GOVERNMENT MEDICAL COLLEGE, MUMBAI-400001

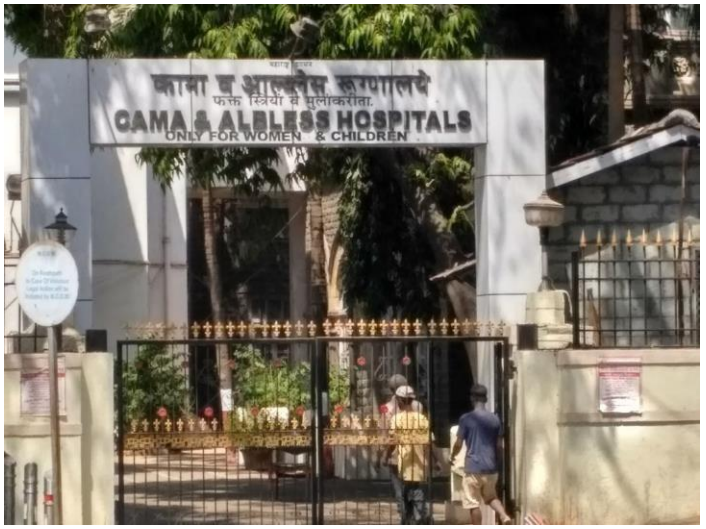
Instruction Manual for NEET UG-2026-27Admission Process

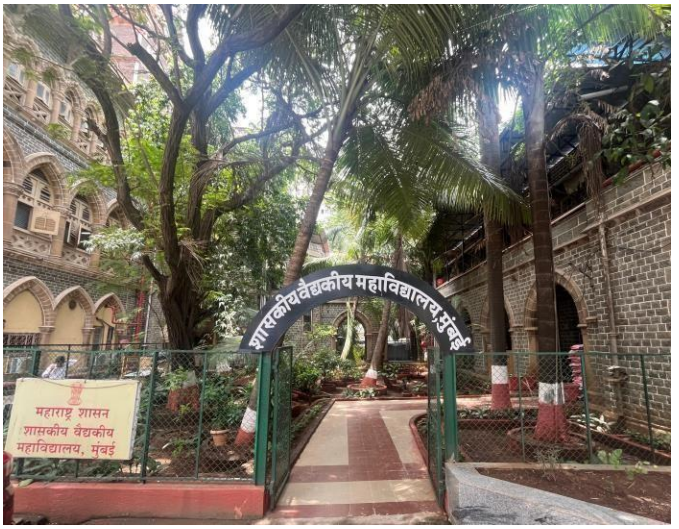
WELCOME

Contact Details: (Between 11.00 to 5.00 PM ONLY)

1. For Scrutiny of Documents Reporting Timing: 11.00 AM to 5.00 PM
2. Venue: **Mida Hall Gokuldas Tejpal Hospital L.T. Marg, Mumbai**
3. Official Email ID: gmcgtmumbai@gmail.com / gmcmumbai.administration@gmail.com
4. Official Website: www.gmcmumbai.org
5. Contact No. Dr. Sunil Lilani (Vice-dean) **+919322299008 /9029293828 / 8689968196**

DO NOT CALL ON THE PERSONAL NUMBER OF THE DEAN notified on the





Land Mark-

1. Opposite L.T.Marg Police Station, Near C.P. Office
2. Nearest Railway Station – Harbor and Central Line- CSMT
   Western Line- Marine Lines
3. Google Map Link – https://maps.app.goo.gl/71WVEf4xQyWW3zrs6

IN-CAMPUS HOSTEL FOR STUDENT ACCOMMODATION IS AVAILABLE

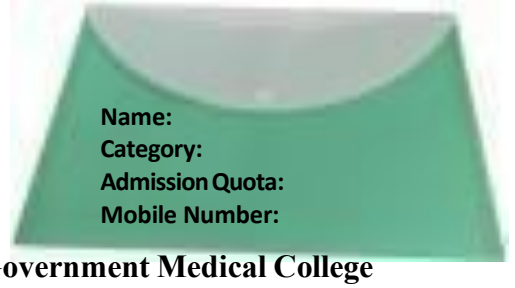
MBBS ADMISSION PROCESS

All the selected students of **NEET-UG-2026** who have been allotted seat at **Government Medical College, Mumbai** should follow following instructions and accordingly report with all details required for admission process.

1. Download & print this PDF file : **Read all details carefully.**
2. **Student should report personally for admission or admission cancellation in case of upgradation. PROXY will not be allowed for admission process/Cancellation of admission.**
3. Print and fill 2 copies of the Application Form.
4. **Print and fill 2 copies of the Original document Holding Certificate.**
5. Print and fill 1 copy of Candidate information.
6. Print and fill 1 copy of Medical Fitness issue by Registered Medical Practitioner in the prescribed format ONLY .
7. **Print and fill 2 copies of Declaration for Hostel Accommodation.**
8. All **original documents** enlisted in the holding certificate will be compulsorily required for admission. Additionally, student should submit **2 sets of SELF ATTESTED Xerox/ Photo copies** of all original documents.
   Send all Original documents on gmcmumbaiacadug@gmail.com
   All original Documents are to be **INDIVUALLY SCANED in P D format only** will be compulsorily required during admission (arranged as per the checklist). Student should scan document properly through computer scanner (Max. Size 500 kb only).
9. **Kindly, don't use mobile scanner for scanning documents.** Individual Original Documents should be scanned and renamed appropriately. **e.g.** Nationality certificate after scanning should be renamed as **Nationality - Name of Student.**
   Prepare a folder and rename it with Name of the student, keep all scanned documents in this folder for submission during admission. **Scanned documents will be accepted only in a Pen Drive.**
10. **Bring 8 Passport size photos.**

- Other Letters/Undertaking if required will be taken at the time of admission if permissible within the rules thereof.
- **Kindly note : The Admission Process requires verification and approval. No student will be given Joining letters on an urgent basis. The office may require 2-3 days to complete the process.**
- **Students are advised to read the details of the admission process in information brochure/FAQs/other notifications available on MCC website. For state admissions (Maharashtra state) refer state commissioner & admission regulating authority official website (www.mahacet.org).**
- **The institute is responsible for only admission process. We will not be available/responsible to guide any students for further rounds or rules & regulations of All India/State. The student should read information brochure/Notifications/Advisory issued by different agencies on official websites. Please don't contact institute admission cell for any such information.**
- Students are strictly advised NOT TO EDIT ANY FORMATS. All formats should be filled by student in his/her own handwriting.
- **Kindly Note: Other website (Govt/Private) is NOT ALLOWED to display this information on their personal websites. All Candidates to note, Government Medical College & Hospital, L.T. Marg, Mumbai has NOT appointed any agency (Govt/Private) for admission process/Facilitation or guidance center.**
- Submit all documents in a simple button file folder as shown: **On folder, write your Name, Category, Admission Quota & Mobile Number with thick permanent marker.**

SIMPLE BUTTON FOLDER



Government Medical College

APPLICATION FOR ADMISSION

STUDENT'S DETAILS (ALL IN CAPITAL)

RECENT PASSPORT SIZE PHOTOGRAPH

NAME: _____

FULL ADDRESS: _____

_____

_____PIN_____

MOBILE NO.: _____

EMAIL ID: _____

PHONE NUMBER OF RESIDENCE WITH STD CODE OR

PARENT'S CONTACT DETAILS: _____

DATE: / /2026

To,
The Dean,
Government Medical College & Hospital,
L.T. Marg, Mumbai.

Sub. : Joining in First Year M. B. B. S. Course at
Government Medical College & Hospital, L.T. Marg, Mumbai

Ref. : Allotment Letter No./ List & Serial No
Date: / /2026.

Respected Sir/Madam,

I, the undersigned Shri/Kum. (Full Name in Capital)_____

_____have been selected for First Year M.B.B.S. Course in Government Medical College & Hospital, L.T. Marg, Mumbai as per the selection letter of All India / State list. Kindly enroll me in your esteemed college as a First Year M. B. B. S. student for the Academic year 2026-27.

Thanking you,

Yours Faithfully,

(Name)

शासकीय वैद्यकीय महाववद्यालय व रुग्णालये, मुंबई
(अस्थापना कार्यालय)
GOVERNMENT MEDICAL COLLEGE AND HOSPITALS, MUMBAI
(Dean Office)
L.T. Marg, Near L.T. Marg Police Station, Mumbai- 40001
Phone No.9920527799 **Email- gmcgtmumbai@gmail.com**

O.W. NO. GMCH/UG ADMISSION/ /2026 DATE: / /2026

ORIGINAL DOCUMENTS HOLDING CERTIFICATE

Received following original documents from Miss/Mr._____ _____admitted through All India quota/State quota to 1st MBBS course on____/____/____for the academic year _____at Govt. Medical College & Hospital, L.T. Marg, Mumbai.

This Certificate is the Proof that all original documents mentioned below are submitted by the student to the institute. Once admitted original documents will not be given to student. Original documents will be retained by the institute till the student completes MBBS & Compulsory Bond service.

Sr. No.	Original Documents Required	Yes	No
1	Nationality Certificate OR Valid Passport attested by Dean		
2	Domicile Certificate		
3	Aadhar Card (Photocopy)		
4	SSC (10th) Passing Certificate		
5	HSC (10+2) Mark sheet		
6	HSC (10+2) Passing Certificate		
7	Admit card NEET-UG-2026 issued by NTA		
8	Result NEET-UG-2026 issued by NTA		
9	Proof of identity (PAN/Driving License/Passport)-Photocopy (The candidate must be born on or before 31.12.2007 to be eligible)		
10	Provisional allotment letter generated online (for All India students). For state quota candidates, Allotment letter/Selection list page.		
11	Caste Certificate (if applicable)		

12	Caste Validity Certificate (if applicable) For outside Maharashtra students (OMS) Letter from magistrate that your state does not issue caste validity certificate will be compulsory as per attached proforma (Annexure E)		
13	Non-Creamy Layer Certificate Valid up to 31.03.2026 (if applicable)		
14	Eligibility Certificate for EWS category issued by appropriate authority, for the year 2026-27.		
15	School Leaving OR Transfer Certificate		
16	Defense claim(D1/D2/D3): All certificates as per NEET-UG-2026 Information Brochure… (For State quota students only)		
17	Physically Handicapped Certificate…. (If applicable)		
18	i) MKB: Disputed area certificate, ii) Mother tongue certificate, iii) SSC/HSC from MKB Area…. (For State quota students only)		
19	Hilly Area Certificate…. (for State quota students only)		
20	Medical Fitness Certificate in prescribed format		
21	Income certificate issued by competent authority of financial year 2026-2027. (For Maharashtra candidates only-Claiming EBC for fees)		
22	Migration Certificate …. for Outside Maharashtra State (OMS) candidates only		
23	Self-Education Gap Certificate (Affidavit on Rs.100/-Bond) ...if applicable		
24	Hostel accommodation declaration (compulsory for all)		
Tuition Fees: D.D. No: of Rs. Dt. / /			
Other Fees: D.D.No: of Rs. Dt. / /			
Original Document &2 Xerox sets to be prepared exactly as per above sequence.			

Deficiency IF Any:

SCRUTINY OFFICER
Name & Signature

DEAN,
GOVERNMENT MEDICAL COLLEGE,
MUMBAI – 400 001

PHOTO

STUDENT INFORMATION
Government Medical College, MUMBAI-400001
ADMISSION FOR THE YEAR 2026-2027

1	Name of the Student as mentioned on HSC Mark sheet (in Capital)	
	Guardian / Father's Full Name	
	Name of Mother	
	Full Name of the Candidate in Devanagari (Marathi/Hindi)	
2	Residential Address with PIN code	
	Mobile No. of Student	
	Mobile No. of Parent	
3	E-mail Address of Student	
	E-mail Address of Parent	
4	a) Date of Birth	
	b) Place of Birth	
5	Aadhaar No.	
6	Gender (Male /Female)	
7	Date of Admission	/ /2026
8	a) Category	
	b) Caste	
	c) Sub-Caste	
	Category of Admission	
9	Domicile State	

10	**Academic Record**	
	S.S.C. Year of Passing:	
	Name of the HSC/12th Board	
	Marks Obtained in H.S.C.(10+2)	
	(E) English: Marks Obtained	/100
	(P) Physics: Marks Obtained	/100
	(C) Chemistry: Marks Obtained	/100
	(B) Biology: Marks Obtained	/100
	Total marks (Phy+Chem+Bio)	/300 (P+C+B)
	NEET-UG-2025 Roll No.	
	NEET-UG-2025 Marks	/720
	NEET-UG-2025 AIR No.	
	Name of Board in HSC Exam	
11	Blood Group	
	Mark of Identification (two)	1)
		2)
	Guardian/Father's Occupation	
12	*Willingness about organ donation after Accidental Death.	Yes / No

* As per Maharashtra University of Health Sciences eligibility form.

Date: / /2026
Place: MUMBAI Signature of Candidate

MEDICAL FITNESS

A candidate must be medically fit to undergo the professional course applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed proforma, as given below on a **Letterhead** or on this format with original seal and signature.

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Mr./Ms ..... who is desirous of admission to Health Science Courses.

He/she has not given any personal history of any disease incapacitating him/her to undergo the professional course. Also, on clinical examination it has been found that he/she is medically fit to undergo the professional course.

Certified that he/she fulfils the following criteria.

(1) Absence of any incapacitating and /or progressive systemic disease/disorder/condition,
(2) Absence of any disability of upper limb/s.
(3) Absence of any major visual/ auditory disability.
(4) Absence of psychosis/neurosis/mental retardation,
(5) Ability to maintain erect posture,
(6) Reasonable manual dexterity.

Though, following deviations have been revealed, in my opinion, these are not impediments to pursue a career as a Medical / Dental / Ayurved / Homeopathy / Unani / Occupational Therapy / Physiotherapy / Audiology & Speech, Language Pathology / Prosthetics & Orthotics / BSc Nursing. **(Strike, which is not applicable):**

1. .....

2. .....

3. .....

Address of the Registered Medical Practitioner	Signature
	Name
	Registration No.
Date:	Seal of Registered Medical Practitioner

DECLARATION: BY STUDENT & PARENTS
HOSTEL FACILITY (If applied/allotted)

I,_____is admitted for_____course in the academic year_____at Government Medical College & Hospital, L.T. Marg, Mumbai.

I and my Parents/Legal guardian have gone through the SOP for hostel accommodation given in the admission manual at the time of Joining. We have clearly understood all rules and regulations mentioned in SOP.

I hereby declare that I am suffering from _____

Disease (s) and on treatment. I am receiving following _____

_____drugs for my disease element since_____days/Months/Years. I also declare that I am not hiding any information related to my health issues.

We, here by undertake and declare that, if hostel accommodation is allotted, I will abide with all the rules and regulation mentioned in the SOP. If I break any rule mentioned thereof in the SOP, I will be liable for appropriate action.

Signature of Student with Date

Name of the Student:_____
Full Address with Pincode:_____
_____
Mobile No. _____
Email Address: _____

Signature of Parents / Legal Guardian with Date

Name of Parents / Legal Guardian:_____
Full Address with Pincode:_____
_____
Mobile No. _____
Email Address: _____

UNDERTAKING-NEET-UG ADMISSIONS 2026-27

(Online admission Process)

ONLY FOR ALL INDIA CANDIDATES

I the undersigned hereby confirm that the data submitted during joining (1st / 2nd /subsequent rounds) for MBBS through the online process was done in my presence and with my full consent. It will be my full responsibility to thoroughly check the data before final submission.

Name & Sign Witness:

Contact No.:

(Name & Sign of candidate with date):

Contact No.:

- Candidate want to participate in Next Round of Counselling: Yes / No

FEES: To be submitted as Demand Draft Details (DD)

For M.B.B.S. Admission in the year 2026-27 Selected students are instructed to submit the DD as follows

Demand drafts to be drawn from Nationalized banks

(Errors or spelling mistakes in the DD will NOT be accepted)

M.B.B.S. ADMISSION DETAILED FEES STRUCTURE 2026-27. GOVERNMENT MEDICAL COLLEGE & HOSPITAL, L.T. MARG, MUMBAI

MBBS FEE STRUCTURE	OPEN	RESERVE CATEGORY (SC/ST)	VJ/NT (NON-CREAMY LAYER CERTIFICATE required)	OBC - NON CREAMY LAYER CERT. mandatory)		I. EWS - Income less than 8 lacs II.SEBC - (NON CREAMY LAYER CERT. mandatory) (*FOR MAHARASHRTRA STUDENTS ONLY - GR.201805031517347613, dates 03.05.2018)		Open Category- Parent's income less than Rs.8 lacs certificate is compulsory (*FOR MAHARASHTRA STUDENTS ONLY - G.R.MED 1016/47/3/16/education-2/Dated 03.05.2018)	
				FEMALE	MALE	FEMALE	MALE	FEMALE	MALE
Tuition Fees (A)	167300	00	00	00	83650	00	83650	00	83650
Library fees	1000	1000	1000	1000	1000	1000	1000	1000	1000
Misc. fees	50	50	50	50	50	50	50	50	50
Total (A)	168350/-	1050/-	1050/-	1050/-	84700/-	1050/-	84700/-	1050/-	84700/-
Other fees (B)									
Development Fund	5000	5000	5000	5000	5000	5000	5000	5000	5000
Admission Fees	1500	1500	1500	1500	1500	1500	1500	1500	1500
Caution Money Deposit (CMD)	3000	3000	3000	3000	3000	3000	3000	3000	3000
Library Deposit	2000	2000	2000	2000	2000	2000	2000	2000	2000
MUHS Rashtriya Yojana Fee	10	10	10	10	10	10	10	10	10
Gymkhana Fees	500	500	500	500	500	500	500	500	500
Ashvamedha Fees	500	500	500	500	500	500	500	500	500
University Development Fund	100	100	100	100	100	100	100	100	100
Book bank fee	10	10	10	10	10	10	10	10	10
Total (B)	12,620/-	12,620/-	12,620/-	12,620/-	12,620/-	12,620/-	12,620/-	12,620/-	12,620/-
Total (Rs.A+B)	180,970/-	13,670/-	13,670/-	13,670/-	97320/-	13,670/-	97320/-	13,670/-	97320/-
After Allotment of Hostel, Following charges will be applicable									
Hostel deposit (Only once)	1000/-	1000/-	1000/-	1000/-	1000/-	1000/-	1000/-	1000/-	1000/-
Hostel rent (Per year)	4000/-	4000/-	4000/-	4000/-	4000/-	4000/-	4000/-	4000/-	4000/-
Electricity Charges (Per year)	36/-	36/-	36/-	36/-	36/-	36/-	36/-	36/-	36/-
TOTAL	5036/-	5036/-	5036/-	5036/-	5036/-	5036/-	5036/-	5036/-	5036/-

DEMAND DRAFT DETAILS

Please submit TWO DEMAND DRAFTS in favour of **"Dean, Government Medical College, Mumbai"** to be made payable at Mumbai.

Errors/spelling mistakes/corrections/alterations/overwriting in the DD will NOT be accepted.

D.D. No.1 – 'Tution fees' amount to be Total A, applicable as per candidate' s category.

D.D. No.2 – Other fees – Total B, Amount Rs.12,620/-

For All India Quota, cash/cheque/online transaction will not be accepted

For State Quota, DD/Cheque (Cheque shall be replaced with DD on next working day)

The DD will be deposited in the accounts only after confirmation of the Admission/Status retention by the candidate.

If students are allotted another college in subsequent rounds of the All India/State Quota, the DD will be refunded back to the candidate. Candidate will have to pay CASH of Rs.1500/- in the accounts department.

UNDERTAKING FOR MIGRATION / TRANSFER CERTIFICATE / LEAVING CERTIFICATE

I ……., selected through All India Quota/ State Quota for Undergraduate admission at Government Medical College & Hospital, L.T. Marg, Near L.T. Marg Police Station, Mumbai 400 001. I have reported on Date: - / /2026.

I undertake to submit the following certificate(s) with 15 days from the date of admission.

1)

2)

3)

4)

5)

6)

I am aware that if I fail to submit above mentioned documents within 15 days, appropriate action will be initiated against me by the administration. It shall be my responsibility to produce all necessary documents and get eligibility from Maharashtra University of Health Sciences, Nashik.

Signature of Candidate

IMPORTANT:

Please Note that Any Amendment, Alteration in above information may be made in the future if required.

OFFICE THE _____

_____

ANNEXURE - E

Outward No: - **Date: -**

TO WHOM IT MAY CONCERN
CERTIFICATE

This is to certify that, the Caste Certificate No. _____

Dated _____issued to Mr./ Miss. _____

By the Tahsildar / Magistrate / _____is Valid.

Further, it is stated that there is no provision of issuing separate Caste Validity

Certificate in _____State.

Office Seal / Stamp **Signature of Tahsildar/ Magistrate/ Issuing Authority**

Annexure 'C'

पदवी/पदव्युत्तर पदवी प्रथम वर्ष अभ्यासक्रमास प्रवेश घेणाऱ्या सर्व मुला/मुलीकडून प्रवेशाच्या वेळीच मतदार यादीमध्ये नाव नोंदणी करण्याच्या अनुरंगाने घ्यावयाचे प्रमाणपत्र/हमीपत्र नमुना **हमीपत्र**

मी _____

अभ्यासक्रम_____

महाविद्यालयाचे नाव_____

या महाविद्यालयात प्रथम वर्षात प्रवेश घेतला असुन मी दिनांक_____

रोजी 18 वर्षाचा / वर्षाची झाले आहे किंवा होणार आहे.

18वर्ष पूर्ण झाल्याबरोबर मी माझे नाव मतदार यादीत नोंदवुन घेणार आहे, अशी मी प्रतिज्ञा करतो/करते. यासाठी सोबत जोडलेल्या नमुना Ç,7,8 व 8अ व्यवस्थितपणे भरलेला आहे.

स्वाक्षरी:_____

नाव_____

कुमार/कुमारी _____
पत्ता _____
_____

दि:-

फोटो

प्रति,

मा. अधिष्ठाता
शासकीय वैद्यकीय
महाविद्यालय, मुंबई.

विषय: जात प्रमाणपत्र/जात वैधता प्रमाणपत्र /EWS प्रमाणपत्र सत्यतेबाबत...

मा. महोदय/महोदया,

मी कुमार/कुमारी _____वय_____ वर्ष, राहणार _____प्रतिज्ञापुर्वक असे नमुद करतो/ करते की, माझे महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक यांच्याशी संलग्नित असलेल्या शासकीय वैद्यकीय महाविद्यालय, मुंबई या ठिकाणी रा.सा.प्र.प.कक्ष, महाराष्ट्र राज्य (CET) अन्वये AIR क्र.___ _____, ALLOTMENT LETTER NO._____,MBBS या अभ्यासक्रमा·करीता शैक्षणिक वर्ष २०२६-२७ पासून_____जात प्रवर्गा अंतर्गत प्रवेश प्राप्त झालेल्या आहे. या प्रवेश प्रकिये दरम्यान मी माझे जातीचे प्रमाणपत्र क्र. व जात पडताळणी प्रमाणपत्र क्र. ____जे मजा अनुक्रमे (1)_____व(2) या प्राधिकरणांकडून प्राप्त झालेले आहेत, ते सत्य आहे. हे मी प्रतिज्ञापुर्वक मान्य करते. सदर प्रमाणपत्र पडताळणी अंतर्गत चुकीचे किंवा खोटे, असत्य किंवा बनावट असल्यासचे सिध्द झाल्यास,मी महाराष्ट्र शासन/प्रशासकीय नियमानुसार कायदेशिररित्या होण कारवाईस पात्र ठरेनण याची मी ग्वाही देते/देतो. तसेच. सदर प्रवेश प्रक्रिया प्रवेशाची नोंदणी व पात्रता रद्द ठरु शकते, याबाबत सुद्धा मी ज्ञात आहे.

सोबत : प्रमाणपत्राच्या साक्षांकित केलेल्या
छायांकित प्रति जोडल्या आहेत.

आपला/आपली विश्वासू,

स्वाक्षरी

माझ्या सक्षन माझ्या पाल्याने
प्रितज्ञापूर्वक स्वाक्षरी केली.

कुमार/कुमारी :_____
आधार कार्ड नं:_____
मोबाईल नं_____

पालकांची स्वाक्षरी, नाव व नाते :_____
आधार कार्ड नं : _____
मोबाईल नं : _____

(Kindly fill 3 copies of the above form and bring along with you at the time of Admission)