>
<th>Mobile No. (Parents)</th>
</tr>
</thead>
</table>

10. E-mail ID (Self)   
11. E-mail ID (Parents)   
12. NEET-MDS 2019-20 detail Roll No. Score Rank (All India)   
13. Category Code (see "Instructions for the Candidates" at Sr. No. 10)   
14. Annual Family Income from all sources (Rs.)   
15. Blood Group   
16. Urban Semi-Urban Rural   
17. Immunization Status: (Write Yes or No) Hepatitis B Tetanus   
18. Hostel Required: Yes No   
19. Type of vehicle to be used by the student: 4 wheeler 2 wheeler None   
20. Fee Detail Draft No. Dated   

Full Signature of the Candidate
SUMMARY OF EDUCATIONAL QUALIFICATIONS

<table>
<thead>
<tr>
<th>Class</th>
<th>Subjects studied</th>
<th>Max. Marks</th>
<th>Marks Obtd.</th>
<th>%age</th>
<th>Session &amp; Year</th>
<th>Roll No.</th>
<th>University/Board</th>
<th>School/College</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
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</tr>
</tbody>
</table>

DECLARATION BY THE CANDIDATE

1. I declare that I have carefully read the instructions and state that the entries made by me in this form are correct to the best of my knowledge and nothing has been concealed. I understand that my admission is liable to be cancelled and legal action can be taken against me if there is any concealment/ misrepresentation in Admission Form or in the attached certificates/undertakings/documents etc.

2. I declare that I am not doing any Post Graduate Course anywhere else.

3. I undertake to observe proper standards of Academic conduct.

4. I shall abide by the prescribed courses of readings and the modes of examinations, which may prevail from time to time, even though these may be at variance with those of the previous years.

5. I understand that incomplete form is liable to be rejected.


7. I shall faithfully carry out the instructions issued by the Principal of the Institute, Faculty members and other University authorities from time to time.

8. I hold myself responsible for prompt payment of fees and all other dues.

9. I understand that I cannot concurrently be enrolled for more than one full-time course of studies.

10. I am fully aware that ragging is strictly prohibited/punishable under Law. If I am found guilty of indulging in or abetting ragging, I shall be liable for expulsion from the University/Hostel and punishment as per law.

11. I certify that I have no criminal background and have not been convicted under any criminal offence. Further, I undertake that no F.I.R. has been registered against me or no criminal proceedings are pending against me.

12. I undertake not to smoke and take drugs on the Campus.
13. I undertake that I will not possess/carry any lethal weapon on the University campus and if any weapon is recovered from me then I can be rusticated from the Institute/ University and legal action can be taken against me.

14. I shall regularly browse the Online/ Physical Notice Board of the Institute for notifications related to attendance/instructions. Further, I understand that I shall be detained from appearing in the examination if my attendance is below the minimum percentage of attendance required as per the regulations of the course.

Date………………………….  ………………………………………………………
(Full Signature of the Candidate)

DECLARATION BY THE PARENT/GUARDIAN

1. I certify that my son/daughter/ward is making this application with my permission. I hold myself responsible for his/her good conduct and behavior as a student of the University and for payment of all his/her fees and dues during his/her stay in the University.

2. I am aware that monthly attendance of my son/daughter/ward will be available at the Online Notice Board of the department and my son/daughter/ward can be detained from appearing in the examination if his/her attendance is below the minimum percentage of attendance required as per the regulations of the course.

3. I understand that in case of any concealment/misrepresentation by my son/daughter/ward in Admission Form or in the attached certificates/undertakings/documents etc., his/her admission is liable to be cancelled and legal action can be taken against him/her.

Date………………………………………………...
Mobile No…………………………………..
E-mail ID…………………………………..
(Full Signature of the Parent/Guardian)
Name: …………………………………………………..

CHECK-LIST OF DOCUMENTS ATTACHED

In addition to self-attested copies of academic certificates, the candidate should also attach self-attested copies of the documents/certificates listed below:–

- a) Admit Card and Result Card of NEET-MDS 2019-20
- b) Matriculation or equivalent certificate for proof of date of birth
- c) Registration certificate with State Dental Council
- d) BDS Degree
- e) Internship completion certificate
- f) BDS Detail marks certificates – all university professional examinations
- g) Character Certificate (Yes/No)
- h) Certificate of Scheduled Caste/Scheduled Tribe Certificate
- i) Certificate of Backward Class (BC) Certificate
- j) Certificate of Person with Disability (PwD)
- k) No objection certificate from the appointing authority where presently working (if applicable)
- l) Migration certificate for applicants from any other university other than Panjab University (can also be submitted later after admission)
- m) Copy of Aadhaar Card
- n) Any other certificate / document______________________________________

(Full Signature of the Candidate)
INSTRUCTIONS FOR THE CANDIDATES

1) Admission Form is of four pages. Candidates are advised to print Admission Form on both sides of the paper.

2) All entries in the Admission Form must be made in the candidate’s own handwriting in a clear and legible manner. INCOMPLETE FORMS SHALL BE SUMMARILY REJECTED. If any column in the form is left unfilled or form is unsigned or any information sought is incomplete or the copies of requisite certificate(s) is/are not annexed, the Admission Form will be straightway rejected and no claim will be entertained later on. If any information sought is not applicable to the candidate, the word ‘N.A.’ should be entered against that column.

3) This form, complete in all respect, must be submitted to the Institute as has been indicated in the Admission Notice of 2019-20 on or before the last date indicated at the top of admission form.

4) All candidates will be considered for admission in General Category. The candidates interested to be considered under any other category also, must write the relevant code at Sr. No. 12 of the Admission Form. For Category Codes, see Sr. No. 10. No candidate will be considered for a category whose code has not been entered in the Admission Form, even if the candidate actually belongs to that category.

5) If a candidate omits/conceals/misrepresents relevant information, his/her admission is liable to be cancelled and legal action will be taken.

6) The format in which various certificates are to be submitted is given in the Prospectus. Only certificates along these lines will be acceptable. The hardcopy of the same can be obtained from Institute.

7) Fees / funds and charges payable for the course by the students, shall be as prescribed by the University from time to time.

8) Hostel seats are limited and the same will be allotted exclusively on the basis of merit as per the quota allotted to the Institute.

9) The filling of Admission Form in no way confirms eligibility. The admission shall be provisional throughout till the candidate’s proof of eligibility is confirmed by the University authorities.

10) For filling Sr.No.12 of Admission Form use following codes (one can fill more than one Category Code):

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>General</td>
<td>GN</td>
</tr>
<tr>
<td>Scheduled Castes</td>
<td>SC</td>
</tr>
<tr>
<td>Scheduled Tribes</td>
<td>ST</td>
</tr>
<tr>
<td>Backward Classes</td>
<td>BC</td>
</tr>
<tr>
<td>Person with Disability</td>
<td>PwD</td>
</tr>
</tbody>
</table>

Note: Addition /change in category at a later stage is not permissible under any circumstances, even if the candidate has attached the relevant certificate along with Admission Form.

(Full Signature of the Candidate)
CHARACTER CERTIFICATE

Certified that Mr./Ms. ____________________________s/d/of Sh._________________________ & Smt. ____________________________ has been a bonafide student of this Institute during the period ___.

He/She appeared in the BDS Examination of the ____________________________ (University/Board) held in ____________________________ under the Roll No. _____________.

1. In case of any misconduct, it is suggested that brief particulars of disciplinary action taken by Institute/Board/University during the course (session) attended, including punishment such as expulsion, warning, fine & any disqualification for violation of rules or persistent display of violent/aggressive behavior or display of any desire to cause harm to any person (including himself) or committing any immoral conduct or showing criminal tendencies if any, to be mentioned

2. General Conduct during stay in the Institution:- Good/Satisfactory/Unsatisfactory.*

3. He/She bears good moral character.

Signature

Dated:-

(Principal)

(Office Seal)*

Strike out whichever is not applicable.
ANNEXURE-II

SCHEDULED CASTE/ SCHEDULED TRIBE CERTIFICATE

The Caste/ Tribe Certificate should necessarily contain the following information about:

(a) Name of the person;
(b) Father’s name;
(c) Permanent place of residence
(d) Name of the Caste/ Tribe
(e) Constitutional order under which the caste/ tribe has been notified
(f) signature of issuing authority along with the designation, seals and date

Authorities Empowered to issue SC/ST certificate

3. Revenue Officer not below the rank of Tehsildar.
4. Sub-Divisional Officer of the area where the candidate and/or his/her family normally resides.
5. Administrator/ Secretary to Administrator/ Development Officer (Lakshdweep Islands).
Certificate for Backward Class* (persons belonging to OBC/SBC will not be considered under this category)

This is to certify that Shri / Smt / Kumari __________________________ son / daughter of ______________ village ______________ District / Division ______________ in the State of Punjab belongs to ______________ community which is recognised as a backward class under the Government of Punjab, Department of Welfare of SCs and BCs vide notification No. ______________ dated ______________ Shri / Smt / Kumari __________________________ ______________ and / or his / her family ordinarily resides in the ______________ District / Division of the State of Punjab.

This is also to certify that he / she does not belong to the persons / sections (creamy Layer) mentioned in the Column 3 of the Schedule to the Government of Punjab, Department of Welfare and SCs and BCs notification No. 1/41/93-RCI / dated 17.01.1994, as amended vide Notification No. 1/41/93 – RCI/1597 dated 17.08.2005, Notification No. 1/41/93-RCI/209 dated 24.02.2009 and notification No. 1/41/93-RCI/609 dated 24.10.2013.

Date of Issuance

Signature of Issuing Authority

Designation :

Date :

Place :

Note: The term “Ordinarily” used here will have same meaning as in Section 20 of Representative of People Act, 1950

<table>
<thead>
<tr>
<th>Authorities Empowered to issue Backward Class Certificate</th>
<th>Criteria for Admission under this category</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Deputy Commissioner</td>
<td>1. 5% seats reserved for persons belongs to this category.</td>
</tr>
<tr>
<td>(ii) Additional Deputy Commissioner</td>
<td>2. Candidate must belong to non-creamy layer as defined by the latest rules of Govt. of India.</td>
</tr>
<tr>
<td>(iii) Sub-Divisional Magistrate</td>
<td>3. *A BC certificate issued by a competent authority in any format and on any date shall be accepted by PU.</td>
</tr>
<tr>
<td>(iv) Executive Magistrate</td>
<td>4. Candidate whose certificate is older than one year from the date of issue must submit the self declaration as per Annexure III A.</td>
</tr>
<tr>
<td>(v) Tehsildar</td>
<td></td>
</tr>
<tr>
<td>(vi) Naib Tehsildar</td>
<td></td>
</tr>
<tr>
<td>(vii) Block Officer</td>
<td></td>
</tr>
<tr>
<td>(viii) District Revenue Officer</td>
<td></td>
</tr>
</tbody>
</table>
Self declaration Performa to be submitted by the person belonging to Backward Class category at the time of Recruitment/Admission

I ______________________________S/O,D/O _____________________________________________ Resident of ________________ Village/Tehsil/City ________________ District ________________ hereby declare that I ________________ belong to ________________ caste and this caste has been declared as backward class by State Government as per letter No.________________________ dated _____________.


Declarant

Place: __________
Date: __________

Verification:

I hereby declare that the above submitted information is correct as per my understanding and nothing has been concealed herein. I am well versed with the facts that I would be liable to face any punishment prescribed by law in case my above information is found to be false and the benefits granted to me (the applicant) will be withdrawn.

Declarant

Place: __________
Date: __________
MEDICAL EXAMINATION FORM
(The medical examination will be conducted by any Govt. Gazetted Officer/Medical Officer at BGJIH)

(Items Nos. from 1 to 8 below to be filled in by the candidate)

1. Name of the candidate___________________
2. Father’s Name __________________________
3. Mother’s Name _________________________
4. Date of Birth ___________________________
5. Department (in which admission is being sought) _____________________
6. University Receipt for Medical Examination Fee
   No._________________________ Date______________________ Rs. _________
7. Roll No. (allotted by the Department): ____________________________
8. History of any previous or existing illness: Yes/No (If yes, mention details)
   I. Like Epilepsy(Seizures), Hypertension, Bronchitis, Bronchial Asthma, Tuberculosis, Rheumatic Heart Disease, Diabetes etc.: Yes/No
   II. History of any operation/Surgery : Yes/No
   III. History of any regular medication : Yes/No
   IV. History of any kind of allergy : Yes/No

______________________ ____________________________
(Signature of the candidate to be attested by the Chairman)
(Signature of the candidate in the presence of examining Doctor)

________________________________
(Signature of the Chairman with seal of the Department)

Medical Examination
General Physical Examination

(a) Pulse_________________/min.   Blood Pressure____________mmHg (sitting)
(b) Vision (without glasses)     Right_____ Left _____ Colour Vision_____
(c) Vision (with glasses)       Right_____ Left _____
A. Systemic Examination of CNS/Chest/CVS/Abdomen/Limbs
B. Recommendation of the examining physician, if any

(Signature of the Medical Officer with seal and date)
FORM OF CERTIFICATE RECOMMENDED FOR LEAVE OR EXTENSION OR COMMUNICATION OF LEAVE AND FOR FITNESS

Signature of patient
Or thumb impression ____________________________________________________________

To be filled in by the applicant in the presence of the Government Medical Attendant or Medical Practitioner. (with qualifications-MBBS or above)

Identification marks:-

a. __________________________
b. __________________________

I, Dr. __________________________ after careful examination of the case certify hereby that ______________________ whose signature is given above is suffering from_____________ and I consider that a period of absence from duty of __________________________________ with effect from ____________________ is absolutely necessary for the restoration of his health.

I, Dr. __________________________ after careful examination of the case certify hereby that ______________________ on restoration of health is now fit of join service.

Signature of Medical attendant
Registration No._____________
(MBBS or above with Mobile #)

Note: - The nature and probable duration of the illness should also be specified. This certificate must be accompanied by a brief resume of the case giving the nature of the illness, its symptoms, causes and duration.
FORMAT FOR MEDICAL RECORD

Name of the patient:
Age:
Sex:
Address:
Occupation:
Date of 1st visit:
Clinical note (summary) of the case:
Prov. : Diagnosis :
Investigations advised with reports:
Diagnosis after Investigation:
Advice:

Follow up
Date:
Observations:
Signature in full _________________________________

Name of Treating Physician
(MBBS or above with Mobile #)
Important Note: Under this category of Physically Challenged, persons only with Permanent Physical Disability (PPD) will be considered. Candidates with temporary physical disability will not be eligible for applying under this category.

COPY OF CERTIFICATE OF PERSON WITH DISABILITY (PwD) CATEGORY FOR ADMISSION

Form-I

APPLICATION FOR OBTAINING DISABILITY CERTIFICATE BY PERSONS WITH DISABILITIES

1. Name: (Surname)__________________ (First name)___________________ (Middle name) ______________________________
2. Father's name:________________________ Mother's name:___________________
3. Date of Birth: (date) __________/ (month) __________ / (year) ________________
4. Age at the time of application: _______ years
5. Sex: _______ Male/Female/Transgender
6. Address:
   (a) Permanent address
   ________________________________________________________________
   ________________________________________________________________
   (b) Current Address (i.e. for communication)
   ________________________________________________________________
   ________________________________________________________________
   (c) Period since when residing at current address
   ________________________________________________________________
   ________________________________________________________________
7. Educational Status (Pl. tick as applicable)
   I.  Post Graduate
   II. Graduate
   III. Diploma
   IV. Higher Secondary
   V.  High School
   VI. Middle
   VII. Primary
   VIII. Non-literate
8. Occupation _______________________________________________________
9. Identification marks (i)____________________ (ii)_____________________
10. Nature of disability:
11. Period since when disabled: From Birth/Since year __________________
12. (i) Did you ever apply for issue of a disability certificate in the past______YES/NO
    (ii) If yes, details:
a. Authority to whom and district in which applied

________________________________________________________________________

b. Result of application

13. Have you ever been issued a disability certificate in the past? If yes, please enclose a true copy.

Declaration: I hereby declare that all particulars stated above are true to the best of my knowledge and belief, and no material information has been concealed or misstated. I further, state that if any inaccuracy is detected in the application, I shall be liable to forfeiture of any benefits derived and other action as per law.

_______________________________________________

(Signature or left thumb impression of person with disability, or of his/her legal guardian in case of persons with mental retardation, autism, cerebral palsy and multiple disabilities)

Date: 
Place:

Encl:
1. Proof of residence (Please tick as applicable)
   a. ration card,
   b. voter identity card,
   c. driving license,
   d. bank passbook,
   e. PAN card,
   f. passport,
   g. telephone, electricity, water and any other utility bill indicating the address of the applicant,
   h. a certificate of residence issued by a Panchayat, municipality, cantonment board, any gazette officer, or the concerned Patwari or Head Master of a Govt. school,
   i. in case of an inmate of a residential institution for persons with disabilities, destitute, mentally ill, etc., a certificate of residence from the head of such institution.

2. Two recent passport size photographs

(For office use only)

Date: 
Place:  
Signature of issuing authority

Stamp
Form-II

DISABILITY CERTIFICATE

NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE

Certificate No. Date:

This is to certify that I have carefully examined Shri/Smt./Kum.__________________________ son/wife/daughter of Shri __________________________ Date of Birth (DD/ MM/ YY) _____ Age _____ years, male/female ________________.

Registration No.__________________________ permanent resident of House No.______________ Ward/Village/Street ________________ Post Office_________________, District______________________, State______________, whose photograph is affixed above, and am satisfied that:

(A) He/she is a case of:
   • locomotor disability
   (Please tick as applicable)

(B) the diagnosis in his/her case is ________________

(C) he/she has _____ % (in figure) ___________ percent (in words) permanent locomotor disability / dwarfism / blindness in relation to his/her___________ (part of body) as per guidelines (________________________ number and date of issue of the guidelines to be specified).

2. The applicant has submitted the following document as proof of residence:

<table>
<thead>
<tr>
<th>Nature of Document</th>
<th>Date of Issue</th>
<th>Details of authority issuing certificate</th>
</tr>
</thead>
</table>

Signature/Thumb impression of the person in whose favour disability certificate is issued.  
Signature and Seal of Authorised Signatory of Notified Medical Authority)
Form III
(intimation of rejection of Application for Certificate of Disability)

No. __________________________  Dated __________

To
(Name and address of applicant
For Certificate of Disability)

Sub:  Rejection of Application for Certificate of Disability

Sir/Madam

Please refer to your application dated ______ for issue of a Certificate of Disability for the following

disability: __________________________________________________________

2. Pursuant to the above application, you have been examined by the undersigned / Medical Authority on
   ______, and I regret to inform that, for the reasons mentioned below, it is not possible to issue a Certificate of
   Disability in your favour:
   (i)
   (ii)
   (iii)

3. in case you are aggrieved by the rejection of your application, you may represent to ________,
   requesting for review of this decision.

Yours faithfully,

(Authorized Signatory of the notified Medical Authority)
(Name and Seal)