

Important Note:-

* The Condition for availing Scholarship/Freeship is that student should be a domicile of Maharashtra State only and he/she has to produce the Caste Certificate & Caste Validity Certificate issued by the Government of Maharashtra. The EWS students must have to fill in the form of Rajarshi Chatrapati Shahu Maharaj Scholarship, otherwise they have to pay the full fees.

* **HOSTEL FACILITIES FOR BOYS AND GIRLS**

Hostel Facility Is Not Available For the Students of BPTH and BOTH Courses.

* **AS PER THE MAHARASHTRA CET CELL INFORMATION BROCHURE RULE NO. 16.3**

Any candidate who resigns a seat after cutoff date from Government / Government Aided / Private unaided College (Allied Health Sciences courses) will have to pay Rs. 2,00,000/- (Rs. Two lakhs only) as penalty which will include 1st year tuition fees. If the candidate has paid the tuition fees to the institute, he/she will have to pay the difference amount only. If the candidate has not paid the tuition fees, he/she will have to pay Rs. 2,00,000/- (Rs. Two lakhs only).

* **Only one parent is allowed to come in the College Office along with the STUDENT, at the time of admission.**

* Student should keep Attested three Xerox copy, one scanned copies of all original document according to the check list sequence with them & one passport size photograph jpg. Image in pen drive (file size should be 50kb to 150kb in PDF format). Each document should be labelled Separately like Nationality certificate, Xth passing certificate, mark sheets, caste certificate etc.

Sd/-
Dean
Seth G.S. Medical College
Parel, Mumbai- 400012

APPLICATION FOR SUBMISSION OF ORIGINAL CERTIFICATES TO THE COLLEGE

To,
The Dean
Seth G.S Medical Colleges
Sir,

Date: _____

1) Shri/Smt. _____ State Merit List no. _____
Category _____ have been Provisionally selected through **NEET 2025**(B.O.TH/B.P.Th)
I am submitting my original documents with three attested xerox copies to office, as under (Tick/Cross).

Sr No	Original Documents With One Set of Attested Xerox Copies	Student Use	Office Use
	A GROUP		
1	Selection Letter /Allotment Letter		
2	Nationality, Domicile & Citizen Certificate or Valid Passport or Birth Certificates		
3	S.S.C Statement of marks & passing certificate (10 th STD)		
4	H.S.C Statement of marks		
5	NEET Exam Statement of marks (2025)		
6	NEET Admit card		
7	Copy of Online Application Form (latest) filled on w.w.w. mahacet.org		
8	Eligibility Certificate for EWS category issued by Competent Authority as per State Government Format ANNEXURE 'A'		
9	Caste Certificate		
10	Caste Validity Certificate		
11	Non Creamy Layer Certificate(VJ, NT1, NT2, NT3,OBC, SBC, SEBC)		
12	College Living Certificate/Transference Certificate. (LC/TC)		
13	Person With Disability(PWD) Certificate (If applicable) Disability cft. Of Authorised medical Board as per National Testing Agency/MCC -		
14	Defence Certificate (D1 & D2, - Parent's Maharashtra Domicile required)		
15	Hilly certificate (Parent's Domicile in hilly area required &SSC/HSC School should be situated in Hilly Area)		
16	Undertaking. (If applicable)		
17	Migration Certificate issued by respective University (If applicable)		
18	Self Educational Gap Certificate (Affidavit from students)		
19	Medical Physical fitness Certificate(As per format given in STATE CET CELL brochure)		
20	Attested Xerox Copy of Adhar Card for Address Proof		
21	Voter Id / Annexure - F		
22	Three Xerox copies of Demand Draft (to be mentioned name & mob.no. on the back side of DD)		

D.D. No : 1) _____ Date _____ Rs-
2) _____ Date _____ Rs-
3) _____ Date _____ Rs-

Bank Name & Branch : _____
Mobile No: _____

Student's Signature

I have not submitted following documents:-

1)		3)	
2)		4)	

ACKNOWLEDGEMENT

Received the above mentioned original certificates.

Dean
Seth G.S Medical College & KEMH

Note:-

1. Each documents & D.D. should be Named and scan separately as per check list.
2. Student should keep Attested three Xerox copy, one scanned copies of all original document according to the check list sequence with them & one passport size photograph jpg. Image in pen drive (file size should be 50kb to 150kb in PDF format). Each document should be labelled Separately like Nationality certificate, Xth passing certificate, mark sheets, caste certificate etc.
3. Demand Draft of fees to be paid at the counter of Cash Section of Seth G. S. Medical College.
4. Student will receive their Original Fee Receipt after Enrollment the Admission Form by the Cash Section.

N. B.: 1) Rs.590/-to be paid in cash separately to get the COLLEGE ADMISSION FORM at the counter of Cash Section of Seth G. S. Medical College.

2) HOSTEL FACILITY IS NOT AVAILABLE FOR THE STUDENTS OF BPTH & BOTH COURSE

SETH G. S. MEDICAL COLLEGE, PAREL, MUMBAI – 12

ADMISSION FOR BPTH /BOTH

H.C. (Cash section)

Shri/ Smt. _____ **SML No.:** _____

Category _____ **Mobile No.:** _____

D.D. No.: 1) _____ **RS.:** _____ **BANK NAME** _____

2) _____ **Rs:** _____ **BANK NAME** _____

3) _____ **Rs :** _____ **BANK NAME** _____

BRANCH _____

Kindly accept the above said D.D.

HC (GTR)

N.B.: Student should attach three xerox copies of the Demand Draft.

SETH G. S. MEDICAL COLLEGE, PAREL, MUMBAI – 12

ADMISSION FOR BPTH / BOTH

H.C. (Cash section)

Shri/ Smt. _____ **SML No.:** _____

Category _____ **Mobile No.:** _____

D.D. No.: 1) _____ **RS.:** _____ **BANK NAME** _____

2) _____ **Rs:** _____ **BANK NAME** _____

3) _____ **Rs :** _____ **BANK NAME** _____

BRANCH _____

Kindly accept the above said D.D.

HC (GTR)

N.B.: Student should attach three xerox copies of the Demand Draft.

Passport size current
photo with white
background

STUDENT'S PROFIL

(KINDLY FILL THE FORM IN THE CAPITAL LETTERS ONLY)

AIR NO. _____ SEX; M / F _____ DATE OF ADMISSION _____

NEET ROLL NO. _____ SML NO _____

NAME OF THE STUDENT (in English) _____

(AS PER HSC MARKSHEET)

NAME OF THE STUDENT (in Marathi) _____

MOTHER NAME : _____

LOCAL ADDRESS _____

_____ PIN: _____

PERMANENT ADDRESS _____

_____ PIN: _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

DOMICILE STATE _____ NATIONALTY _____

MOBILE NOS:- SELF _____ & FATHER/MOTHER _____

LAND LINE NO _____ AADHAR CARD NO. _____

BLOOD GROUP _____ MOTHER TOUNGE _____

S.S.C. PASSING MARKS/OUT OF _____ PERCENTAGE _____ BOARD NAME _____

SCHOOL NAME _____ MONTH & YEAR OF PASSING _____

H.S. C. PASSING MARKS/OUT OF _____ PERCENTAGE _____ BOARD NAME _____

COLLEGE NAME _____ MONTH & YEAR OF PASSING _____

MARKS : PHYSICS : _____ CHEM: _____ BIO: _____ ENG: _____

PCB TOTAL: _____ PCBE TOTAL : _____ PCB PERCENTAGE _____ HSC SEAT NO _____

NEET MARKS/OUT OF _____ NEET PERCENTAGE _____ NEET PERCENTILE _____

ADMITTED CATEGORY/QUOTA _____ STUDENT'S CATEGORY _____

SUB CASTE _____ (ALSO FOR OPEN CANDIDATES), **SPL**

RESERVATION _____

EMAIL ID OF THE STUDENT: _____

x

Parent's Signature

Name: _____

x

Student's Signature

कुमार/कुमारी _____
 पत्ता: _____

 दि.: _____

प्रति,
 अधिष्ठाता,
 सेठ गो. सुं. वै म.
 व रा. ए. स्मा. रु.

विषय: जातप्रमाणपत्र / जातवैधता प्रमाणपत्र / E.W.S. / डॉंगरि, प्रमाणपत्र सत्यते बाबत.

माननीय महोदय / महोदया,

मी कुमार / कुमारी _____ वय _____ वर्ष, राहणार _____ प्रतिज्ञापूर्वक असे नमूद करतो / करते की, माझे महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिकयांच्याशी संलग्नित असलेल्या सेठ गो. सुं. वैद्यकिय महाविद्यालय, परेल, मुंबई या ठिकाणी रा.सा.प्र.प.कक्ष, महाराष्ट्राज्य (CET) अन्वये, AIR क्र. _____, State CET Form No.. _____, B.O.Th/B.P.Th/M.O.Th/M.P.T/PG D.M.L.T या अभ्यासक्रमा करिता शैक्षणिक वर्ष 2025-26 पासून प्रवेश _____ जात प्रवर्गा अंतर्गत प्रवेश प्राप्त झालेला आहे. या प्रवेश प्रक्रिये दरम्यान मी माझे जातीचे प्रमाणपत्रक्र./E.W.S./ डॉंगरि पत्रक्र. _____ व जात पडताळणी प्रमाण पत्रक्र. _____ ते सत्य आहे. हे मी प्रतिज्ञा पूर्वकमान्य करते. सदर प्रमाणपत्र पडताळणी अंतर्गत चुकीचे किंवा खोटे, असत्य किंवा बनावट असल्याचे सिद्ध झाल्यास, मी महाराष्ट्रशासन / प्रशासकीय नियमा नुसार कायदेशिररित्या होणा-या कारवाईस पात्र ठरेन, याची मी ब्राही देते/देतो. तसेच, सदर प्रवेशप्रक्रिया, प्रवेशाची नोंदणी व पात्रता रद्द ठरू शकते, या बाबत सुद्धा मी ज्ञात आहे.

आपला / आपलीविधासू

स्वाक्षरी

माझ्या सक्षम माझ्या पात्याने कुमार / कुमारी: _____ प्रतिज्ञा पूर्वक स्वाक्षरी केली. आधारकार्ड नं.: _____ मोबाईल नं.: _____
 पालकांचे स्वाक्षरी,नाव, व नाते: _____
 आधारकार्ड नं.: _____
 मोबाईल नं.: _____

UNDERTAKING

I, _____, son/daughter of
Shri _____, aged ____ years, bearing CET Form
No. _____, and holding Neet UG exam AIR No. _____, have been allotted a
seat for admission to the BPTH / BOTH course at Seth G. S. Medical College through the
Undergraduate Admission for the Academic Year _____.

I do hereby solemnly affirm and undertake that I will complete the BPTH / BOTH course
of 4 years & 6th Month Internship duration. In the event that I fail to complete the course for any
reason, I agree to pay As Per The Maharashtra Cet Cell Information Brochure Rule No. 16.3 for
the lapse of a seat.

SML. No. / Rank No. : _____

Permanent Address : _____

Mobile No. : _____

Residential No. : _____

E-Mail Id. : _____

Signature of the Candidate:- _____

SETH G.S.MEDICAL COLLEGE, PAREL, MUMBAI-12

BPTH & BOTH Fees Structure ACADEMIC YEAR 2025-26	OPEN Category Male/Female Candidates (a)	SC / ST Male, Female Candidate (b)	RESERVE CATEGORY FOR OBC, VJ, NT, NT1, NT2, NT3., SBC Male, Female Candidate (c)	SEBC, EWS, EBC Female Candidate (d)	SEBC, EWS, EBC Male Candidate (e)
A) Fees As per Maharashtra Government Resolution & Circular					
Admission fee (At time of Admission)	1500/-	1500/-	1500/-	1500/-	1500/-
Tuition fees (per year)	57400/-	-	-	-	28700/-
Development (per year)	3000/-	3000/-	3000/-	3000/-	3000/-
Library Fees (per year)	1000/-	1000/-	1000/-	1000/-	1000/-
Gymkhana Fee (per year)	500/-	500/-	500/-	500/-	500/-
Locker (per year)	60/-	60/-	60/-	60/-	60/-
Total (A)	63460/-	6060/-	6060/-	6060/-	34760/-
B) Mandatory Deposits as per Bruhanmumbai Municipal Resolution /Circular					
College Deposit(Security Deposit) At the time of admission – Refundable after completion of course	1250/-	1250/-	1250/-	1250/-	1250/-
Library Deposit (One Time)	1250/-	1250/-	1250/-	1250/-	1250/-
Total (B)	2500/-	2500/-	2500/-	2500/-	2500/-
C) Fees as per Maharashtra University of Health Science Nashik					
Eligibility & Enrollment fees	3200/-	3200/-	3200/-	3200/-	3200/-
Student Welfare Fund	424/-	424/-	424/-	424/-	424/-
University Development Fund	100/-	100/-	100/-	100/-	100/-
Rashtriya Seva Yojnana (Self Finance Unit) (per year 10/- X 4 = 40/-)	40/-	40/-	40/-	40/-	40/-
Disaster Management Fund (per year 10/- X 4 = 40/-)	40/-	40/-	40/-	40/-	40/-
Total (C)	3804/-	3804/-	3804/-	3804/-	3804/-

- Reserved Category Students enlisted in Colum No.(b), (c), (d) & (e) above have to Apply at MAHADBT for scholarship / freeship (Those student who will not apply to scholarship / freeship will have to pay Tuition fees as per open category).
- DD/Pay Order - 1 (In the favour of "BMC" payable at Mumbai /as per current procedure of the college).**
 - * Tuition fees & College Fees (A) Rs. 63,460/- for all male & female Open Category
 - * Tuition fees & College Fees (A) Rs. 6060/- for SC, ST, OBC, VJ, NT, NT1, NT2, NT3, SBC (Male & Female candidates) & EBC, SEBC, EWS (Female candidates)
 - * Tuition fees & College Fees (A) Rs. 34760/- for EBC, SEBC, EWS (Male candidates)
- DD/Pay Order - 2 (In the favour of "BMC" payable at Mumbai /as per current procedure of the college).**
 - * Fees for Deposit (B) Amount of Rs. 2500/- for open & all reserved category.
- DD/Pay Order - 3 (In the favour of "Dean, Seth G. S. Medical College" payable at Mumbai /as per current procedure of the college).**
 - * Fees for MUHS Eligibility, Enrollment, pro-rate & Other (C) Amount of Rs. 3804/- for open & all reserved category.



Sul
15/9/25
Dean

Seth G.S. Medical College
Parel, Mumbai- 400012.

DEAN

Seth G.S.M.C. & K.E.M.H.

Annexure - F

पदवी, पदव्युत्तर पदवी प्रथम वर्ष अभ्यासक्रमास प्रवेश घेणाऱ्या सर्व मुला/मुलींकडून प्रवेशाच्या वेळीच मतदार यादीमध्ये नाव नोंदणी करण्याच्या अनुषंगाने घ्यावयाचे प्रमाणपत्र / हमीपत्र नमुना

मी, अभ्यासक्रम :

महाविद्यालयाचे नाव:

..... या महाविद्यालयात प्रथम वर्षात प्रवेश घेतला असून मी दिनांक ०१/०१/....

रोजी १८ वर्षाचा /वर्षाची झालो / झाले आहे किंवा होणार आहे. १८ वर्ष पूर्ण झाल्याबरोबर मी माझे नाव मतदार यादीत नोंदवून घेणार आहे अशी मी प्रतिज्ञा करतो/करते. यासाठी सोबत जोडलेला नमुना ६, ७ ८ व ८अ व्यवस्थितपणे भरलेला आहे.

स्वाक्षरी

नाव :