Government of Karnataka

Kodagu Institute of Medical Sciences, Madikeri, Kodagu District, Karnataka

ADMISSION BROCHURE FOR 1ST MBBS 2020-21

Phone: 08272 298220 Website: www.kimskodagu.kar.nic.in E-mail: directormckodagu@gmail.com

Instructions to the candidates taking admissions for 1st M.B.B.S course at Kodagu Institute of Medical Sciences, Madikeri (KoIMS, Madikeri) allotted through Karnataka Examinations Authority/Medical Counseling Committee (AIQ), for the academic year 2020-21.

(Please read the instructions carefully for a quick and smooth completion of the admission process)

1) KoIMS, Madikeri, is an autonomous institution of the Government of Karnataka. Admissions are made purely on the basis of merit in the qualifying exam. Out of 150 seats, 85 % seats are allotted by the Karnataka Examinations Authority(Karnataka) and 15% by the Medical Counseling Committee (AIQ). **No management seats are available in KoIMS, Madikeri.**

2) To complete the admission procedure, candidates must report at the college office of KoIMS, Madikeri, at 10:00 AM, on or before the date mentioned on their selection letter issued by Karnataka Examinations Authority (KEA)/Medical Counseling Committee (MCC) 2020.

3) It is mandatory for the candidate to be accompanied by either a parent/guardian at the time of admission as signatures of the parent/guardian are required for documents.

4) The working hours of the college office, are from 10:00 AM to 1:30 PM & 2:15 PM to 5:30 PM on all days except Sundays, 2nd and 4th Saturdays and Government Holidays.

5) The completion of admission process is likely to take 2 working days. The candidates are instructed to come prepared accordingly.

6) The candidates are instructed to get the exact number of photocopies of all the mentioned documents and are also requested to keep extra copy/copies with themselves, as all the Original documents will be submitted to the University.

7) The candidates are instructed to download the application forms provided below **(Page 12 to Page 17)** and fill the same in his/her handwriting neatly & legibly in blue/black pen in **Block Letters only**. **The completed forms have to be submitted at the college office during the time of admission.** Avoid overwriting, striking or erasing in the forms. Please take sufficient time and care while filling up the applications, as incorrect/incomplete forms will only delay the admission process. **(Print outs to be taken in A4 size paper – 21cms x 29.7cms only)**

8) The college will not provide any forms/formats/photocopies in the college, as it can be downloaded from the college website. All filled forms, formats, photocopies have to be kept ready by the candidates before coming for the admission process.

9) The candidates are informed to submit all the required original certificates at the college office during the time of admission along with 3 sets of **attested photocopies** (**attestation by either a gazetted officer or Notary**) of the same documents.

10) The original documents and attested photocopies of the same, have to be mandatorily arranged in the prescribed order (**as per the checklist**) and then submitted, to ensure a quick completion of admission process.

11) Candidates are instructed to refer to NMC website www.nmc.org.in regarding terms and conditions relating to ragging. Raging in any form is punishable by law. https://www.nmc.org.in/rules-regulations/prevention-of-ragging-regulation-2009 **The prescribed college fees must be paid by either cash or DD (DD drawn in favour of Director, Kodagu Institute of Medical Sciences, payable at SBI town branch, Madikeri) via challan only, at State Bank of India, Sangeetha Complex, Opposite KSRTC depot, General Thimayya Road, Madikeri and institute copy of the challan has to be submitted at the college office**.

Each candidate must bring with him/her the following original certificates/documents compulsorily along with 3 sets of attested photocopies (attestation should be done by a gazetted officer or Notary only).

Individual soft copies (scanned) of all the below original documents have to be provided in a CD/DVD/Pendrive in pdf format of size less than 200 kb. Name the soft copy of the documents appropriately.
Photograph should be scanned in jpg format of size less than 50 kb CD/DVD/Pendrive.

Sl. No	Particulars of the required Document
1	4 identical recent passport size photographs (taken within last one month). **Name and date of birth of the candidate to be written at the back of each photograph clearly and legibly.**
2	Requisition letter addressed to the Director & Dean/Principal, KoIMS Madikeri, requesting for M.B.B.S admission (download and print format, **no photocopies required**).
3	**Original challan for having paid the prescribed college fees at SBI, Sangeetha Complex, Opposite KSRTC depot, General Thimayya Road, Madikeri. (3 attested photocopies of the same are also required)**
4	**Filled** Admission form and Admission Checklist (**no photocopies required**)
5	Original admission order to professional colleges by KEA for state quota /Provisional Allotment Letter by MCC for AIQ - 2019 (**plus 3 attested photocopies**)
6	Original challan for having paid fees at KEA - **not applicable for AIQ.** (**plus 3 attested photocopies**)
7	NEET (UG) 2019 result sheet (**plus 3 attested photocopies**)
8	Original of provisional admit card for NEET UG-2019 (Hall Ticket) (**plus 3 attested photocopies**)
9	Original Eligibility Certificates for the candidates claiming reservation under Hyderabad-Karnataka Region (Article - 371j) – (**for KEA candidates only**) (**plus 3 attested photocopies**)
10	Eligible NEET candidates belonging to SC/ST/CAT-I, 2A, 2B, 3A & 3B category who have scored less than 50% and more than 40% marks in 10+2 (PCB) examination, have to submit Original Caste Certificates in the Regional language & English language, which is required for submission to MCI, New Delhi. (**For KEA candidates only**). (**plus 3 attested photocopies**)
11	**Regional language & English translated Caste Certificates from eligible NEET candidates to be submitted during admission by SC/ST/CAT-I, 2A, 2B, 3A & 3B candidates who scored less than 50% and more than 40% marks in Entrance Examination required for submission to MCI, New Delhi. (For KEA candidates). - 3 attested photocopies**
12	Original of 10th marks card / 10th Passing Certificate (**plus 3 attested photocopies**)
13	Original of 12th marks card / 12th Passing Certificate (**plus 3 attested photocopies**)
14	Original of Transfer certificate from the institution last studied. (**plus 3 attested photocopies**)
15	Original of Study/character/conduct certificate from the institute last attended (**plus 3 attested photocopies**)
16	Original of Kannada Medium/Rural Study Certificate (if applicable)(**plus 3 attested photocopies**)
17	Original of Latest Caste Certificate, (if applicable) (**plus 3 attested photocopies**) [**date of issue should not be more than 5 years**]
18	Original of Income Certificate, (if applicable) (**plus 3 attested photocopies**) [**date of issue should not be more than 6 months**]
19	**Original of Eligibility Certificate issued by Rajiv Gandhi University of Health Sciences, (RGUHS), Bangalore OR Acknowledgement for having applied for Eligibility Certificate through online from Rajiv Gandhi University of Health Sciences, (RGUHS), Bangalore.** **Refer website for applying EC through online mode:** **www.rguhs.ac.in (for all candidates other than Karnataka PU board) (plus 3 attested photocopies)**
20	Original of Domicile certificate (Nativity certificate) (for Candidates from other than Karnataka State). (**plus 3 attested photocopies**)
21	Original of Migration certificate from the respective board if candidate has passed 12th standard from any board other than Karnataka PU Board. (**plus 3 attested photocopies**)

22	Physical fitness certificate with **blood grouping** (From any govt. hospital) (**plus 3 attested photocopies**)
23	The candidate if selected for MBBS course under Defense, Jammu & Kashmir, NCC, PH quota, etc; shall submit the concerned certificate issued from competent authorities. (**plus 3 attested photocopies**)
24	3 attested photocopies of candidates'Adhaar card (For purpose of scholarships, if any)
25	3 attested photocopies of candidates' passbook (For purpose of scholarships, if any)
26	**AFFIDAVIT- I** **(**UNDERTAKING MBBS DEGREE PROGRAMME AS PER RGUHS CURRICULUM - Proforma**)** **Bond value: Rs. 50/- e-stamp/bond; (stamp paper has to be from Govt. of Karnataka only)** **1st Party: Parents/Guardians' name** **2nd Party: KoIMS, Madikeri (photocopies not required)**
27	**AFFIDAVIT –II- BY THE CANDIDATE (**Anti ragging concern- Proforma **)** **Bond value: Rs. 20/- e-stamp/bond; (stamp paper has to be from Govt. of Karnataka only)** **1st Party: Candidate's name** **2nd Party: KoIMS, Madikeri. (photocopies not required)**
28	**AFFIDAVIT –III- BY THE PARENT/ GUARDIAN (**Anti ragging concern- Proforma **)** **Bond value: Rs. 20/- e-stamp/bond; (stamp paper has to be from Govt. of Karnataka only)** **1st Party: Parent's/ Guardian's Name** **2nd Party: KoIMS, Madikeri. - (photocopies not required)**
29	**AFFIDAVIT –IV** **(**Rural service for MBBS candidates - Proforma) **Bond value: Rs. 100/- e-stamp/bond; (stamp paper has to be from Govt. of Karnataka only)** **1st Party: Candidate's Name** **2nd Party: Government of Karnataka - (photocopies not required)**
30	**AFFIDAVIT – V** **(**Hostel - Proforma) **Bond value: Rs. 50/- e-stamp/bond; (stamp paper has to be from Govt. of Karnataka only)** **1st party :- Candidate Name** **2nd party:-KoIMS, Madikeri. - (photocopies not required)**
31	Requisition letter addressed to the Director & Dean/Principal, KoIMS Madikeri, requesting admission to the hostel (download and print format –**photocopies not required**). **Note: Admission to the hostels is subject to availability. Admission to the college does not guarantee automatic admission to the hostel. Any violation of the hostel rules will result in expulsion**.
32	One plastic document envelope (folders of Size 30 cms x 40 cms for storing original certificates/documents). Name & address of the candidate to be mentioned on the envelope along with a passport size photograph.

**Note: Please ensure details on the affidavits (name of the 1st party and 2nd party, value of the stamp paper are according to what is prescribed. Please purchase stamp paper from Govt. of Karnataka Only. If Affidavits are incorrect, admission process cannot be completed and will cause unnecessary delay and additional work.)

Individual soft copies (scanned) of all the original documents have to be provided in a CD/DVD/Pendrive in pdf format of size less than 200 kb. Name the soft copy of the documents appropriately.

Photograph should be scanned in jpg format of size less than 50 kb CD/DVD/Pendrive.

AFFIDAVIT- I – By the Parent/Guardian

Bond value: Rs. 50/- e-stamp/bond;

1st Party: Parents' name **2nd Party:** KoIMS, Madikeri

UNDERTAKING MBBS DEGREE PROGRAMME AS PER RGUHS CURRICULUM

I_____ Son/Daughter of _____ (herein after called the Natural Guardian of the Candidate) hereby give an undertaking that on admission to I MBBS at KODAGU INSTITUTE OF MEDICAL SCIENCES, MADIKERI, KODAGU DISTRICT, during the year 2020-21, I have read the rule No.11of the ordinance of Governing M.B.B.S. Degree Program of Rajiv Gandhi University of Health Sciences, Bangalore, vide Notification No. ACA/BOS-27/97-98, dated: 24.03.1998, and I shall abide / by the ordinance. That no candidate shall be permitted to join Phase-II (Para Clinical & Clinical) Group of subjects until he / she passes in the Phase-I (pre-clinical) subject for which he / she will be permitted not more than four chances (Actual Examination) provided four chances are completed within three years from the date of enrolment.

Signature of the Parents with full address

Witness:

1)	**Name**	**Address**	**Signature**	**Date**
2)	**Name**	**Address**	**Signature**	**Date**

SEAL & SIGNATURE OF NOTARY

AFFIDAVIT –II- BY THE CANDIDATE

Anti ragging concern- Proforma

Bond value: Rs. 20/- e-stamp/bond;

1st Party: Candidate's name 2nd Party: KoIMS, Madikeri.

1. I, _____ (full name of the candidate), S/o / D/o Mr./Mrs./Ms. _____ (parents' name) with NEET Roll number_____ having been admitted to KODAGU INSTITUTE OF MEDICAL SCIENCES, MADIKERI, have read the MCI Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understand the provisions contained in the said Regulations.
2. I have, in particular, read and understood clause 3 of the Regulations and am aware as to what constitutes ragging.
3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware or the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations. b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
6. I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared on the _____ (day) of _____ (month) of _____ (year).

Signature of deponent

Name:

Address:

Mobile No. :

-Continued-

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein. Verified at _____ (place) on the _____ (day) of _____ (month), _____ (year). _____

Signature of deponent

Solemnly affirmed and signed in my presence on the _____ (day) of _____ (month), _____ (year) after reading the contents of this affidavit.

OATH COMMISSIONER

AFFIDAVIT –III- BY THE PARENT/ GUARDIAN

Anti ragging concern- Proforma

Bond value: Rs. 20/- e-stamp/bond;

1st Party: Parent's/ Guardian's Name 2nd Party: KoIMS, Madikeri.

1. I, Mr./Mrs./Ms._____ (full name of parent /guardian) father /mother /guardian of, _____ (full name of candidate) with NEET Roll number_____, having been admitted to KODAGU INSTITUTE OF MEDICAL SCIENCES, MADIKERI, have read the MCI Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understand the provisions contained in the said Regulations.
2. I have, in particular, read and understood clause 3 of the Regulations and am aware as to what constitutes ragging.
3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware or the penal and administrative action that is liable to be taken against my son/daughter in case he/she am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that a) my son/daughter will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations. b) My son/daughter will not participate in or abet or propagate through any act of commission or omission that may be constituted as tagging under clause 3 of the Regulations.
5. I hereby affirm that, if found guilty of ragging, my son/daughter is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against him/her under any penal law or any law for the time being in force.
6. I hereby declare that my son/daughter has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging and further affirm that, in case the declaration is found to be untrue, I am aware that his/her admission is liable to be cancelled.

Declared on the _____ (day) of _____ (month) of _____ (year).

Signature of deponent

Name:

Address:

Mobile No. :

-Continued-

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on the _____ (day) of _____ (month), _____ (year).

Signature of deponent

Solemnly affirmed and signed in my presence on the _____ (day) of _____ (month), _____ (year) after reading the contents of this affidavit.

OATH COMMISSIONER

AFFIDAVIT –IV – by the candidate

Rural service for MBBS candidates

Bond value: Rs. 100/- e-stamp/bond

1st Party: Candidate's Name 2nd Party: Government of Karnataka

I, Mr. / Ms …… S/o. / D/o…… a candidate with 'NEET–2020' Roll No…… residing at …… ……. ……. …… …… …… … … …… …… … have on my own volition allotted a MBBS seat on ……..…….....(Date) In KODAGU INSTITUTE OF MEDICAL SCIENCES, MADIKERI do hereby undertake as follows:

In accordance with the Amendment to Rule 11 of the Karnataka Selection of Candidates for Admission to M.B.B.S seats in Professional Educational Institutions Rules, 2006, vide Government Notification – 1. No. HFW 79 RGU 2011 dated 17-07-2017 and Amendment act 2017 dated 06-07-2017, I am prepared on completion of the course to serve in any Primary Health Center or Primary Health Unit situated in Rural Areas in the State of Karnataka for a minimum period of ONE year and I will abide to the rules and regulation of Government of Karnataka.

What is stated above is true and correct and I and my parent/guardian hereby undertake to act accordingly.

Signature of the Candidate **Signature of the Parent (Father / Mother/guardian)**

Name of the candidate **Name of the Father/mother/guardian**

Date……..

Place…….

Witness (Signature & Name) :

Affidavit – V for Hostel – by the candidate

Bond value: Rs. 50/- e-stamp/bond

1st party :- Candidate's Name 2nd party:-KoIMS, Madikeri.

To,

The Chief Warden,
Girls and Boys Hostel,
KoIMS, Madikeri

DECLARATION

I Mr./Ms ----------, daughter/ son of ----------, solemnly declare that I agree to abide by the girls and boys hostel rules and regulations and maintain good conduct during my stay in the college and hostel. I hereby undertake to take food in the mess attached to the hostel. If I go against the rules and regulation of the hostel and the college authorities, I understand that I may be expelled from the hostel without notice. Further, I understand that ragging is strictly prohibited in the hostel and college premises. I solemnly declare that, I will not directly or indirectly indulge in ragging. If I am caught for involving myself in ragging activities directly or indirectly legal action may be taken against me as deemed fit or as directed by the competent authorities.

Signature of the candidate

Name of the candidate

I Mr./Mrs./Ms/Dr. ----------, residing at ----------am the father/mother/husband/guardian of Mr./Ms..----------and solemnly declare that the girls and boys hostel admission procedure and fee structure has been explained to me prior to admission and agree to take admission as per the hostel rules and regulation. Further, I declare that my ward will abide with the hostel rules and regulations. If my ward goes against the rules and regulations of the hostel or gets involved with any kind of misbehavior, disciplinary action may be taken against her/him as decided by the college authorities.

Place **Signature of the parent/guardian**

Date **Name of the parent/guardian**

APPLICATION FOR THE ADMISSION OF 1st M.B.B.S CANDIDATES

To

The Director & Dean,

KoIMS, Madikeri.

Date :

Place: Madikeri

Sir,

Sub:- Application for admission to I Year MBBS course at KoIMS, Madikeri allotted through NEET – reg.

With reference to the above subject, I, Mr/ Ms. _____ S/o, D/o._____, bearing NEET Roll No._____Rank No._____ belonging to _____ category have been allotted MBBS seat at Kodagu Institute of Medical Sciences, Madikeri under _____ category. I am herewith enclosing the original challan for having paid college fees along with necessary original documents.

Hence, I request your kind self to admit me at KoIMS, Madikeri for I MBBS course. Admission taken is at my own request. I am aware that my admission is subject to the approval of the concerned competent authorities for which KoIMS, Madikeri will not be held responsible for any consequences / objections that may arise in future with regard to my admission. I have not furnished any false information.

Yours faithfully,

(Signature of the candidate)

(Signature of the parent / Guardian)

Place : Madikeri

Date :

Application for admission to the College Hostel

From

……..

……..

……..

……..

To

The Director and Dean

KoIMS,Madikeri

Respected Sir,

Subject: Requisition for hostel facility.

I Mr./Ms……S/o/D/o……...……..... with NEET Roll No……..have joined I MBBS for the academic year 2020-21 at Kodagu Institute of Medical Sciences, Madikeri, through NEET (KEA/AIQ).

I request you to provide me accommodation in the college hostel. Kindly oblige and do the needful.

Thanking You,

Yours Sincerely

Signature:……

Name :……

Place:

Date:

Note: As per the MCI requirement, hostel facility is to be provided only for 60% of the Students. https://old.mciindia.org/for-colleges/LOI,LOP,Renewal.pdf

The college will accommodate candidates into the hostel on a first come first serve basis. The right to provide admission to the college hostel is the sole discretion of the hostel Committee.

Admission Form

Recent passport size photo with self attestation

(Details to be entered in block letters only)

NEET Roll No*.
Admission Order No. (for KEA)*:
CET No. (for KEA)*:

1	Name (**As per SSLC / 10th std. records**)*	
2	Gender*	
3	Date of Birth*	
4	Father's Name (**As per SSLC / 10th std. records**)*	
5	Mother's Name (**As per SSLC / 10th std. records**)*	
6	Permanent Address* Communication Address*: Candidates' Phone number*: (**please furnish only the candidates contact number**) Candidates' email id*:	
7	Place of Birth*	
8	Nationality*	
9	Religion*	
10	Caste*	
11	Candidates' Category*	
12	Category under which seat is allotted*	
13	Mother tongue*	
14	Seat type (KEA/AIQ)*	
15	NEET All India Rank*	
16	Name of II PUC / 12th board and name of the college*	
17	Roll No of II PUC / 12th std*	
18	Date of passing II PUC / 12th *	
19	Roll No of SSLC/10th grade exam*	

20	**Optional Subjects(PUC/12th std. marks)**	Max Marks	Marks Secured
	Physics		
	Chemistry		
	Biology		
	PCB Total		
	English		
21	NEET Roll No*		
22	NEET Registration/Application Number*		
23	NEET Marks Obtained out of 720*		
24	NEET Percentile Score*		
25	Date of Admission*		
26	Blood group*		
27	State & Native District*		
28	Urban/Rural Quota*		
29	Annual Income*		
30	Contact details In case of emergency, * (Please provide parents/Guardians' Name & Number)		
	Remarks		

Note: Fields Marked with * are mandatory

DECLARATION

All the entries made above are true to the best of my knowledge and I am directly responsible for any false information furnished.

Place: **Signature of the Candidate**

Date: **Signature of the Parent or Guardian**

==========FOR OFFICE USE ONLY==========

Verifying Officer (Name & Signature):

Place:

Date:

Admission Checklist:

(Arrange the original certificates/documents in the following order only. Do not fill this checklist as it will be filled during the admission process)

Sl. No	Type of Documents	Submitted (Yes/No)			Remarks
		Original	3 sets Attested Photocopies	Scanned Soft Copy	
1.	Requisition letter for admission to the college addressed to the Director & Dean, KoIMS, Madikeri		--------	--------	
2.	Recent identical Passport photos (4 Nos.)		--------		
3.	Copy of Fees Paid At Allotment Centre (KEA)				
4.	Copy of Fees Paid At KoIMS, Madikeri				
5.	Filled Admission Form		---------	--------	
6.	NEET admission ticket (CBSE)				
7.	KEA/AIQ Admission Order/provisional allotment letter				
8.	NEET result sheet (CBSE)				
9.	Class 10 Marks Card				
10	Class 12 Marks Card				
11	Eligibility Certificate from Rajiv Gandhi University of Health Sciences (all candidates other than Karnataka PU board)				
12	Migration Certificate (other than Karnataka PU board)				
13	Domicile Certificate (Candidates from other than Karnataka State)				
14	The candidates if selected for MBBS course under Defense, Jammu & Kashmir, NCC, PH, etc; shall submit the concerned certificate issued from competent authorities.				
15	Caste Certificate issued by the competent authority (except GM candidates)				
16	Income Certificate issued by the competent authority if available.				
17	Transfer certificate from the institution last studied.				

18	Study / Character/Conduct certificate from the institute last attended				
19	Kannada Medium/Rural Study Certificate				
20	371 J Eligibility Certificate (for Hyderabad Karnataka) if applicable.				
21	Affidavit for MBBS Degree Program as per RGUHS Curriculum (**by parent**)		--------		
22	Affidavit for Anti-ragging(**by candidate**)		--------		
23	Affidavit for Anti-ragging(**by parent**)		--------		
24	Affidavit for Rural service after completion of MBBS (**by student**)		--------		
25	Affidavit for Hostel Facility (**by student**)		--------		
26	Physical Fitness Certificate				
27	Requisition letter for hostel facility addressed to the Director & Dean, KoIMS, Madikeri		--------	--------	
28	Copy of Adhaar Card	----------			
29	Copy of Candidates' bank passbook	----------			
30	One Plastic document envelope		--------	--------	

DECLARATION

All documents and information submitted for 1st MBBS admission (2020-21) are true and correct to the best of my knowledge. I also accept that my admission to MBBS Course at this institution is provisional and subject to approval from RGUHS, Bangalore, Karnataka and MCI, New Delhi.

Place: **Signature of Candidate:**

Date: **Signature of the Parent/Guardian :**

==========FOR OFFICE USE ONLY==========

The candidate has submitted the above documents for admission to I Year MBBS course (2020-21) at KoIMS, Madikeri.

Place:

Date:

Name & Signature of the verifying official:

Fee Structure 2020-21

Sl. No	Particulars	Amount
1	Tution Fee	50000.00
2	University Registration Fee	4000.00
3	Admission to the University	2100.00
4	Helinet fee to the University	4500.00
5	Sports fee to the University	900.00
6	Student Welfare Fund to the University	450.00
7	Admission Fee to the college	400.00
8	Library Fee	1500.00
9	Magazine Fee/Literary fee	600.00
10	Identity Card Fee	125.00
11	Sports Fee to the college	1225.00
12	Laboratory Fee	500.00
13	Medical Examination fee	150.00
14	Caution Deposit	1000.00
15	Alumni Association	750.00
16	Students' Association Fee	500.00
17	Cultural Activities Fee	1500.00
18	Digital Library Fee	3500.00
19	Kannada Sangha Fee	200.00
20	Research Fee	100.00
21	Skill Laboratory Fee	1000.00
22	Foundation Course and miscellaneous Fee	2000.00
	Total	**77000.00**

Note: The prescribed college fees must be paid by either cash or DD (DD drawn in favour of Director, Kodagu Institute of Medical Sciences, payable at SBI town branch, Madikeri) via challan only, at State Bank of India, Sangeetha Complex, Opposite KSRTC depot, General Thimayya Road, Madikeri and institute copy of the challan has to be submitted at the college office.

The challan has to be collected from the college office during admission.

Fees to be paid for admission to the college hostel

Sl. No	Particulars	Amount
1	Caution Deposit (Refundable)	10000.00
2	Annual Room Rent	9000.00
	Total	19000.00

Note: The prescribed hostel fees must be paid by either cash or DD (DD drawn in favour of Director, Kodagu Institute of Medical Sciences, payable at SBI town branch, Madikeri) via challan only, at State Bank of India, Sangeetha Complex, Opposite KSRTC depot, General Thimayya Road, Madikeri and institute & hostel copy of the challan has to be submitted at the college office.
The challan has to be collected from the college office during admission.

Contact Details

PHONE : 08272 – 298220 (Office) (**10:00 AM to 5:30 PM only**)

FAX : 08272-298260

WEBSITE : http://www.kimskodagu.kar.nic.in/

EMAIL : directormckodagu@gmail.com

ADDRESS : Kodagu Institute of Medical Sciences,
Abbey Falls Road, Madikeri ,
Kodagu District, Karnataka - 571201

For more details, contact the reporting official on 7760522552 , 6360318257 KoIMS, Madikeri during working hours (10-00 AM TO 5-30 PM ONLY)

Individual soft copies (scanned) of all the original documents have to be provided in a CD/DVD/Pendrive in pdf format of size less than 200 kb. Name the soft copy of the documents appropriately.
Photograph should be scanned in jpg format of size less than 50 kb and saved in the CD/DVD/Pendrive.