



MES MEDICAL COLLEGE

PERINTHALMANNA

Palachode (P.O), Malaparamba, Kolathur (Via)

Malappuram -District, Kerala -State, Pin -679 338

Phone: 91-4 933 – 29830 0-3 03 Fax: 91-4 933 – 298304

E mail: mesmcp@gmail.com

Website: www.mesams.com

(Managed by the Muslim Educational Society Regd., Calicut)

Application No.

APPLICATION FOR ADMISSION TO MBBS DEGREE COURSE 2023-24 UNDERQUOTA

Note:

1. Please read the instructions carefully before filling the application form.
2. Fill in every column without fail. Defective and incomplete application will be rejected.
3. Use only “**BLOCK LETTERS**” to fill in the application form.

Affix Photoof
the candidate

1.	Name of the applicant (as in school certificate SSLC/CBSE 10 th)				
2.	Age & Date of Birth in Christian Era	Age	DD	MM	YYYY
3.	Nationality				
4.	Aadhar Card Number				
5.	Sex (put \surd mark in the appropriate box)	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
6.	a) Religion & Caste				
	b) Whether the candidate belongs to SC/ST/OEC? If Yes, specify the category	YES/NO		c) Blood Group :	
		CATEGORY			
	c) Whether belongs to Non-creamy layer	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
7.	a) Name of Father				
	b) Name of Mother				
	c) Occupation of Parents * (Mandatory)	Father		Mother	
	d) Annual Income of the family *(Mandatory)	Father		Mother	
8	Address for communication :Door No./House Name				
	Area/Street/Road				
	Post Office				
	State, District& Pin code				
	Mobile/Tel. No. (with STD Code)				
	Email address, if any (Student)				



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9.	Permanent Address (if different from 8 above)		
	Door No./House Name		
	Area/Street/Road		
	Post Office		
	State ,District & Pin code		
Mobile/Tel. No. (with STD Code)			
10.	State the category to which the applicant belongs	<input type="checkbox"/> An Indian citizen of Kerala origin	
		<input type="checkbox"/> A Non-Keralite Indian citizen	
11.	Name of parent/guardian with relationship		
	Address: Door No./House Name		
	Area/Street/Road		
	Post Office		
	State, District & Pin code		
	Mobile/Tel. No. (with STD Code)		
	Email address of parent		Father: Mother:
	Aadhar Number		
18.	Details of National Eligibility Cum Entrance Test – NEET (UG) 2023		
	a) Roll No.		
	b) All India Rank		
	c) Marks Obtained		
	d) Percentage Score		
	e) Percentile Score		
19.	Details of KEAM 2023		
	a) Roll No.		
	b) Rank		

DECLARATION

1. We hereby solemnly and sincerely affirm that the statements and information furnished above and in the enclosure submitted by me are true. If any of the information furnished therein is later found to be false in material particulars or in any other manner, we are aware that we are liable to criminal prosecution, besides forfeiting the right of continuance of the applicant in the MES Medical College, Perinthalmanna.

2. We undertake to submit all the required certificates in original at the time of counseling and during the admission process failing which my claim for selection shall be forfeited by the authority concerned.

Signature of Parent/Guardian of the applicant:

Signature of the applicant:

Place :

Date :



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FORM FOR MARK SHEET

Please fill in the marks obtained in the qualifying examination in this form.

Note: Please write the name of additional/optional subjects in the space provided and enter the marks. (In the case of those whose marks cannot be produced in this form, they need fill up only the Grand total row). Attested copy of mark list should be enclosed)

1.	Name of the applicant			
2.	Name of the qualifying examination passed			
3.	Month & Year of Examination			
4.	Name of University/Board			
5.	Register No. for the University/Board Examination			
6.	Name of institution last studied			
Subjects	Marks Scored		Maximum Marks	Percentage of Marks
	In figures	In words		
Part I English				
Part II – Additional Language (.....)				
Part III – Science Subjects				
Physics				
Chemistry				
Biology				
Total for PCB Subjects				
Mathematics /Biotechnology/Others				
Grand Total				

DECLARATION

I hereby solemnly and sincerely affirm that the statements and information furnished above and in the enclosure submitted by me are true. If any of the information furnished therein is later found to be false in material particulars or in any other manner, I am aware that I am liable to criminal prosecution, besides forfeiting the right of my continuance as MBBS student in the MES Medical College.

Signature of Parent/Guardian of the applicant:

Signature of the applicant:

Place :

Date :

DECLARATION

I.....
(son/daughter) of Mr.
an MBBS student of M.E.S. Medical College Perinthalmanna do hereby declare that I will abide by all the rules for general discipline, including rules for prevention of ragging, Hostel rules and Library rules now in vogue in the college and any amendment made to the said rules mentioned above from time to time. I fully understand, that if any provision of the above said rules is violated by me, the college authority are fully empowered to inflict any punishment including fine, suspension /expulsion from the College / Hostel.

Signature.....
Date.....
Name of the student.....

Counter signed by the Parent / Guardian
Name
Relationship with the student
Date

MES MEDICAL COLLEGE, PERINTHALMANNA

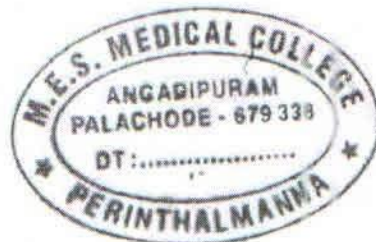
INFORMATION REGARDING THE INTIMATION OF RAGGING, IF ANY


The first year UG/PG students and their parents are informed that measures for the prevention of ragging in the institution have been strengthened further. The following acts are considered as ragging as per Kerala Prohibition of Ragging Act 10 of 1998.

'Ragging' means doing of any act, by disorderly conduct, to a student of an Educational institution, which causes or is likely to cause physical or psychological harm or raising apprehension or fear or shame or embarrassment to that student and includes (i) teasing, abusing or playing practical jokes on, or causing hurt to, such student; or (ii) asking a student to do any act or perform something which such student will not, in the ordinary course, willingly, do.

If any such activity takes place in the hostel/Campus the same may be brought to the notice of the Asst. Warden/Matron/Dean or any other teacher. If any complaint is obtained in writing from the student/parent/ or a teacher in the institution regarding the occurrence of ragging of any kind, disciplinary action as contemplated in the Act aforesaid will be initiated.

All are requested to co operate.




DEAN
M.E.S. MEDICAL COLLEGE, PERINTHALMANNA
PALACHODE P.O., (Via KOLATHUR)
MALAPPRAM DISTRICT - 679 338

DOCUMENTS TO BE SUBMITTED AT THE TIME OF ADMISSION

Candidates who get allotment shall appear before the Dean of the College and take admission at the appointed time and date in the college and remit tuition fee, admission fee and special fees for the first year. They shall also produce the following documents in original at the time of admission before the Dean of the College:

- (a) Admit card of NEET UG -2023.
- (b) Result/Score Card of NEET UG -2023.
- (c) Allotment memo & Data Sheet of KEAM 2023
- (d) Mark list at the qualifying examination.
- (e) Pass Certificate of the candidate at the qualifying examination.
- (f) Document (School Record viz: SSLC or equivalent) of the candidate to prove his/ her date of birth.
- (g) Eligibility/equivalency certificate obtained from the Kerala University of Health Sciences by candidates who have passed the qualifying examination from authorities other than the State of Kerala / CBSE / ISCE.
- (h) Course and conduct certificate from the institution last attended.
- (i) Transfer certificate (TC) from the institution last attended.
- (j) Community certificate issued by competent authority (if applicable).
- (k) Non-creamy Layer certificate issued by competent authority (if applicable)
- (l) Income certificate issued by the competent authority (if applicable).
- (m) Originals of other certificates, the copies of which are enclosed with the application form.
- (n) Document/ certificate required in proof of any benefit claimed in the application form.
- (o) TWO sets of photocopies of all the above documents including Application form.
- (p) Passport size colour photo -10 nos.
- (q) A Physical Fitness Certificate in the format given in **Annexure III** obtained from a Medical Officer in Government Service not below the rank of Assistant Medical Officer.
- (r) Undertaking in **Annexure II** to be duly notarized in the stamp paper worth of 500/- rupees.
- (s) Service Bond in the **Annexure V** to be duly notarized in the stamp paper worth of 500/- rupees
- (t) Any other document/ certificate required to be produced.

All the documents (except stamp paper, undertakings) should be scanned and to be brought in a returnable pen drive; the Size should be less than 150 KB.

Photo should be scanned- Photo requirements: - -Maximum Size: 30Kb, Image Dimension: 150W X 200H, Image Type : JPG, Back ground color : White



Run by The Muslim Educational Society (Regd.)

Malaparamba, Palachode P.O. Perinthalmanna,
Malappuram Dt., Pin - 679 338, Kerala, India
Tel 04933-298300/301 Purchase : 04933-298358
E-mail: purchase@mesams.com www.mesams.com

GST IN : 32AAATM3669D4ZQ

Registered under Societies Registration Act XXI 1860 exempted under section 10(23 C) (iv) and section 80G of the Income Tax Act 1961

OUR BANK ACCOUNT DETAILS

Name of Account : MES MEDICAL COLLEGE
Account No : 0537053000012359
Name of Bank : SOUTH INDIAN BANK
Branch : ANGADIPURAM
IFSC : SIBL0000537

More details, Please contact Accounts Department:- (No. 04933 298 355)

For any fee related queries please contact our accounts department : 04933 298355

For any admission related queries please visit our website

**: www.mesams.com
(04933-298379)**