


MANIPUR GAZETTE

**EXTRAORDINARY
PUBLISHED BY AUTHORITY**

No. 8

Imphal, Wednesday, April, 3, 2013

(Chaitra 13, 1935)

**GOVERNMENT OF MANIPUR
SECRETARIAT : HEALTH DEPARTMENT**

NOTIFICATION

Imphal, the 23rd March, 2013

No. 9/2/09-M(MBBS/BDS): The Governor of Manipur is pleased to make the following Rules further to amend the MBBS/BDS Entrance Examination (Selection of Candidates for Nomination) Rules, 2004, namely,–

**THE MANIPUR MBBS/BDS ENTRANCE EXAMINATION (SELECTION OF
CANDIDATES FOR NOMINATION) AMENDMENT RULES, 2013**

1. **Short title and commencement**– (1) These Rules may be called the MBBS/BDS Entrance Examination (Selection of Candidates for Nomination) Amendment Rules, 2013.
2. They shall come into force from the date of their publication in the official gazette.

2. **Amendment of Chapter– II, Rule 5**

In Rule 5 – For Selection of Candidate for nomination, the following new proviso shall be inserted, namely –

“Provided that if National Eligibility Cum Entrance Test (NEET-UG) replaces the State Entrance Examination and if there is no specific Decree/Order of Court for conducting the State Entrance Examination also, the Selection Board will not hold and conduct the Manipur MBBS/BDS Entrance Examination”.

3. **Amendment of Rule 17**

In Rule 17 – Select List, the following new proviso shall be inserted below clause (5) of Rule 17, namely –

“Provided that if the National Eligibility Cum Entrance Test (NEET–UG) is conducted and its results are to be followed in place of State Entrance Test & its results and if State-wise merit list of the selected candidates is prepared by MCI or other authorized agency as per

NEET and State Health & Medical Department is entrusted the responsibility of counselling the candidates for admission into Medical & Dental Colleges against State quota seats, the candidates from the said select list of NEET only will be counselled and nominated for admission to MBBS/BDS course by following the existing Reservation Policy. Eligible candidates of the State shall apply in duly filled in application form (Annexure VIII to Rule 17) for open counselling for nomination for MBBS/BDS Course in Medical/Dental College inside/outside the State of Manipur. Prescribed Application Form is obtainable from the Directorate of Medical & Health Services on payment of Rs. 500/- (Rupees five hundred) and Rs. 300/- (Rupees three hundred) only for General/OBC and ST/SC candidates respectively. The Selection Board shall make the Select List and Wait List from amongst the eligible candidates/applicants who obtain and submit the duly filled in prescribed form”.

4. Amendment of Rule 18:

In Annexure – V to Rule 18(iv), the following heading in the Annexure shall be substituted namely –

“AUTHORITY LETTER – PROFORMA FOR AUTHORITY & UNDERTAKING FOR AUTHORISED REPRESENTATIVE FOR OPEN COUNSELLING FOR MBBS/BDS COURSE”.

By Orders & in the name of Governor,

RAM MUIVAH,
Principal Secretary (Health & FW),
Government of Manipur.

“DECLARATION BY THE APPLICANT”

I hereby solemnly affirm that the information furnished above by me is true and correct to the best of my knowledge. I have not kept any information secret. Should it however be found that any information furnished therein is fraudulent, incorrect or untrue in the material particulars, I realize that I am liable to criminal prosecution and I also agree to forego/cancel any allotted seat in Medical/Dental College. I agree to abide by the Rules and Regulations governing the examination and contained in the Manipur MBBS/BDS Entrance Examination (Selection of Candidates for Nomination) Rules 2004 and its subsequent amendments.

Place:
Date:

Signature:

Full Name of the Candidate
(in his/her own hand writing)

(I) DOMICILE CERTIFICATE

Certified that Shri/Km/Smt. _____
S/o, D/o, Shri/Smt _____ of
(Address) _____ is a domicile of Manipur by birth.

Seal of office:
Date:

Signature of Deputy Commissioner.

OR, (II) RESIDENTIAL CERTIFICATE

Certified that Shri/Smt. _____
F/o, M/o, Shri/Km/Smt. _____
of (Address) _____ has been residing continuously for
the last 20 years in Manipur.

Seal of office:
Date:

Signature of Deputy Commissioner.

OR, (III) EMPLOYMENT CERTIFICATE

Certified that Shri/Smt. _____
F/o, M/o, Shri/Km/Smt. _____
is an employee of the Government of Manipur/an Institution/Organisation which is a body substantially
owned or controlled by the Government of Manipur and he/she is employed as _____
in the (name of Institution/Organisation) _____

Seal of office:

Signature of the Head of Department

ACKNOWLEDGEMENT SLIP

ENROLLMENT NO. : _____

This is to acknowledge, receipt of completely filled in prescribed form to register in the list of
candidates who are to undergo counselling for admission to MBBS/BDS Courses - 2013 in Medical/
Dental colleges inside/outside Manipur for the academic session, 2013.

Name of the Candidate : _____
(Full name in Block letters)

Signature of the Candidate: _____

Date of submission of form

--	--	--	--	--	--	--	--

Date Month Year

Permanent address of Candidate: _____

Contact No. of Candidate: _____

Acknowledged by:

Officer-in-charge,
Medical Directorate, Lamphel.

ACKNOWLEDGEMENT SLIP

ENROLLMENT NO. : _____

Affix photograph by
duly attested by a
gazetted Officer

Size: 3.5cm x 4.5cm

This is to acknowledge, receipt of completely filled in prescribed form to register in the list of candidates who are to undergo counselling for admission to MBBS/BDS Courses - 2013 in Medical/ Dental colleges inside/outside Manipur for the academic session, 2013.

Name of the Candidate : _____
(Full name in Block letters)

Signature of the Candidate: _____

Date of submission of form

--	--	--	--	--	--

Date Month Year

Permanent address of Candidate: _____

Contact No. of Candidate: _____

Acknowledged by:

Officer-in-charge,