



UNIVERSITY ROAD, DERALAKATTE, MANGALORE 575 018 Phone: 0824-2204668 Fax: 0824-2204667

Email: pqconfirm@yenepoya.edu.in

ADMISSION TO SUPER SPECIALITY COURSE (2024-25)

Yenepoya (Deemed to be University) u/s 3 (A) of the UGC Act, 1956, offers Super Speciality (MEDICAL) programs at its constituent colleges, Yenepoya Medical College, Mangaluru.

As per the orders of the Ministry of Health & Family Welfare, Government of India, the counselling for Super Speciality (MEDICAL) seats in Deemed to be Universities shall be conducted by the Directorate General of Health Services (DGHS). Accordingly the Ministry has constituted a Medical Counselling Committee (MCC) for conducting centralized online counseling and allotment of seats.

Eligible candidates with NEET SS 2024 ranking, seeking admission to Super Speciality (MEDICAL) courses during 2024-25 under Management is required to register the application on www.mcc.nic.in only and follow the admission procedure mentioned therein.

I. DOCUMENTS TO BE PRODUCED AT THE TIME OF REPORTING (ORIGINALS)

Sl.No	DOCUMENTS		
1.	MARKS CARD OF THE QUALIFYING EXAMINATION		
2.	DEGREE/PROVISIONAL PASS CERTIFICATE (MD/MS/DNB)		
3.	COUNCIL REGISTRATION CERTIFICATE		
4.	MIGRATION CERTIFCATE		
5.	TRANSFER/ CONDUCT CERTIFICATE		
6.	PROOF OF DATE OF BIRTH (S.S.L.C. MARKS CARD)		
7.	MCC ALLOTTMENT LETTER / NEET SCORE CARD / ADMIT CARD ISSUED BY NTA		
8.	CASTE & INCOME CERTIFICATE & DOMICILE CERTIFICATE		
9.	ELIGIBILITY CERTIFICATE (from Yenepoya Deemed to be University)		
10.	COLOUR PHOTOS (PASSPORT + STAMP SIZE) - 8 NOS.		
11.	MEDICAL FITNESS CERTIFICATE		
12.	COPY OF PAN CARD & AADHAR CARD		
13.	TWO SETS OF COPIES OF ALL THE ABOVE CERTIFICATES		
14.	AFFIDAVIT UNDERTAKING (Rs.200/- stamp paper)		
(Two sets of copies of Sl.No.1 to 06 to be produced with the originals)			

UNDERTAKING: In the event of discontinuation of the course, the student's consent to pay the balance course fee needs to be submitted. (Format attached)

I. FEE STRUCTURE:

YENEPOYA MEDICAL COLLEGE						
Fee structure for Super Speciality D.M/M.Ch - 2024-25						
	I Year	II Year	III Year	TOTAL FEE		
SPECIALITY						
MCh Urology	4200000	4200000	4200000	12600000		
MCh Surgical Oncology	3500000	3500000	3500000	10500000		
D.M Onco Pathology	1800000	1800000	1800000	5400000		

Note:

- 1) Food, Laundry and accommodation (sharing) is provided with the above fee.
- 2) The candidate shall pay the remaining period course fee to the college in the event he/she discontinuing the course before its completion.

MODE OF PAYMENT:

The candidates are advised to make necessary payments through Net Banking or RTGS. The amount can be transferred to the following bank (in advance) accounts and proof of remittance produced along with the documents.

Account Name: YENEPOYA DEEMED TO BE UNIVERSITY

Account Number: YMC624P<All India Rank>

IFSC Code: HDFC0004012

Branch: DERALKATTE MANGALORE - MANGALORE, KARNATAKA

Please note that the account number is a virtual account number that is generated by joining your **All India Rank** to the prefix YMC624P. For example, if your **All India Rank** is 1234567, then your account number will be YMC624P1234567

Contact Details:

For further clarification -

- Document verifications contact #8494935203
- For payment clarification contact #9945449246
- E-mail ID: pgconfirm@yenepoya.edu.in

(To be submitted on a Stamp paper of Rs.200/- duly signed by Notary)

UNDERTAKING

I, Dr(Name S/D/o(permanent/present	(Name of the Parents	s) resident of
I have been selected to the Super Speciality College, Mangaluru, constituent college of Yen Act 1956 through the Common Counselling con Government of India, New Delhi through NEET-S	nepoya (Deemed to be aducted by the Director	e University) under Section 3 of the UGC rate General of Health Services (DGHS),
I say that on my own will and along with my p D.M/M.Ch at Yenepoya Medica dated		
I say in consideration of admission to Super Specourse and accordingly undertake to pay all the table I Installment (at the time of admission) Rs.	•	
I further agree to pay the fee as per schedule ab	oove failing which I will	not be allowed to attend my course.
In the event of my discontinuation of Course undertake to pay balance tuition and other fees Mangaluru i.e. Rs with	for the remaining yea	
I understand that the course is of three years. \square Rs.55,000/- during 1 st Year, Rs.60,000/- during 2	-	- , , - ,
I agree to the above stipend to be received of amount. If additional amount is to be paid the sa	_	•
What is stated above is true and correct. I accordingly. This, the day of	along with my paront	t/guardian do hereby undertake to act

Signature of the Candidate

Signature of the Parent/Guardian