कर्मचारी राज्य बीमा निगम
Employee State Insurance Corporation
(श्रमएवंरोजगारमंत्रालय, भारतसरकार)
(Ministry of Labour & Employment, Govt of India)

सत्यमेव जयते

क.रा.बी.नि. चिकित्सा महाविद्यालय एवं अस्पताल, बसईदारापुर
ESIC Medical College & Hospital, Basaidarapur
रिंग रोड/Ring Road, दिल्ली/Delhi-110015
फोन/Phone – 011-25100664,
deanpgi-basai.dl@esic.nic.in

GENERAL INSRUCTIONS FOR POST-GRADUATE ADMISSION 2025

1. Students must report to the Dean's Office, Room No. 511, 5th Floor, A-Block, for PG admission as per the schedule announced by MCC. Failure to report on or before the last date will result in the cancellation of admission.One parent/guardian must accompany the student at the time of admission or, seat surrender.
2. The admission process may take one or more days to complete. Outstation candidates are advised to make their own accommodation arrangements.
3. The admission will be provisional, subject to confirmation by MCC and GGSIPU.
4. Original documents will be forwarded to GGSIPU for registration. Students are advised to keep three photocopies of all their original documents for future reference.
5. Candidates must submit all requisite documents (as per the checklist provided) in original, along with a self-attested copy of each.
6. Candidates must bring two plastic folders to submit their original documents.
7. Candidates are instructed to submit soft copies all the documents in a pendrive.
8. The seat surrender procedure will be carried out as per MCC rules and guidelines
9. Each candidate must submit the Service Bond on a Rs. 100/- stamp paper duly notarized in Delhi.
10. Report Timing:
    - **9:00AM- 1:00PM**
    - **2:00PM- 5:00PM**
11. Fee Details:
    - **Tution Fee: Rs. 2,50,000/- (annually)**
    - **University Fee: Rs. 28,500/- (annually) + Rs. 2000/- (Alumni contribution fund- one time)**
    - **Security Amount : Rs. 5000/- (refundable)**

    ***Payment shall be made through Demand Drafts only.

    ***Demand Draft must be made in favour of '**ESI SAVINGS FUND ACCOUNT NO. 2**'

***__Important for Bond:__**

- Witness and Surety can not be parents/siblings of the candidate.
- Bounden/Witness require documents:-Address Proof (self attested)
- Surety require documents;- Address Proof, PAN Card & Income Tax Returns (ITR/form 16) {self attested}

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Name of PG Student : _____ **Contact No.** : _____

Rank : _____ **Date of Birth** : _____

Course applied for : _____ **Email ID** : _____

Dated : _____

Following documents in original needs to be submitted by each candidate at the time of reporting:

- Admit Card
- Allotment Letter
- Score/Rank Card
- 10th class Marksheet/Certificate for proof of date of birth
- 12th class Marksheet/Certificate
- MBBS Degree/Provisional
- MBBS Marksheet (All)/Consolidated Marksheet
- State/MCI Registration Certificate/copy/acknowledgement/provisional
- Internship Certificates/Provisional
- Anti-Ragging Undertaking on Rs. 50/- stamp paper (Notarized in Delhi)
- If from the reserved category, EWS/OBC/ST/SC certificate.
- Surety Bond of Rs. 10 Lacs (Notarized in Delhi)
- Undertaking
- Rs. 2,50,000/- Bank Name_____Dated_____DD No._____in favour of '**ESI Savings Fund Account No. 2**.'
- Rs. 30,500/- Bank Name_____Dated_____DD No._____in favour of '**ESI Savings Fund Account No. 2**.'
- Rs. 5,000/- Bank Name_____Dated_____DD No._____in favour of '**ESI Savings Fund Account No. 2**.'

*Note: The surety should either be a business man or class II rank government officer × who is regularly filing income tax returns. Also please enclose the copy of pan card and last year form 16 of surety mentioned. The bond should be on Rs 100 stamp paper with the notary of Delhi. Further, ID proof of witness is to be enclosed***.**

It is certified that the above mentioned candidate has submitted all the above mentioned documents in original.

Sign of Candidate **Office Superintendent** **Joint Director(Estt.-1)** **Dean/Academic Registrar**
***** **Estt- 1** **Academic Section**

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Undertaking from the candidates opting PG seats in ESIC Medical College and Hospital, Basaidarapur regarding knowledge about Bond condition and annual fees in Broad Specialty at ESIC Medical College and Hospital, Basaidarapur, Basaidarapur, New Delhi

I, Dr. _____ s/o,d/o _____ NEET PG Roll No. _____ NEET PG Rank _____ selected in PG Course _____ at ESIC Medical College and Hospital, Basaidarapur, New Delhi in _____Round of counseling, hereby undertake as below:

1. I am aware regarding tuition & university fee amounting to Rs.2,50,000/- & Rs. 28,500/- respectively per academic session.
2. I have gone through carefully the contents of the ESI Surety Bond and agree to be abiding by the same.
3. I am aware that I have to furnish Bank Guarantee amounting to Rs. 10,00,000/- in favour of the Dean, ESIC Medical College and Hospital, Basaidarapur, New Delhi as part of the ESI Surety Bond Condition. Total Amount will be submitted in 2 phases (Rs.5,00,000/- at the beginning of 2nd Academic Year and Rs.5,00,000/- at the beginning of 3rd Academic year respectively) which will be returned, if I successfully complete 02 years bond service after completion of PG course as detailed in the Bond.
4. In case of default in timely payment of fees, appropriate action may be taken against me including deduction from my salary/stipend & notification to affiliating university.
5. In case of default of Bond conditions, ESIC Medical College and Hospital, Basaidarapur reserves full right to take any appropriate action it deems fit to recover bond amount from me.

Signature of Guardian_____ Signature _____

Contact No. _____ Name of Student _____

Contact No. _____