POST GRADUATE INSTITUTE OF MEDICAL SCIENCES, NAVI MUMBAI

Instruction Manual for PG Admission Process 2026



WELCOME

Contact Details for Query : (Between 11.00 to 4.30 PM ONLY)

1. For any query, please call during11:00 AM to 4:30 PM
   Landline Number: 02227701808 Ext.: (407)
2. Official Email ID: pgimsnavimumbai@gmail.com
3. Official Website: www.nmmcpgims.in
4. Reporting Time: 10.00 am To 1.00 pm
5. Office Address: Maasaheb Meenatai Thakre Hospital, Admin Wing, 1st Floor, Park Avenue Road, Kamaladevi Birajdar Marg, Plot No. 11/6 & 11/7, Sector 15, Nerul (E), Navi Mumbai, Maharashtra - 400706

DO NOT CALL ON THE PERSONAL NUMBER OF THEDEAN/ NODAL OFFICER notified on the MCC website; It is given for the administrative use by MCC/DMER ONLY

Note: Parents are not allowed in office space at the time of admission

POST GRADUATE-ADMISSIONS PROCESS

POST GRADUATE INSTITUTE OF MEDICAL SCIENCES, NAVI MUMBAI

(All India Quota/ State Quota/ In Service Quota)

All students allotted PG seat at Post Graduate Institute of Medical Sciences, Navi Mumbai (Maharashtra) should follow below mentioned instructions for PG admission:

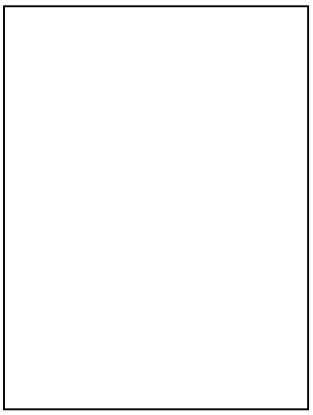
1. **Download & print this PDF file. READ CAREFULLY ALL DETAILS**
2. **Student should report to the college in the morning for getting done the admission process on the same day.**
3. **Student should report personally for admission/admission cancellation in case of up gradation. PROXY will not be allowed for admission process/ Cancellation of admission.**
4. **Print and fill 2 copies of Application Form.**
5. **Print and fill 2 copies Scrutiny Form.**
6. **Print and fill 1 copy of Candidate information.**
7. **Print and fill 1 copy of Medical Fitness in the prescribed format ONLY.**
8. All **original documents** enlisted in the scrutiny form will be compulsorily required for admission. Additionally, student should submit **2 sets of SELF ATTESTED photo copies** of all original documents.
9. All original Documents **individually SCANNED in PDF format only** will be compulsorily required during admission. Student should scan document properly through computer scanner(Size 500kb only). **Please don't use mobile scanner for scanning documents.** Individual Original Documents should be scanned and renamed properly.

   e.g. Nationality certificate after scanning should be renamed as **Nationality-Name of Student.**

   Prepare Folder and rename it with Name of the student, keep all scan documents in this folder for submission during admission. **Scan documents will be accepted only in Pen Drive. And also scan the DD in pdf file and mail us to email id - pgimsnavimumbai@gmail.com**
10. Fees: Demand draft (DD) of complete fees will be required during admission process. Kindly note that DD should NOT have any errors/spelling mistakes in the name of DD as desired. **Error/spelling will not be acceptable, such DD will be rejected**. **No cash/online transactions will be acceptable.**
11. Other Letters if required will be taken at the time of admission (within the rules thereof)
12. Submit Recent Passport size photos(3copies).

13. The institute is responsible for only admission of student in respective Quota. We will not be available to guide any students for further rounds or rules & regulations of All India/State/In Service Quota. 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's.
14. As per the information brochure issued by the State commissioner of Maharashtra for the current academic year, under the clause of Penalty & Bond, non-completion of Junior residency tenure & for lapse of seat, or admission cancellation after cut-off date, the student must pay an amount of Rs.20,00,000/- (twenty lacs). In such case, returning of original documents will be done only after receipt of penalty amount. The deposited fees will also be non-refundable.
15. **Kindly note…. Admission Process requires verification and approval. No student will be given Joining letters urgently.**
16. **For any query, please call during11:00AMto4:30PM.**
    Landline number:
    Direct Number: 02227701808 Ext.:(407)
    Don't call on personal Mobile number of Dean available on mcc website, it is given for administrative use by MCC/DMER ONLY.

APPLICATIONFORM



Student's Name: .....
Address (In capital): .....
.....
..... Phone No (Res.): .....
Mobile No: .....
Email Id:- .....
Date: .....

To,
The Dean,
Post Graduate Institute of Medical Sciences,
Navi Mumbai.

Sub: Joining asJR-1 in subject of .....
Through NEET PG All India/ State Quota /In Service Quota seat allotment.

Ref: NEET PG Allotment Letter/ List .....Dated: .....

Respected Sir/Madam,

I the Undersigned Dr .....(Full name in Capital) have been selected for the post graduate degree/ diploma course in the subject of..... .....as per the allotment letter/list available on official website Dated.....

Kindly enroll meinyourcollegeasJR-1in the subject of .....
For the academic year.....

I have informed that, I must submit Service Bond of 1Year to Maharashtra Govt. Once my admission is confirmed in this institute, other wise I will have to pay penalty of Rs.50,00,000/-(Fifty Lac only) as per the rules PG Admission regulations of State of Maharashtra and changes if any issued from time to time in the respective academic year of admission.

Thanking You.

Yours Sincerely,

(Dr .....)

PG ADMISSION–2026-27

SCRUTINY FORM

Name of the Student -_____Date:- / /2026

Admission Quota - _____Rank - _____

Sr. No.	Essential Documents Required	Yes/No
1	Aadhar Card (Xerox Copy)	
2	Nationality Certificate or Valid Indian Passport	
3	Domicile Certificate	
4	NEET PG Mark Sheet	
5	NEET PG Admit Card	
6	NEET PG Allotment Letter/List	
7	MBBS Passing Certificate	
8	MBBS Degree Certificate	
9	Internship Completion Certificate	
10	Registration Certificate of MBBS from State medical council/ MCI	
11	Caste Certificate(If applicable)	
12	Cast Validity (If applicable) Caste Validity format attached Below if candidate is from outside Maharashtra (Annexure E)	
13	Non-Creamy layer Certificate valid up to31.03.2026 (NCL) (If applicable)	
14	MBBS College Leaving Certificate (T.C.) OR Continuation letter if student is from same college (If not attached Submit the same in 15 Days of admission)	
15	Gazette for Change in Name (If applicable)	
16	Migration Certificate issued by respective University(If applicable) (If not attached Submit the same in 15 Days of admission)	
17	Self-Education Gap Certificate after completion of Internship (If applicable)	
18	Medical Fitness Certificate (in prescribed format only)	
19	Physical Handicapped Certificate from authorized agencies ONLY(If applicable)	
20	For state quota seat-Bond Release Certificate/ Bond Break payment Govt. receipt (if applicable)	
21	1) NOC 2) Reliving letter 3) Deputation Certificate 4) University Approval Certificate for teacher in concerned subject 5)Experience Certificate from health Department for In service state quota students.(This will be Compulsory for In-service candidates)	
22	Other letter if any required will be taken during admission	
23	Orphan Certificate (If Applicable)	
24	Personal Information Certificate	
25	Retention Form(State Quota)	
26	Cancellation Form	
27	15% AIQ students(For all student taken MBBS Admission in15%AIQ)College Letter.	

Deficiency if any:

SCRUTINY OFFICER **OFFICE SUPERINTENDANT** **Dy. Accountant**

DECLERATION

I Dr._____admitted in this college _____course nearby declare that if I fail to submit above mentioned deficient documents in scrutiny form I will pay fine of Rs.50/- per week per document till the date of submission of my documents as per university rule.

Name:

Subject:

AIR:

Signature:

Dean

Post Graduate Institute of Medical Sciences, Navi Mumbai

RECENT

PANSIZE
PHOTO

CANDIDATEINFORMATION

Post Graduate Institute of Medical Sciences, Navi Mumbai.

Post Graduate Admission Year : 2026-27

Admission quota: _____Subject: _____

1	**Name of the Student(In Capital words)** **English** **Marathi**	SURNAME NAME FATHERNAME
2	**Father's Full Name**	
3	**Name of Mother**	
4	**Place & Date of Birth**	Place: DOB:
5	**Residential Detail Address:**	
6	**State to which candidate belongs**	
7	**Telephone No. With Code (Residential)**	
8	**Mobile No.**	Student: Parent:
9	**Email id**	Student: Parent:
10	**Aadhar No**	
11	**Voter ID No (IF No Fill Annexure C attached below)**	
12	**Blood Group**	
13	**Mark of Identification(Two)**	1. 2.
14	**Quota of admission (AI/State/In Service)**	
15	**NEET Rank**	
16	**Percentile score of NEET PG**	
17	**Category: SC/ST/VJ/NT-1/NT-2/NT-3/OBC/OPEN/other**	
18	**Caste & Sub caste**	
19	**MMC/MCI registration No**	Valid from _____to _____
20	**State Medical Council Name** **Registration No** **Valid Upto**	
21	**MBBS College name**	
22	**MBBS passing year**	
23	**Marks Obtained in MBBS**	Marks / out of % =
24	**Internship Completed Date**	
25	**Name of XIIth (10+2)Board**	

Date: / /

Place: Navi Mumbai **Signature of Candidate**

UNDERTAKING-NEET-PGADMISSIONS

(Applicable for All India Admissions only)

I the undersigned hereby confirm that the data submitted during joining (1^{st} / 2^{nd} /subsequent rounds) for post-graduation 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:

Place:- Navi Mumbai
Date:-

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Dr._____who is desirous of admission to medical postgraduate courses.

He/she has not given any personal history of any disease incapacitation him/her to undergo the professional course. Also, on clinical examination it has been found that he/she is medically fit to undergo the medical postgraduate course (NEET PG) in the academic Year _____

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

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

Note:

- ✓ A candidate must be medically fit to undergo PG courses applied for. The medical fitness must be certified by registered medical practitioner in the above prescribed format ONLY.
- ✓ **If the candidate has claimed PWD seat& allotted a PWD seat**: He/ She must submit additionally the current academic year RECENT Physical handicapped certificate (PWD)issued by the authorized agencies only as per the instructions of competent authorities of All India/State quota for the current academic year in information brochures/Notifications/Advisory.

SERVICEBOND

To be submitted ONLY after final confirmation of admission /after cut-off date.

1. It will be the total responsibility of the student to submit the **SERVICE BOND after final confirmation / Cut-off date of admission within one week.**
2. Any student failing to submit the Bond within the stipulated time will not be eligible for appearing the PG exams. Appropriate action will be initiated against all such candidates and stipend will be withheld till the receipt of Bond.
3. BondShouldbepreparedonRs.500/-Bond.(Notarized)
4. Service Bond is applicable for All India/State PG Student.
5. Matter of Bond is given below.

INDEMNITY BOND

I, Dr. _____, D or S/o _____ _____age _____, Indian Inhabitant, Present Address:_____ _____,do hereby take an oath and state solemn affirmation as under:

I the undersigned _____student in _____Course in Post Graduate Institute of Medical Sciences, Navi Mumbai through NEET PG 2026-27 Exam state counselling.

As per NEET PG 2026-27 brochure clause/Para 21.3, I undertake that on completion of my PG Course, I will be bound to serve the Government of Maharashtra or Corporation or Defence Services for a minimum period of ONE year.

If for any reason I fail to serve the Government of Maharashtra or Corporation or Defence Services for a minimum period of ONE year, in that event they will entitled to claim and recover from me or my sureties a sum of Rs.50,00,000/- (Fifty Lakhs only).

If I have the service Central Government or Government of Maharashtra or Corporation or Defence for any reason within this service period of One year they can claim and recovery amount from me.

In the event I fail to comply with condition of this undertaking the whole of said amount of Rs.50,00,000/- (Fifty Lakhs only) shall be come forthwith payable by Parents/Guardians/Sureties jointly and severally all discretion of the University and University will be entitled to seek legal remedies against my Parents /Guardians /Sureties.

I undertake to communicate my address from time to time if there is any change.

Date: / /2026 Signature:
Place: Name:
Address:

Mobile No.

Witnesses:
1)
2)

FEES NOTICE

Subject:- Payment of Fees for Post Graduate Students (Academic Year 2026-2027)

All Post Graduate (MD/MS) Students who wants to take admission for Post Graduate course through NEET PG 2026-27 must follow the following instructions:

1. They must bring original set of documents and two attested photocopies of the same.
2. They must bring four separate DDs from a Nationalized Bank (i.e.1,67,300/-,17,610/-,1,500/- & 500/-) in favour of **DEAN PGIMS NMMC** (Payable at Navi Mumbai).

Admission Form Fees= 500/- +GST= 590/-

1. Tuition Fees:-1,67,300/-(One Lakh Sixty-Seven Thousand, Three Hundred Only)

2. Other Fees:-17,610/-(Seventeen Thousand Six Hundred &Ten Rupees only)

Sr. No.	Fee Details	Fee Amount
1.	Tuition Fee (as per DMER)	1,67,300/-
2.	Library Fees	1,000/-
3.	Admission Fees	1,500/-
4.	Gym khana Fees	500/-
5.	Development Fund Fees	5,000/-
6.	Library Deposit	2,000/-
7.	Caution Money	3,000/-
8.	University Prorate	500/-
9.	University Development Fees	100/-
10.	Hostel Fees	4,000/-
11.	Disaster Management Fees	10/-
	Total Amount	**1,84,910/-**
	By Demand Draft	**Amount**
1.	Tuition Fee	1,67,300/-
2.	Other Fee	17,610/-
3.	Administrative Fee (for Hold)	1,500/-
4.	Admission Form Fees	500/-

Note:

- DD of any nationalized bank may be drawn **in favour of "DEAN PGIMS NMMC"** payable at Navi Mumbai. Cash will not be accepted.
- The demand draft will be deposited in the accounts only after confirmation of the admission/status retention by the students.
- If students are allotted another college in subsequent rounds of All India/state, in such situation, all the DDS will be refunded back to the student.
- All such students will be required to pay an amount of **Rs.1500/- as cash** in the cash section of accounts department.
- FEES TRUCTURE MY CHANGE DEPENDING ON INSTRUCTIONS FROM HIGHER AUTHORITIES
- eligibility fees will have to be paid at the time of admission, by the students as per MUHS norms.

ANNEXURE "L"

STATUS RETENTION FORM

NEET PG 2026-27

Candidate name :_____SML NO :_____ROLL NO:

Institute / College :_____Course:

To,
The Commissioner,
State CET CELL,
8thFloor, New Excelsior Bldg, A.K. Nayak Marg,
Fort Mumbai 400 001.

Sir/Madam,

I Dr. _____wish to retain the seat alloted to me at Post Graduate Institute of Medical Sciences, Navi Mumbai. For _____ _____Course for the academic year 2026-27.

DECLARATION

I am fully aware that after submitting this status retention form I will not considered for any subsequent rounds of selection process for the year 2026-27.I also declare that I will not ask for reconsideration of my name for the further selection process.

Date:

Place: **Signature of Candidate**

Submitted for necessary action

Date:

Place: **Signature of Dean/Principal(With seal)**

Note: This blank form to be Xeroxed and to be filled in triplicate, one copy to be sent to the competent authority by the college. one copy to be retained by the college, one copy to be retained by the candidate.

ANNEXURE-"K"

RESIGNATION OF ADMISSION TO MEDICAL POSTGRADUATE COURSE 2026-2027

To,
The Commissioner, State
CET CELL,
8THfloor, New Excelsior Building, A.K. Nayak Marg,
Fort Mumbai 400 001.

(Through Dean/Principal)

Subject: Resignation of Post Graduate Admission.

Respected Sir

I, Dr._____SML NO._____has been admitted for _____ _____Course at Post Graduate Institute of Medical Sciences, Navi Mumbai. On_____under _____category.

Now, I wish to resign the above mentioned PG admission for the following reasons.

1)I have secured admission to PG course at _____ _____on_____under_____category.

I hereby tender my voluntary resignation. I am abide by the Rules and Regulations regarding fees, bond and penalty conditions, as per NEET-PG 2026-27 brochure.

Thanking You,

Yours Faithfully,

Date:

Place: **Signature of candidate**

Name and address of the candidate: **Pin Code: Mobile :**	**For Office use only** **Amount Paid Rs:** **Amount Deducted Rs:** **Amount Refunded Rs:** **Cheque No. & Date:** **Bank Particulars:**

Note:

This blank form to be Xeroxed and to be filled in triplicate, one copy to be sent to competent authority by the college, one copy to be retained by the college, one copy to be retained by the candidate.

Annexure E

Office of the_____

Out ward No. Date:

TO WHOMESOEVR IT MAY CONCERN

CERTIFICATE

This is to certify that, the Caste Certificate No_____ Dated issued to Mr /Miss _____by Tahsildar /Magistrate is Valid.

Further, it is stated that there is No provision of issuing separate caste Validity Certificate in this state.

Official Stamp/Seal

Signature of Tahsildar / magistrate/ Issuing Authority