

All India Institute of Medical Sciences (AIIMS) Bhubaneswar

(A statutory body under the aegis of Ministry of Health and Family Welfare, GOI)

Sijua, Post: Dumuduma, Bhubaneswar (Odisha) – 751 019 Web site: www.aiimsbhubaneswar.nic.in

No. AIIMS/BBS/DEAN/ADMISSION/1/ 590 .

DATE: 11/02/2022

INSTRUCTION FOR CANDIDATES SEEKING ADMISSION AT AIIMS, BHUBANESWAR

The Director, faculty and staff congratulate you on obtaining admission in All India Institute of Medical Sciences (AIIMS), Bhubaneswar. It will be our endeavour to ensure that, your transition from to AIIMS, Bhubaneswar is hassle free. You are advised to read the following instructions carefully before Admission.

Programme for Admission Process of B.Sc.(Hons) Paramedical, Batch 2021

Officials	Date, Time and Venue						
Dr. Gaurav Chhabra, Faculty In charge (Paramedical) Mr. B. B. Mishra, Registrar	Date : 1 st Counselling (11 th February 2022* to 14 th February, 2022).						
• Mr. B. R. Parida, PPS							
• Mr. B. B. Das, JAO	2nd Counselling (18 th February 2022 to 23/02/2022)						
	• Time : 10:30 A.M. to 05:00 P.M. (Monday to Friday) 10:00 A.M. to 01:30 PM (On Saturday)						
	Venue : Academic Section						

^{*}The admission will remain closed on 13-02-2022 (Sunday) & 20-02-2022 (Sunday).

MANDATORY REQUIREMENT OF DOCUMENTS (IN ORIGINAL) DURING ADMISSION

- Laboratory Tests: Reports of X-Ray chest (PA view) Random Blood Sugar, Urine Analysis, Blood Group and Rh
 factor to be done from a Government/ NABL accredited laboratory by the student before reporting the Institute.
- 2 Rank letter.
- 3. Provisional Allotment Letter from AIIMS, New Delhi.
- Original Bank Draft worth Rs. 5000/- (Five thousand only) in favour of AIIMS, Bhubaneswar Academic Fund (A/c No. 557810110001482). (Please write your Name, Mobile No., All India Rank and e-mail ID (IN CAPITAL LETTERS) at the reverse of the Bank Draft.)
- 5. Date of birth Certificate OR certificate from the board from which you passed the high school / higher secondary examination showing date of birth.
- 6. Certificate of having passed the 10+2 examination showing the subjects in the examination.
- 7. Mark sheet of 10+2 examination from the Board from which you passed the same.
- 8. Migration certificate from the University / Board last attended by you.
- 9. Caste Certificate showing that the student belong to Schedule Caste/ Scheduled Tribe/ OBC (NCL)/ EWS category (Applicable only if they have claimed in their application that they belong to that category) as per the prescribed format issued by the Government of India. The validity of OBC certificates must be issued during 15/06/2020 to 28/12/2021 (both dates inclusive) and similarly the validity of EWS certificates must be issued during 01/04/2021 to 28/12/2021 (both dates inclusive).
- 10. PwD Certificate if applicable as mentioned in the prospectus.
- 11. 2 (two) sets of photocopies of the above documents (self-attested).
- 12. Current Passport size photograph (front facing) 5 copies.
- 13. CANDIDATE INFORMATION SHEET: (appendix-A)
- 14. AFFIDAVIT FOR PARENT / GUARDIAN on non-judicial stamp paper worth Rs.10.00: (Appendix-B)
- 15. AFFIDAVIT BY THE STUDENT: on non-judicial stamp paper worth Rs.10.00: (Appendix-C)
- 16. DECLARATION BY THE CANDIDATE (Appendix-D)
- 17. UNDERTAKING BY THE CANDIDATE (Appendix-E)

IMPORTANT: Documents 13-17 above MUST be filled up completely and duly signed before submission.

HOSTEL: It is mandatory for students to stay in the hostel during the tenure of the course. Students should arrange the items like water jug, tumbler, plastic bucket, Mug, Pillow, Bed Sheets. Two locks to ensure a comfortable stay.

IMPORTANT: Please note the Institute shall not reimburse any expenditure incurred by any student because of travel and maintenance in connection with their joining the Institute.

The tentative date of commencement of classes will be 28/02/2022.

AHMS, Bhubaneswar



APPENDIX - A

All India Institute of Medical Sciences (AIIMS) Bhubaneswar Sijua, Post : Dumuduma, Bhubaneswar (Odisha) – 751 019

Web site: www.aiimsbhubaneswar.edu.in

CANDIDATE INFORMATION SHEET

PLEASE FILL UP THE FORM IN CAPITAL LETTER ONLY

NAME: (In CAPITA)	LETT	ERS w	rith I	Prefix	SHR	I./M	S/MI	RS./	DR):	-							
First Name												-	_				
Middle Name												-	- 2				
Last Name										\perp							
Date of Birth																	
Gender				ion =													
Religion																	
Caste													_				
Category																	
AIR No.																	
		V A				T	Т				1	_					
Father's Name	-		-	-	_	+		-		_	+-	-		1			
						1							1				
Mother's Name																	
Address for Corresp	oonder	ice:															
House No.							1										
STREET																	
AT / PO																	
Police Station							1										
District									-								
State																	
Pin code																	
Permanent Address	D.		7//	- XV													
	5.						1		5					T	T	T	T
House No.			-		_					-	_	-		1	+	+	+
STREET AT / PO	_		-	-	-	7			-								+
AT / PO Police Station	_		+-			-	+		\rightarrow	_	-	+	1	1			1
2011 St. 201	-		+			_				-		+				1	+
District	_		+	+		-			-			1			+	+-	+
State			-			_	+					+-					
Pin code				1 1										_	_	_	_
Aadhaar Card No.											Ц,	L					
Telephone Number	s (Mol	oile / L								4							
*			N	Mobil	e						_	Lan	dlir	1e	T	т —	Ι
Candidate													-	-	-	-	1
Father		1										-		-		-	
Mother										2							
Email ID: (In CAPI	TAL LI	ETTER	S)						12.707				110-				
Candidate			Ť												i de la composición dela composición de la composición dela composición de la compos		
Father																	
Mother					-51							1	4				

APPENDIX - B



All India Institute of Medical Sciences (AIIMS) Bhubaneswar

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AFFIDAVIT (For Parent / Guardian)

1.	1,				_(full	name	of	pare	ent/gu	ardian
father	/mother/guardian of,(Student Name)			-0.30			100	1803	_Reg
No	having been admit	tted to			_have	receive	d a	сору	of th	e UG
Regul	ations on Curbing the	Menace of Ragging in High	ner Educational	Institutions, 200	09(her	einafter (calle	d the	Regu	lations
carefu	illy read and fully unde	erstood the provisions conta	ained in the said	Regulations.						
2.	I have in particular	perused clause 3 of the Re	gulations and a	m aware as to v	vhat co	onstitutes	rag	ging.		
3.	I have also, in par	ticular, perused clause 7 ar	nd clause 9.1 o	f the Regulation	s and	am fully	awa	re of t	he pe	nal an
admin	istrative action that is	liable to be taken against r	my ward in case	e he/she is foun	d guilt	y of or al	ettir	ng rag	ging,	active
or pas	ssively, or being part o	of a conspiracy to promote ra	agging.							
,	I bosoby galomaky	aver and undertake that								
4.		aver and undertake that:-						d 1	PARTIES EST	0 - 5 41-
	(a) My ward Regulations.	will not indulge in any beha	viour or act tha	t may be consti	tuted a	is raggin	g un	der ci	ause	3 OF TH
	100 m = 100 m	will not participate in or abo	et or propagate	through any ac	t of co	mmissio	n or	omiss	sion th	nat ma
		agging under clause 3 of th		anough any ac	. 0, 00				31011 1	101 1110
5.	I hereby affirm that	at, if found guilty of raggin	g, my ward is	liable for punis	hment	accordir	g to	clau	se 9.1	1 of th
regula	tions, without prejudic	ce to any other criminal action	on that may be	taken against m	y ward	under a	ny pe	enal lo	ow or	any la
for the	time being in force.									
6.	I hereby declare th	at my ward has not been ex	spelled or deba	rred from admis	sion in	any inst	itutic	n in th	ne cou	untry o
accou	nt of being found guilt	ty of abetting or being part of	of a conspiracy	to promote, rag	ging a	nd furthe	r affi	rm th	at in c	ase th
declar	ation is found to be ur	ntrue, the admission of my v	vard is liable to	be cancelled.						
Daalas	and note		The state of the s							
Deciai	red this	dayof	month of_		ye	ear.				
					Si	gnature o	of de	poner	nt	
				Nam						
				Addr Teler		/ Mobile	No:			
		7	ERIFICATION	, 515	3110110	moone				
	Verified that the co	ntents of this affidavit are tr	ue to the best o	of my knowledge	and n	o part of	the	affida	vit is f	alse
and no		ealed or misstated therein.		,		- pair o				
Verifie	d at (Place)	on this the (day) of		(month)	(year) 20	1			_,
	×									
					Sig	gnature o	of de	poner	nt .	
Solem	nly affirmed and signe	ed in my presence on this th	e	(day) of		(mont	h)20		(vear	-)

OATH COMMISSIONER

APPENDIX - C AFFIDAVIT BY THE STUDENT (on 10/- Non-Judicial stamp papers)

*,			
S/0), D/O ofMr. /Mrs	*	d
Re	sident of		3
1.	Do hereby solemnly affirm and o	declare as under:	
2.	That I am a citizen of India.		
3.	That I have completed 17 years of age on	of age on/	will be completing 17 years
4.	That, I am joining as a student o Institute of Medical Sciences (AI		Hons) Paramedical at All India
5.	That I have gone through the Directives for Ragging and A Bhubaneswar Office Order on students of AIIMS.	contents and fully underst Anti-Ragging Measures in a	accordance with the AIIMS,
6.	 I hereby solemnly affirm that: I will not indulge or involve under the definition of raggi I will not participate in or ab 	ng. et or propagate ragging in an	
7.	I will not hurt anyone physic student. I have fully understood that, if foutside AIIMS campus. I may be Directives mentioned above an responsible and shall not claim?	found indulging or guilty of a e punished as per the provision and /or as per the law in for	ons of the AIIMS Regulations/
			Deponent
		$\sigma_{\rm p}$	Signature of Parent
VE	RIFICATION: verified at	on this	day of2020.
Th	at the above affidavit is true and o	correct.	
Na	me:	Address & Contact No.:	Deponent

Signature of Parent

APPENDIX - D

DECLARATION BY THE CANDIDATE

1,		- +	
Son/Daughter of Sh			
Village/Town/City			
District			
State	her	reby declare that I belong to the G	overnment of India for
declared that I do not	belong to person	6012/2293.Estt. (SCT) dated)/ na / section (Creamy Layer) mention Memorandum dated 08-09-1993.	08.09.1993. It is also oned in column 3 of the
		Name:	
		Signature of the Candidate:	
		Address:	
			G C

APPENDIX - E

UNDERTAKING BY THE CANDIDATE

<u> </u>	
S/O, D/O of Mr./Mrs	
have passed MBBS Entrance Exam	ination held on
Sheet & Certificate and Scheduled	nal Certificates (i.e 10 th Passed/Age Proof, 12 th Passed Marks Caste/Scheduled Tribe (SC/ST) Other Backward Classes(OBC) und false, then my candidature may be treated as during the course.
	Name:
	Signature of the candidate:
•	Address:

PROFORMA FOR SCHEDULED CASTE AND SCHEDULED TRIBE CERTIFICATE

Form of certificate as prescribed in M.H.A., O.M., No. 42/21/49-N.G.S. dated the 28.1.1952, as revised in Dept. of Per- & A.R. letter No. 36012/6/76-Est. (S.CT), dated the 29.10.1977, to be produced by candidate belonging to a Scheduled Caste or a Scheduled Tribe in support of his/her claim.

CASTE CERTIFICATE

This is to certify that Shri/Smt./Kum.* -----of village/town*------of the State/Union Territory* ------belongs to the ------Caste/ Tribe which is recognized as a Scheduled Caste/Scheduled Tribe*under:

- The Constitution (Scheduled Caste) Order, 1950
- The Constitution (Scheduled Tribe) Order, 1950
- The Constitution (Scheduled Caste) (Union Territories) Order,1951
- The Constitution (Scheduled Tribe) (Union Territories) Order,1951
- 1. (as amended by the Scheduled Caste and Scheduled Tribe Lists (Modification) order, 1956, the Bombay Reorganization Act, 1960, the Punjab Re-organization Act, 1966, the State of Himachal Pradesh Act, 1970 the North Eastern Areas (Re-organization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders, (Amendment) Act, 1976).
 - The Constitution (Jammu and Kashmir) Scheduled Caste Order, 1956.
 - The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959.
 - The Constitution (Dadra and Nagar Haveli) Scheduled Caste Order, 1962.
 - The Constitution (Dadra and Nagar Haveli) Scheduled Tribes, Order, 1962.
 - The Constitution (Puducherry) Scheduled Caste Order, 1964
 - The Constitution (Uttar Pradesh) Scheduled Tribes, Order, 1967.
 - · The Constitution (Goa, Daman & Diu) Scheduled Caste Order, 1968.
 - The Constitution (Goa, Daman & Diu) Scheduled Tribes, Order, 1968.
 - The Constitution (Nagaland) Scheduled Tribes Order, 1970.
 - The Constitution (Sikkim) Scheduled Caste Order, 1978.
 - The Constitution (Sikkim) Scheduled Tribes Order, 1978.

2. Applicable in the case of Scheduled Caste/Sch	nedule Tribe perso	ons who have	migrated	from one State	Union
Territory Administration:			•	,	
This certificate is issued on the basis of the Sche	m* the State/Union T	of village/to erritory*	wn*	who belong	s to the
Territory*issued by the	ed as a Scheduled	d Caste/Sched	duled Trib	e* in the State/L	Inion
Territory*issued by the	(name of	prescribed at	uthority)	vide their No	
3. Shri*/Smt.*/Kum*and/or h	nis/her* family ord	linary reside (s) in villa	ze/town*	of
the State/Union Territory of			endores a completo		91
Signature					
PlaceState/Union Territory	** Designat	ion			
Date (With seal of Office)	•				
* Please delete the words which are not appl	licable.				
N					

- Please quote specific Presidential Order.
- Delete the paragraph which is not applicable.
- ** Should be signed by the Authorities empowered to issue Scheduled Caste/Scheduled Tribe certificates as specified above.

APPENDIX- 9

PROFORMA FOR OTHER BACKWARD CLASS (OBC-NCL) CERTIFICATE

(Certificate to be produced by Other Backward Class applying for admission to Central Educational Institute (CEIS) under the Government of India)

Shri/I	Drof Village/TownDistrict/Divisionin the
State	belongs to theCommunity which is recognized as a backward class under:
(i)	Resolution No. 12011/68/93-BCC(C) dated 10/09/93 published in the Gazette of India Extraordinary part I Section I
9	No. 186 dated 13/09/93.
ii)	Resolution No. 12011/9/94-BCC dated 19/10/94 published in the Gazette of India Extraordinary part I Section I No. 163 dated 20/10/94.
iii)	Resolution No. 12011/7/95-BCC dated 24/05/95 published in the Gazette of India Extraordinary part I Section I No. 88 dated 25/05/95.
iv)	Resolution No. 12011/96/94-BCC dated 09/03/96.
v)	Resolution No. 12011/44/96-BCC dated 06/12/96 published in the Gazette of India Extraordinary part I Section I No. 120 dated 11/12/96.
vi)	Resolution No. 12011/13/97-BCC dated 03/12/97.
vii)	Resolution No. 12011/99/94-BCC dated 11/12/97.
viii)	Resolution No. 12011/68/98-BCC dated 27/10/99.
ix)	Resolution No. 12011/88/98-BCC dated 06/12/99 published in the Gazette of India Extraordinary part I Section I No. 270 dated 06/12/99.
c)	Resolution No. 12011/36/99-BCC dated 04/04/2000 published in the Gazette of India Extraordinary part I Section I No. 71 dated 04/04/2004.
ĸi)	Resolution No. 12011/44/99-BCC dated 21/09/2000 published in the Gazette of India Extraordinary part I Section I No. 210 dated 21/09/2000.
kii)	Resolution No. 12015/09/2000-BCC dated 06/09/2001.
dii)	Resolution No. 12011/01/2001-BCC dated 19/06/2003.
(iv)	Resolution No. 12011/04/2002-BCC dated 13/01/2004.
(v)	Resolution No. 12011/09/2004-BCC dated 16/01/2006 published in the Gazette of India Extraordinary part I Section I No. 210 dated 16/01/2006.
xvi)	Resolution No. 20012/129/2009/-BC-II dated 04/03/2014 published in the Gazette of India Extraordinary Part I section I no. 63 dated 04/03/2014.
hri/S	mt./Kumand/or his family ordinarily reside(s) in the
)istri	ct/Division ofState.
his is sched 18/09 Sover	s also to certify that he/she does not belong to the persons/section (creamy layer) mentioned in Column 3 of the uled to the Government of India: Department of Personnel & Training O.M. No. 36012/22/93-Estt. (SCT) dated /93 which is modified vide OM No. 36033/3/2004 Estt. (Res.) dated 09.03.2004 or the latest notification of the nment of India.
ated	
	t Magistrate/Competent Authority Seal
OTE)	The Term Ordinarily used here will have the same meaning as in Section 20 of the Representation of the People
d	Act, 1950.
)	The authorities competent to issue Caste Certificates are indicated below:
	District Magistrate/Additional Magistrate/Ist Class Stipendiary Magistrate/Sub-Divisional Magistrate/Taluk Magistrate/Executive Magistrate/Extra Assistant Commissioner (not below the rank of 1st Class Stipendiar Magistate.)
J	Chief Presidency Magistrate/Additional Chief presidency Magistrate/Presidency magistrate.
ī)	Revenue Officer not below the rank of Tehsildar.
u)	Sub-Divisional Officer of the area where the candidate and/or his family resides.

7

	Government of
(Name & Address of the authority issuing the certificate)

(Name	w Addies of the a	dillotty issuing	ine ceruncar	e)	
INCOME & ASSEST CE SECTIONS	RTIFICATE TO E	BE PRODUCED	BY ECONO	OMICALLY	WEAKER
Certificate No	*		Date: _		· · · · · · · · · · · · · · · · · · ·
	VALID FOR TH	E YEAR			
Post Of Pin Economically Weaker Secti lakh (Rupees Eight Lakh of possess any of the following I. 5 acres of agricultura II. Residential flat of 10 IV. Residential plot of 20 IV. Residential plot of 20	ons, since the grosonly) for the financi assets***; alland and above; 00 sq. ft. and above; 00 sq. yards and abo	s annual income al year ve in notified mu	* of his/her fa His/her fa nicipalities;	amily "** is b amily does	pelow Rs. 8 not own or
2. Shri/Smt./Kumarirecognized as a Scheduled	Caste, Scheduled Tr	belongs ibe and Other Ba	to theackward Class	_ caste w es (Central l	hich is not List)
			re with seal of o ame		
Recent Passport size attested photograph of the applicant				a , e	
			- a		
		•			

^{*}Note1:. Income covered all sources i.e. salary, agriculture, business, profession, etc.

^{**}Note 2:The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

^{***}Note 3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.