PANDIT RAGHUNATH MURMU MEDICAL COLLEGE & HOSPITAL, BARIPADA RANGAMATIA, BARIPADA – 757107, DISTRICT-MAYURBHANJ, ODISHA

ADMISSION BROCHURE FOR MBBS ADMISSION 2024-2025



FOR OFFICE USE ONLY

ADMISSION REGISTER SI. No & PAGE No...... &

PANDIT RAGHUNATH MURMU MEDICAL COLLEGE & HOSPITAL, BARIPADA RANGAMATIA, BARIPADA – 757107, DISTRICT-MAYURBHANJ, ODISHA

GUDELINES FOR REPORTING OF MBBS ADMISSION FORB AIQ/SQ ON ARRIVAL TO **COLLEGE CAMPUS (BATCH 2024-25)**

In view of instruction received from higher authority For college reporting for MBBS Students (2024-25) the following points to be noted by each candidate.

- 1. Admission is open from 10:00 AM to 5:00 PM on all notified dates except Govt. holiday. Report to LT-1 at PRM Medical college campus, Rangamatia, Baripada in the 1st Floor of Main College Campus Building.
- 2. Do not allow accompanying person into the Admission hall without special permission.
- 3. Put Signature in the ATTENDANCE SHEET and collect check list.
- 4. Report back to ADMISSION HALL with original documents and two sets of self attested photocopy as per checklist for Completion of online admission at college campus.
- 5. After completion of admission process, receive all the relevant document and receipt for future reference.

KEY CONTACTS (for emergency)

Admission Nodal Officer-Prof. (Dr.) Upendra Kumar Das- Mob-9437163607 Admission Reporting Official- Mr Sanjib Kumar Basuri - Mob-7008755582 Office Telelines (College/Dean office) -Tel.- 06792-240401 College Email Idprmmchedu@gmail.com Websiteprmmch.nic.in

Institute Profile				
Name of College :	Pandit Raghunath Murmu Medical College & Hospital, Baripada			
State:	Odisha			
Address of College:	Rangamatia, baripada – 757107, district-Mayurbhanj, odisha			
State/Pin Code:	Odisha/ 757107			
Name of Affiliated University:	Maharaja Sriram Chandra Bhanja Deo University, Mayurbhanj, Odisha/ OUHS, Bhubaneswar, Odisha			
Session Start Date:	Will be notified latter in college website			
Class Start date	Will be notified latter in college website			
Annual Fee for AIQ Candidate:	Rs. 37950/- (Admission Fees) + 3,500/- (University Fees) (through QR Scan Which is available at Account Section)			
Amount to be paid at the time of admission:	Rs. 37950/- (Admission Fees) + 3,500/- (University Fees)			
Hostel facility:	BOYS & GIRLS seats available			
Annual Hostel dues : Fees to be deducted in case	Rs.14000/-[Mess /Record charges extra]			
of re-allocation in subsequent All India Quota Round :	10 % of admission fee			
Fees to be reimbursed in case candidate resigns during counseling period :	(Total Admission fee)-(10% of admission fee)			
Fees to be reimbursed in case candidate resigns after counseling period:	Rs.0			
Time period of reimbursement:	90 days			
The amount of fine to be given in case candidate resigns after the end of admission procedure: (May vary as per the admission brochure)	Rs. 1,00,000/- (Rupees 1 Lakh)			
Other information:	Admission will be conducted only on official working days as per calendar of Govt. of Odisha from 10 am till 5pm			

PANDIT RAGHUNATH MURMU MEDICAL COLLEGE & HOSPITAL, BARIPADA RANGAMATIA, BARIPADA – 757107, DISTRICT-MAYURBHANJ, ODISHA

Students Bio- Data

1.	Name of the Student :				
2.	Date of Birth :		[]		
3.	Blood group :		Recent passport Color		
4.	Father's Name :		Photograph		
5.	Mother's Name :		(only staple don't paste)		
6.	Caste (Sub-caste)/Tribe:				
7.	Occupation of Father:		iI		
8.	Occupation of Mother:				
9.	Annual Income of father as per record:				
10.	Permanent Address:				
	Vill/Town	P.O			
	P.S	Dist			
	State	Pin			
11.	Present Communication Address:				
	Vill/Town	P.O			
	P.S	Dist			
	State	Pin			
12.	2. Proof of identity submitted(Aadhar/ PAN/ Driving License/ Passport):				
13.	3. Telephone No. of Student:				
	MobileMail Id				
14.	Telephone No. of Father/ Guardian:				
	Land LineMobileMobile	Email Id			
15.	Qualifying last academic Examination Details:				
	ExaminationStateState				
	CollegeUnive	rsity			
16.	Bank Accounts details for fees refund:(if required)				
	Accounts Number	Bank			
	Branch	IFSC Code			
	Signature of Student	/Date:			

PANDIT RAGHUNATH MURMU MEDICAL COLLEGE & HOSPITAL, BARIPADA RANGAMATIA, BARIPADA – 757107, DISTRICT-MAYURBHANJ, ODISHA

DOCUMENT SUBMISSION SHEET (To be filled in by Candidate)

Sl.no.	Documents [Tick at appropriate box on the right column] One set original & one set self-signed photocopies	Yes	No
1	NEET Admit Card		
2	NEET Rank Letter		
3	Online generated Self-declaration Slip		
	[only for -JK natives]		
4	Provisional Allotment Letter		
5	Proof of identity (Aadhar / PAN/ Driving License/ Passport)-		
	Xerox		
6	Relieving Letter (if applicable)		
	(applicable for second round)		
7	HSC Certificate(DOB)		
8	+2 Pass Certificate		
9	+2 Mark Sheet		
10	Transfer Certificate/College Leaving Certificate		
11	Conduct Certificate		
12	Four passport size photographs same as on		
	Application form signed at the back		
13	Reservation Certificate[ST/SC/OBC/PWD/GC/ES/EWS]		
14	Medical Fitness certificate by Institute Medical		
	Board		
15	Undertaking against Ragging		
16	Undertaking towards 2nd round counseling, Deficient		
	documents, institute rules		
17	Payment Details		
18	For State Quota-Residency/Nativity/Employee/Odia		
	belonging to outlying odia speaking track		
19	UG State bond		
20	Migration		
21	Any other document[mention]		

Declaration:

- 1. I am submitting herewith the documents as listed above in Original along with photocopy of each for verification and institutional custody for admission in to MBBS course during the year 2024-2025 PRMMCH, Baripada.
- 2. I undertake that in case I am found to have submitted forged documents at the time of admission then my admission to the course stands cancelled and I shall be entitled to legal action as deemed proper.

••••	•••••	•••••		
Signa	ature	of	the	Candidate
NEET	Roll	Nun	nber	
	•••••			
Nar	ne			••••••••••••
Dat	te .			

I. WILLINGNESS TO WARDS UPGRADATION DURING COUNSELING

I do/do not express my willingness to participate in SECOND ROUND of NEET counseling for up gradation.

II.

I.	UN	IDERTAKING TOWARDS TIME BOUND SUBMISSION OF DEFICIENT DOCUMENTS
	wi adı	do hereby undertake to produce the following deficient documents th in a time limit ofdays failing which my conditional mission into the course will stand cancelled and I shall forfeit my aim for admission into the college.
	1	•
	2	
	3	
	4	
	5	
II	ī.	UNDERTAKING TOWARDS CONDUCT ANDDISCIPLINE
	I	do hereby undertake that:
	а.	I will attend all theory and practical classes in all subjects of MBBS
		course regularly.
	ь.	If I fail to attend the required number of classes as per MCI norm, (i.e.
		75% in both theory and practical), the Head of the Department will not be
		held responsible for shortage of attendance and consequent non eligibility
		to the sent up for university examination.
	с.	I will not put any undue pressure on the Head of the department or Dean & Principal, PRMMCH,Baripada for taking extra classes to make up for my
		attendance shortage due to reasons whatsoever.
	d.	I will appear in the internal assessment tests and University Examination
	٠.	as notified by the authorities and will never adopt pressure tactics to
		shift the examination.
	e.	I will abide by the prevalent rules and regulation of the college, hostel
		and hospital.

Full Signature of candidate/Date...../Date....../Date....../Date...../

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

[Name......Relationship]

UNDERTAKING AGAINSTRAGGING

I. UNDERTAKING BY THESTUDENT	
1. I,,S/o. D/o. of Mr./Mrs./Ms , have carefully read and fully understood the law prohibiting rag and the directions of the Supreme Court and the Central/State Government in this regard. 2. I have read/received a copy of the MCI Regulations on Curbing the	ging
Menace of Ragging in Higher Educational Institutions, 2009.	
3. I hereby undertake that-	
a. I will not indulge in any behavior or act that may come under	
the definition of ragging,	
b. I will not participate in or abet or propagate ragging in any formc. I will not hurt anyone physically or psychologically or	,
cause any other harm.	
4. I hereby agree that if found guilty of any aspect of ragging, I may be	
punished as per the provisions of the MCI Regulations mentioned above	
and/or as per the law in force.	
Signature/date/date	
II. UNDERTAKING BYPARENT/GUARDIAN	
1.I,	
F/o. M/o. G/o have carefully read and fully	
understood the law prohibiting ragging and the directions of the Hon'ble	
Supreme Court and the Central/State Government in this regard as well as	
the MCI Regulations on Curbing the Menace of Ragging in Higher	
Educational Institutions, 2009.	
2. I assure you that my son/ daughter/ ward will not indulge in	
any act of ragging.	
3. I hereby agree that if he/she is found guilty of any aspect of	
ragging, he/she may be punished as per the provisions of the MCI	
Regulations mentioned above and/or as per the law in force.	
Signature/Date/Date/	
(NOTE- Online apply through https://www.antiragging.in website)	

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PROFORMA FOR MEDICAL EXAMINATION

Name :	
Son/Daughter of	·
Mark of Identification:	
Age:Sex:	
Certified that we have examined the above cand M.B.B.S. study.	didate & found him/her FIT for undergoing
Signature of the Candidate	
Signature of Medical Officer (Medicine)	Signature of Medical Officer (Surgery/O & G)

Mob.	No.	
	_	

Affix Stamp Size Colour Photograph

CHECK SHEET

VERIFICATION OF ORIGINAL DOCUMENTS SUBMITTED BY THE CANDIDATE FOR ADMISSION INTO THE $1^{\rm ST}$ YEAR MBBS COURSES AT PRMMCH, BARIPADA

	Name of the candidate	Rank/Merit No
	Documents submitted by the candidate	Remarks of verifying officer
	(Original + 1 sets of Photo-copies)	,,
1.	Allotment Letter	:
2.	Admit Card of CBSE-NEET (UG)	:
3.	CBSE-NEET (UG) Examination Result (Mark) Card	:
	Marks/Percentile secured in Physics Chemistry Bi	ology Total
	Whether total marks is more than 360 or not (288 for SC/ST/I	PH) (Yes/No)
4.	Board Certificate of passing HSC or	
	equivalent examination in support of date of birth	:-
5.	Certificate of Council/University of Passing	
	+2 Sc. or equivalent qualifying examination.	:-
6.	Mark Sheet of +2 Sc. or equivalent examination	:-
•	Whether the candidate is having Practical examination in Phy	·
	% of Marks in PCB % of Marks in English	
_		
7.	College leaving Certificate/Transfer Certificate from	
8.	the Principal of College last studied. Conduct Certificate from the Principal of College last studied	.÷ .÷
9.	Residence/Nativity/Employee certificate/	·
J.	Odiya belonging to outlaying Odiya speaking	:-
10.	SC/ST/OBC/PH/GC/Ex-serviceman or Serviceman	·
10.	Certificate from the competent authority.	÷
11.	Anti-ragging Undertakings downloaded from web.	:-
12.	Two Colour, Passport size Photographs.	:-
13.	Identity proof (voter ID card/Aadhar Card/etc)	:-
14.	Whether found medically fit	:-
15.	UG Bond	:-
16.	Migration	:-
17.	Whether Eligible for Admission	:-
	Orders of Principal Si	gnature of Verifying Officer
	Dean & Principal,	
PRM	Medical College, Baripada	
	e enclose Bank Deposition reference id for Rsin A/C N	

PANDIT RAGHUNATH MURMU MEDICAL COLLEGE & HOSPITAL, BARIPADA RANGAMATIA, BARIPADA - 757107, DISTRICT-MAYURBHANJ, ODISHA

Student Data for Website

Date of Admission:-	/	/
Dute of Authoriti	 	

Sl.No.	Data details			To be 1	filled by the stud	lent	
1	Name	Name of the Student (in block letters):-					
2	Father	Name :-					
3	Date o	f Birth: -			/_		
4	Sex:-				Male /Fema	ile	
5	Religio other)	n (Hindu/Muslim/Christian/Si :-	kh/any				
6	Mothe	er Tongue:-					
7	Sub –C	Category :-			ST / SC / OB	C /UR/EWS	
8	Wheth	ner Physically Handicapped : -			Yes /No		
9	NEET F	Rank: -					
10	NEET F	Roll No.:-					
11	Name	of the last college attended					
12	Name of the School/College where in educated in higher secondary Education			d in			
			Marks obta	ined			
	Exam	details		Maxir	mum Marks	Marks Secured	Percentage
NEET Entrance							
Name of the School/College & Name of the Board			Maxir	mum Marks	Marks Secured	Percentage	
+2 Science			РСВ				
			English				
10	th		ALL Subject				

Full Signature of the Student

PANDIT RAGHUNATH MURMU MEDICAL COLLEGE & HOSPITAL, BARIPADA RANGAMATIA, BARIPADA - 757107, DISTRICT-MAYURBHANJ, ODISHA

FORMAT FOR I-CARD			
NAME			
FATHER'S NAME			
DESIGANTION			
DATE OF BIRTH			
BLOOD GROUP			
ADDRESS	AT		
	PO		
	DIST		
	STATE		
	MOB NO		
	ALT MOB NO		
	EMAIL		

N.B: FILL IN BLOCK LETTER

PHOTO

Full Signature

OFFICE OF THE DEAN & PRINCIPAL PRM MEDICAL COLLEGE & HOSPITAL, BARIPADA **DOCUMENT RETENTION CERTIFICATE** [Office copy]

This is to certify that Sri/Kumari -----, son/daughter of Sri ----- is admitted into 1st year M.B.B.S., Course at this College on Date ----- against All India/State Quota 2024-25. During the ----- round of counseling. The following original documents of his/her **retained** here.

- 1. Admit Card of CBSE-NEET (UG)
- 2. Matric (H.S.C.) Certificate
- 3. +2 Sc. Certificate
- +2 Sc. Mark Sheet 4.
- 5. C.L.C./Transfer Certificate
- **Conduct Certificate** 6.
- 7. **Residence Certificate**
- Category Certificate (GC/SC/ST/OBC/PH/ES/EWS) 8.
- 9. Migration
- 10. **UG Bond**

Signature of Junior Assistant, Admission Section, PRMMCH, Baripada

Signature of Verifying Office, PRM MCH, Baripada

Signature of Dean & Principal/ Nodal Officer PRM MCH, Baripada

OFFICE OF THE DEAN & PRINCIPAL PRM MEDICAL COLLEGE & HOSPITAL, BARIPADA DOCUMENT RETENTION CERTIFICATE[Student's copy]

	This	is	to	certify	that	Sri/Kumari		,
son/daughter	of Sri						is admitted into 1 st year	M.B.B.S., Course
at this College	on Da	te			a _i	gainst All Indi	a/State Quota 2024-2025.	During the
round of counseling. The following original documents of his/her retained here.								

- 1. Admit Card of CBSE-NEET (UG)
- 2. Matric (H.S.C.) Certificate
- 3. +2 Sc. Certificate
- 4. +2 Sc. Mark Sheet
- 5. C.L.C./Transfer Certificate
- 6. Conduct Certificate
- 7. Residence Certificate
- 8. Category Certificate (GC/SC/ST/OBC/PH/ES/EWS)
- 9. Migration
- 10. UG Bond

Signature of Junior Assistant, Admission Section, PRMMCH, Baripada

Signature of Verifying Office, PRM MCH, Baripada

Signature of Dean & Principal/ Nodal Officer PRM MCH, Baripada