

## **SEAT MATRIX AND FEE SCHEDULE FOR SUPER SPECIALITY COURSES - 2018-19 (MCC)**

<b>Sl. No</b>	<b>Courses</b>	<b>Intake</b>	<b>Course fee (Per year)</b>
<b>1.</b>	<i>M.Ch. Urology</i>	<i>1</i>	<i>21,12,750/-</i>
<b>2.</b>	<i>DM Medical Gastroenterology</i>	<i>1</i>	<i>21,12,750/-</i>
<b>3.</b>	<i>DM Nephrology</i>	<i>2</i>	<i>21,12,750/-</i>
<b>4.</b>	<i>DM Neurology</i>	<i>2</i>	<i>16,12,750/-</i>

### **Fee remittance to College Bank A/c through Digital / Online payment**

***The payment can be made by transfer (RTGS/NEFT) to the mentioned account and proof of remittance produced along with the documents at the time of reporting to the College on scheduled date by MCC.***

<b>Details:</b>	
<b>College Account</b>	<i>CURRENT A/c No. 54003222055</i>
<b>Account Holder</b>	<i>Principal, JSS Medical College, Mysore</i>
<b>Name of the Bank / Address</b>	<i>State Bank of India JSS Medical Institution Campus Sri Shivarathreeshwara Nagar Mysore – 570015 Karnataka</i>
<b>Branch / code</b>	<i>Shivarathreeshwara Nagar Branch – 40547</i>
<b>Bank IFSC Code</b>	<i>SBIN0040547</i>
<b>Bank Tele Fax No.</b>	<i>0821-2490876</i>

### **Fee Remittance / Transfer from abroad**

<b>Details:</b>	
<b>MICR Code of the Branch</b>	<i>570002051</i>
<b>SWIFT Code</b>	<i>SBININBBMO8</i>
<b>Bank IFSC Code</b>	<i>SBIN0040547</i>

• ***Alternatively fees can be paid through the demand draft (DD) drawn in favor of “The Principal, JSS Medical College, Mysore” payable at Mysore.***

### **Documents Check List 2018-19**

**The following mentioned documents are to be submitted at the time of reporting to the College as per Schedule announced by MCC**

<b>Sl. No.</b>	<b>Documents Check List</b>
1.	Aadhar Card of the student – Copy
2.	NEET (SS) allotment letter of MCC
3.	NEET (SS) 2018 Admit card
4.	NEET (SS) 2018 Score/Rank card
5.	10th standard marks card - Original + 3 attested copies
6.	Degree Certificates – (UG and PG) - Original + 3 attested copies
7.	Certificate of completion of compulsory rotatory internship
8.	Post graduate marksheet certificate, if any
9.	UG/PG Permanent Registration Certificate from any State Medical Council/Medical Council of India AND Permanent registration Certificate from Karnataka Medical Council
10.	Migration certificate - Original + 3 attested copies
11.	Conduct/Character certificate from the head of medical college from which you have graduated
12.	Fees: As applicable for the programme (Refer Mode of Payment)
13.	Copy of PAN CARD (Parent & Candidate)
14.	Copy of Aadhar Card of Parent
15.	8 passport size and 5 stamp size photos
16.	Annual Tuition fee – Demand Draft (DD) drawn in favour of “ <b>The Principal, JSS Medical College, Mysore</b> ” payable at Mysore (Refer Fee Structure)
17.	BOND [AS PER FORMAT FURNISHED]

### **Guidelines for fee Refund**

<b><i>Guidelines</i></b>	<b><i>INR (Rs.)</i></b>
<b><i>The amount of fee to be deducted on re-allocation of seat to the candidates in 2nd/3rd round of Counseling.</i></b>	<b><i>Rs. 10,000/-</i></b>
<b><i>The amount of fees to be deducted in case candidate resigns during counseling period and such withdrawal should be within last date of MCC withdrawal</i></b>	<b><i>10% on 1st year Tuition fee</i></b>
<b><i>The amount of fees to be deducted in case candidate resigns after counseling period and after last date of admission (Rs).</i></b>	<b><i>Entire Course Fees</i></b>
<b><i>Time Period for reimbursement</i></b>	<b><i>15 days (From the date fee is transferred / received fully by the university)</i></b>
<b><i>The amount of fees to be deducted in case candidate resigns after counseling period after last date of admission (Rs).</i></b>	<b><i>The candidate will have to pay entire course fee since that seat will remain vacant.</i></b>

***Sd/-***  
**REGISTRAR**

**FORMAT OF BOND FOR DISCONTINUATION OF SUPER SPECIALITY**  
**COURSE FOR ANY CATEGORY CANDIDATES**

**TO BE SUBMITTED ON RS.200 STAMP PAPER AND NOTARIZED**

**(Only after final confirmation of allotment of seat)**

*In Consideration of the JSS Medical College (JSSMC), Mysuru, Karnataka a constituent college of JSS Academy of Higher Education & Research, Mysuru having agreed to provide admission in PG Medical Super Speciality courses (DM / M.Ch) through All India common counseling conducted & allotted by the Medical Counseling Committee (MCC) Under **All India (Management) / NRI category** to me Dr. .... S/o, D/o..... resident of ..... on the basis of NEET SS 2018 All India Rank No. .... and my MCC provisional allotment order No..... dated.....*

*This agreement bond on ..... the day of ..... between Dr. .... S/o, D/o..... (his/her heirs, administrators, executors and legal representatives) on the one part and the JSS Medical College, Mysuru on the other part to do hereby solemnly affirm and declare as under:*

- 1. That I have been provisionally selected for admission to Post graduation Medical Super Specialty courses (DM/M.Ch) under All India common counseling conducted & allotted by the Medical Counseling Committee (MCC) (as the case may be) for the Academic Year 2018-2019 at the JSS Medical College, Mysuru and I will be joining as such on .....*
- 2. That I have not joined / doing any PG Medical Super Specialty courses (DM/M.Ch) courses at any other Medical institute / college in India / abroad.*
- 3. That after getting admission in JSS Medical College, Mysuru, if discontinue / leave the training courses, then I will be bound to deposit the required balance fee of the entire course to the JSS Medical College, Mysuru. The institution will have right to recover such money from the defaulter/ defaulters/Sureties in accordance with the law of the land.*
- 4. That i as student will be entitled for tapping outside sources providing scholarship, with prior permission of the college and will be entirely responsible to commitment made to the scholarship authorities and college shall not be responsible for that.*
- 5. That all the original documents submitted to the institute at the time of admission and mark sheet, passing certificate and other documents of the courses in which admitted (issued by Board / University) will be in custody of JSS Medical College, Mysuru, till the completion of the bond period.*

**Photograph of  
the student**

Place: \_\_\_\_\_

Dated: \_\_\_\_\_

Signature & name of the parents / Guardian

Signature & Name of the candidate  
& Address