

ADMISSION TO MBBS/ BDS (2022-23)

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

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

Eligible candidates with NEET UG 2022 ranking, seeking admission to MBBS/ BDS courses during 2022-23 under Management, Muslim Minority or NRI categories are required to register on <u>www.mcc.nic.in</u> and follow the admission procedure mentioned therein.

1. DOCUMENTS : Candidates are required to be in possession of the following original documents along with attested copies.

SI.	GENERAL CATEGORY / MUSLIM MINORITY CATEGORY
No.	
1	Admit card issued by National Testing agency
2	Score card issued by National Testing agency
3	Online allotment letter of MCC
4	10 th Standard Marks Card
5	12 th Standard Marks Card
6	Transfer Certificate
7	Conduct Certificate
8	Migration Certificate
9	Caste and Income Certificate (wherever applicable)
10	Domicile Certificate
11	Physical fitness certificate
12	4 Passport size and 4 stamp size photos
13	Copy of Aadhar Card
14	MBBS - 4 post dated cheques for remaining years fee to be given in favor of Yenepoya Medical College
15	BDS - 3 post dated cheques for remaining years fee to be given in favor of Yenepoya Dental College
16	UNDERTAKING(as per format furnished) to be on a stamp paper of Rs.200/- and to be notarized
17	3 sets of Attested copies of SI.No.4 to 8 are to be produced with the originals

DOCUMENTS TO BE PRODUCED AT THE TIME OF ADMISSION (ORIGINALS)

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SI. No.	NRI CATEGORY
1	Admit card issued by National Testing agency
2	Score card issued by National Testing agency
3	Online allotment letter of MCC
4	10 th Standard Marks Card
5	12 th Standard Marks Card
6	Transfer Certificate
7	Conduct Certificate
8	Migration Certificate
9	Caste and Income Certificate (wherever applicable)
10	Domicile Certificate
11	Physical fitness certificate
12	4 Passport size and 4 stamp size photos
13	Copy of Aadhar Card
14	MBBS - 4 post dated cheques for remaining years fee to be given in favor of Yenepoya Medical College
15	BDS - 3 post dated cheques for remaining years fee to be given in favor of Yenepoya Dental College
16	Copy of Passport & Visa of the parent and student
17	Copy of the Passport & Visa of sponsor (For NRI Sponsor candidate)
18	Sponsorship Affidavit (stating that sponsor is ready to bear the expenses for the whole duration of study) - For NRI Sponsor candidate
19	Relationship certificate (Relation of candidate with the sponsor) - For NRI Sponsor candidate
20	Family Tree notarized by Tehsildar
21	UNDERTAKING(as per format furnished) to be on a stamp paper of Rs.200/- and to be notarized
22	3 sets of Attested copies of SI.No.4 to 8 are 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)**

2. FEE: The candidates allotted seats at Yenepoya Medical College & Yenepoya Dental College are advised to make necessary payments (Tuition fee, Hostel fee etc.) through Demand Draft/ Net Banking or RTGS to the below mentioned bank account:

FOR MBBS:	FOR BDS:
YENEPOYA (Deemed to be UNIVERSITY)	YENEPOYA (Deemed to be UNIVERSITY)
Virtual A/C No : 9 9 9 1 0 0 6 0 0 0 0 0 0 22	Virtual A/C No : 9 9 9 1 0 0 7 0 0 0 0 0 0 2 2
H Fee Hive - Virtual Account	H Fee Hive - Virtual Account
BANK OF BARODA, FOUNDERS BRANCH	BANK OF BARODA, FOUNDERS BRANCH
BRANCH CODE : V J F O U N	BRANCH CODE : V J F O U N
IFSC CODE : B A R B 0 V J F O U N - (5 th Letter is " Zero")	IFSC CODE : B A R B 0 V J F 0 U N - (5 th Letter is " Zero")
MICR CODE . 575012029	MICR CODE . 575012029
LIGHT HOUSE HILL ROAD	LIGHT HOUSE HILL ROAD
MANGALURU -3, KARNATAKA Phone Number 0824- 2429573	MANGALURU -3, KARNATAKA Phone Number 0824-2429573
FOR MBBS (NRI) payment in USD	FOR BDS (NRI) payment in USD
YENEPOYA (Deemed to be UNIVERSITY)	YENEPOYA (Deemed to be UNIVERSITY)
OD A/C 73860400 000336	OD A/C 73860400 000336
BANK OF BARODA, FOUNDERS BRANCH	BANK OF BARODA, FOUNDERS BRANCH
BRANCH CODE : V J F O U N	BRANCH CODE : V J F O U N
SWIFT CODE : B A R B I N B B O U N	SWIFT CODE : B A R B I N B B O U N
IFSC CODE : B A R B 0 V J F O U N - (5 th Letter is " Zero")	IFSC CODE : B A R B 0 V J F O U N - (5 th Letter is " Zero")
MICR CODE . 575012029	MICR CODE . 575012029
LIGHT HOUSE HILL ROAD	LIGHT HOUSE HILL ROAD
MANGALURU - 3, KARNATAKA Phone Number 0824- 2429573	MANGALURU -3, KARNATAKA Phone Number 0824-2429573

Contact Details:

For further clarification -

- Document verifications contact #8494935203(MBBS)
- Document verifications contact #9901155826(BDS)
- Payment related queries contact #9945449246
- E-mail ID: ugconfirm@yenepoya.edu.in

	YENEPOYA MEDICAL COLLEGE								
MBBS FEE STRUCTURE 2022-23									
	I Installment								
Date of payment	At the time of 01.10.2023 Admission		01.10.2024	01.10.2025	01.10.2026	TOTAL IN RUPEES			
Amount in Rupees									
Course Fee 1850000					8400000				
Note:		/2		-1.:					
 Duration of the No extra charge 	-		-	-					
3) Hostel is Comp4) 4 post dated ch	-				_				
5) Every candidate	-		0	-	-				
course before its c									
6) Above fee does	not include bo	oks, articles, fa	il subject fee, e	xam fee etc.					
7) Fee should be p MEDICAL COLLEC	•		er every year l	by demand dra	ft in favour of	YENEPOYA			

	YE	NEPOYA MI	EDICAL COL	LEGE				
	MBBS	5 FEE STRUC	TURE 2022-	23 (NRI)				
	I Installment	II Installment	III Installment	IV Installment	V Installment			
Date of payment	At the time of Admission	01.10.2023	01.10.2024	01.10.2025	01.10.2026	Total		
Amount in US Dollars								
Course Fee	77000	28000	28000	28000	28000	189000		
(in USD)								
1) Duration of the course is 4&1/2 years plus one year internship2) Food, Laundry and accommodation (sharing) shall be provided with the above fee.3) Hostel is Compulsory for all students. Hostel air conditioned charges extra as per actuals.4) 4 post dated cheques for remaining years fee to be given in favor of Yenepoya Medical College5) Every candidate shall pay the remaining course fee in the event he/she leaving thecourse before its completion								
6) Above fee does n			-	xam fee etc.				
7) Fee should be pa 8) NRI Students sha			every year.					

	BDS (Gen	eral & NRI) - FE	E STRUCTURE 2	2022-23	1	
	I Installment	II Installment	III Installment	IV Installment	_	TOTAL IN
Date of payment	At the time of Admission	01.10.2023	01.10.2024	01.10.2025	Internship	RUPEES
			Amount in Ru	ipees		
Tuition Fee	500000	500000	500000	500000	0	2000000
Hostel Charges	140000	147000	154000	162000	0	603000
Total	640000	647000	654000	662000	0	2603000
Note:						
1) Duration of the	· · ·		ternship			
2) Hostel is Compu	<i>v</i>					
3) Food, Laundry a	ind accommodatio	n (sharing) sha	ll be provided	with the abov	e fee.	
4) 3 post dated che	eques for remainin	g years fee to b	e given in favo	or of Yenepoya	a Dental Coll	ege
5) Every candidate	shall pay the remain	aining course fe	ee in the event	he/she leavin	ig the course	e before its
completion 6) Above Fee does	not include Books	ovam foo and	fail subject for			
2		-			6 6	
7) Fee should be p DENTAL COLLEGE			very year by d	emand draft i	n favour of y	ENEPOYA
8) Food and hostel	l establishment ch	arges to be paid	d at actual at t	he time of inte	ernship	
	all pay the fee in l			_		

FOR MBBS MANAGEMENT SEATS/MUSLIM MINORITY SEATS

UNDERTAKING

I, Mr/Ms		Vame	of the	Candidate),	aged	about	years,
S/D/o			(Name	of	the	Parent)	resident
of	(permanent/present ad	dress	of Pare	ent) do herel	by swe	ar an oath as	follows:

I have been selected to the MBBS course at Yenepoya Medical College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank......(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the MBBS course at Yenepoya Medical College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the MBBS course and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

I YEAR	II YEAR	III YEAR
Date of payment: (at the time of admission)	(01.10.2023)	(01.10.2024)
Rs.	Rs.	Rs.
IV YEAR	V YEAR	
Date of payment: (01.10.2025)	(01.10.2026)	
Rs.	Rs.	

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course. I agree to deposit 4 post dated cheques towards II, III, IV & V year fees as security.

In the event of my discontinuation from MBBS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Medical College, Mangaluru i.e., Rs. without any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.6,000/- during Internship period.

I agree to the above stipend to be received during the time of internship and I will not claim any additional amount.

FOR MBBS NRI SEATS UNDERTAKING

I have been selected to the MBBS course at Yenepoya Medical College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank......(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the MBBS course at Yenepoya Medical College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the MBBS course, and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

Date of payment:	I YEAR	II YEAR	III YEAR
	(at the time of admission)	(01.10.2023)	(01.10.2024)
	USD	USD	USD
Date of payment:	IV YEAR (01.10.2025) USD	V YEAR (01.10.2026) USD	

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course. I agree to deposit 4 post dated cheques towards II, III, IV & V year fees as security.

In the event of my discontinuation from MBBS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Medical College, Mangaluru i.e., a sum of USD...... without any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.6,000/- during Internship period.

I agree to the above stipend to be received during the time of internship and I will not claim any additional amount.

FOR BDS MANAGEMENT SEATS/MUSLIM MINORITY SEATS

UNDERTAKING

I, Mr/Ms	(Name of the Candidate), aged about years,
S/D/o	
(perman	ent/present address of Parent) do hereby swear an oath as follows :

I have been selected to the BDS course at Yenepoya Dental College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the BDS course at Yenepoya Dental College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the BDS course and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

I YEAR	II YEAR	III YEAR	IV YEAR
Date of payment: (at the time of admission)	(01.10.2023)	(01.10.2024)	(01.10.2025)
Rs.	Rs.	Rs.	Rs.

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course. I agree to deposit 3 post dated cheques towards II, III, & IV year fees as security.

In the event of my discontinuation from BDS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Dental College, Mangaluru i.e., Rs. without any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.4,000/- during Internship period.

I agree to the above stipend to be received during the time of internship and I will not claim any additional amount.

FOR BDS NRI SEATS

UNDERTAKING

I, Mr/Ms .		(Name of the	Candid	late), aged	about	years,
S/D/o		(Name	of	the	Parent)	resident
of	(permanent/present a	address of Pare	ent) do	hereby sw	ear an oath a	s follows :

I have been selected to the BDS course at Yenepoya Dental College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank......(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the BDS course at Yenepoya Dental College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the BDS course and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

I YEAR	II YEAR	III YEAR	IV YEAR
Date of payment: (at the time of admission)	(01.10.2023)	(01.10.2024)	(01.10.2025)
USD.	USD.	USD.	USD.

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course. I agree to deposit 3 post dated cheques towards II, III, & IV year fees as security.

In the event of my discontinuation from BDS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Dental College, Mangaluru i.e., a sum of USD without any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.4,000/- during Internship period.

I agree to the above stipend to be received during the time of internship and I will not claim any additional amount.

Signature of the Candidate

Signature of the Parent/Guardian