

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

Sl. No.	MANAGEMENT / MUSLIM MINORITY CATEGORY
1.	Admit Card issued by NBE
2.	Result/Rank Letter issued by NBE
3.	DGHS Allotment Letter
4.	Mark Sheets of BDS 1 <sup>st</sup> , 2 <sup>nd</sup> & 3 <sup>rd</sup> Professional Examinations
5.	BDS Degree Certificate/Provisional Certificate
6.	State Dental Council Registration
7.	Internship Completion Certificate
8.	Attempt Certificate
9.	Migration Certificate
10.	Transfer and Conduct Certificate
11.	High School/Higher Secondary Certificate/Birth Certificate as proof of date of birth.
12.	Caste and Income Certificate (wherever applicable)
13.	Copy of Aadhar Card
14.	Copy of PAN Card
15.	D.D. in favour of 'Yenepoya Dental College', payable at Mangalore for <b>DENTAL</b>
16.	3 sets of Attested copies of Sl.No. 4 to 11 are to be produced with the originals
17.	Colour Photos (Passport + Stampsize) - 8 Nos.

Sl. No.	NRI CATEGORY
1.	Admit Card issued by NBE
2.	Result/Rank Letter issued by NBE
3.	DGHS Allotment Letter
4.	Mark Sheets of BDS 1 <sup>st</sup> , 2 <sup>nd</sup> & 3 <sup>rd</sup> Professional Examinations
5.	BDS Degree Certificate/Provisional Certificate
6.	State Dental Council Registration
7.	Internship Completion Certificate
8.	Attempt Certificate
9.	Migration Certificate
10.	Transfer and Conduct Certificate
11.	High School/Higher Secondary Certificate/Birth Certificate as proof of date or birth.
12.	Caste and Income Certificate (wherever applicable)
13.	Copy of Aadhar Card
14.	Copy of PAN Card
15.	Transfer of USD to the bank account of YENEPOYA DENTAL COLLEGE mentioned below - <b>DENTAL</b> (For bank details check <b>fee</b> document)
16.	Passport copy of the parent and student
17.	Passport copy of sponsorer ( <b>For NRI Sponsor candidate</b> )
18.	Sponsorship Affidavit (stating that sponsorer is ready to bear the expenses for the whole duration of study) - <b>For NRI Sponsor candidate</b>
19.	Relationship certificate of NRI with the candidate - <b>For NRI Sponsor candidate</b>
20.	Embassy certificate of the sponsorer - <b>For NRI Sponsor candidate</b>
21.	3 sets of Attested copies of Sl.No. 4 to 11 are to be produced with the originals
22.	Colour Photos (Passport + Stampsize) - 8 Nos.

**(TO BE SUBMITTED ON Rs.200/- STAMP PAPER DULY SIGNED BY NOTARY)**

**FOR MANAGEMENT SEATS/MUSLIM MINORITY SEATS**

**UNDERTAKING**

I, Dr..... (Name of the Candidate), aged about ..... years,  
S/D/o .....(Name of the Parents) resident of .....  
..... (permanent/present address of Parent) do  
hereby swear on oath as follows :

I have been selected to the Post Graduate Course in the specialty of .....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 along with my parents/guardian took admission to the Post Graduate  
Course at Yenepoya Dental College, Mangaluru as per the MCC/DGHS Allotment letter dated  
.....

I say in consideration of admission to 1<sup>st</sup> year of the course, I shall complete the Post Graduate Course  
and accordingly undertake to pay all the tuition and other fees as per the fee structure and annexed  
payment schedule notified by Yenepoya (Deemed to be University).

In the event of my discontinuation of 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 the  
Yenepoya (Deemed to be University), Mangaluru i.e., Rs..... without any demur.

What is stated above is true and correct. I along with my parent/guardian do hereby undertake to act  
accordingly. This, the ..... day of ..... 2020 at Mangaluru, Karnataka.

**Signature of the Candidate**

**Signature of the Parent/Guardian**

**(TO BE SUBMITTED ON Rs.200/- STAMP PAPER DULY SIGNED BY NOTARY)**

**FOR NRI SEATS**

**UNDERTAKING**

I, Dr..... (Name of the Candidate), aged about ..... years,  
S/D/o .....(Name of the Parents) resident of .....  
..... (permanent/present address of Parent) do  
hereby swear on oath as follows :

I, have been selected to the Post Graduate Course in the specialty of .....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 along with my parents/guardian took admission to the Post Graduate  
Course at Yenepoya Dental College, Mangaluru as per the MCC/DGHS Allotment letter dated  
.....

I, say in consideration of admission to 1<sup>st</sup> year of the course, I shall complete the Post Graduate  
Course and accordingly undertake to pay all the tuition and other fees as per the fee structure and  
annexed payment schedule notified by the institution.

In the event of my discontinuation of 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 the  
Yenepoya (Deemed to be University), Mangaluru i.e., USD..... without any demur.

What is stated above is true and correct. I along with my parent/guardian do hereby undertake to act  
accordingly. This, the ..... day of ..... 2020 at Mangaluru, Karnataka.

**Signature of the Candidate**

**Signature of the Parent/Guardian**