

Instruction for Students

All the selected students of **PGP CET-2022** who have been allotted seat at DVVPF's College of Physiotherapy, Ahmednagar. Should follow following instructions and accordingly report with all details required for admission process. Kindly download admission brochure from institute website www.vimscopt.edu.in

1. Download & Print this PDF file. READ CAREFULLY ALL DETAILS
2. Student should report personally for admission / admission cancellation in case of up gradation. PROXY will not be allowed for admission process/ Cancellation of admission.
3. Print and fill one copy of Application Form.
4. Print and fill one copy Original Document Holding Certificate.
5. Print and fill one copy of Candidate Information
6. Print and fill one copy of Admission Office Order.
7. Print and fill one copy of Medical Fitness in the prescribed format ONLY By Authorized Medical Practitioner.
8. Print and fill one copy of Declaration for hostel accommodation.
9. All Original documents enlisted in the holding certificate will be compulsorily required for admission. Additionally, student should submit 3 set of **SELF ATTESTED** Xerox / photocopies of all original documents.
10. All original Documents **INDIVIDUALLY SCANED** in **PDF** format only will be compulsory required at the time of admission. Students should scan documents properly through computer scanner (Size 400 kb only). Please don't use mobile Scanner for scanning documents. Individual Original Documents should be scanned and renamed appropriately.

e.g. Nationality certificate after scanning should renamed as Name of Student (As mentioned in allotment letter) Space Nationality Certificate.

Prepare folder and rename it with Name of the student, keep all scan documents in this prepare Folder for Submission during admission. Scanned documents will be accepted in Pen-Drive. Send all scanned documents together in **one mail only** on admission@vimscopt.edu.in

P.T.O.

11.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.

12.Other Letters/ undertaking if required will be taken at the time of admission if permissible within the rules thereof.

13.Submit all documents in a **simple button file Transparent folder as below:**

On folder Write your Name, Category, admission Quota & Mobile Number with thick permanent marker.



ORIGINAL DOCUMENTS HOLDING CERTIFICATE

Received following original documents from Miss / Mr. _____

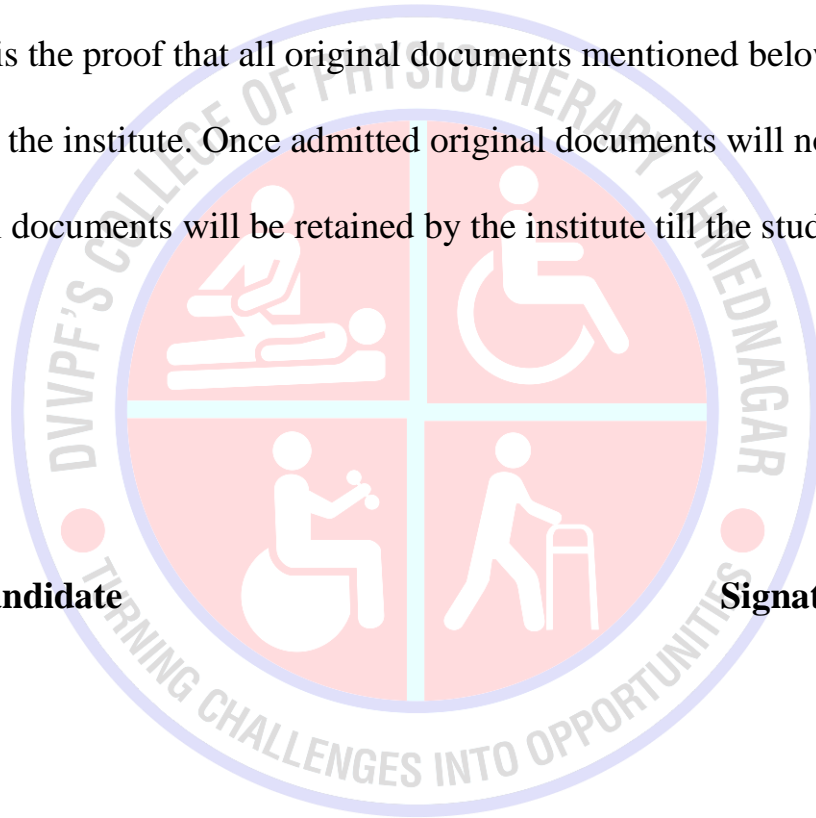
Admitted through State quota for M.P.T. Course for the academic year _____ at

DVVPF's College of Physiotherapy, Ahmednagar.

Mr./Ms. _____ Rank No. _____

PGP CET NO. _____ Admitted Category _____ have
been provisionally selected through PGP CET 2022-23

This Certificate is the proof that all original documents mentioned below are submitted by the student to the institute. Once admitted original documents will not be given to student. Original documents will be retained by the institute till the student completes M.P.T. Course.



Signature of Candidate

Signature of Principal

Note: (Read Every Point Carefully)

**(ONE ORIGINAL SET OF ALL DOCUMENTS AND THREE XEROX COPIES)
SOFT COPY OF EVERY DOCUMENTS IS COMPULSORY IN PENDRIVE &**

E-mail to admission@vimscopt.edu.in

List of Documents Required

All the documents to be colors scanned less than 400kb in PDF format

Sr. No.	Document (Colored scan copy)	Student Use(Tick)	OfficeUse
1.	Nationality certificate or valid passport		
2.	Domicile certificate		
3.	Aadhar card (photocopy)		
4.	SSC (10 th) passing certificate		
5.	HSC (10+2) mark sheet		
6.	Admit card & Registration form of PGP CET-2022		
7.	Result PGP CET PG-2022		
8.	B.P.Th. First to Final Year Marksheet		
9.	B.P.Th. Internship Completion Certificate		
10.	B.P.Th. Attempt Certificate		
11.	B.P.Th. Degree & Passing Certificate		
12.	MS OT&PT Registration Certificate		
13.	Proof of identity (pan / driving license / passport) - Photocopy		
14.	Provisional allotment letter generated on – line (for all student) for state quota candidates, allotment letter / selection list page.		
15.	Caste Certificate (If Applicable)		
16.	Caste Validity Certificate (If Applicable) For Outside Maharashtra Students (Oms) Letter From Magistrate That Your State Does Not Issue Caste Validity Certificate Will Be Compulsory.		
17.	Non- Creamy Layer Certificate... Valid Up To 31/03/2023 (If Applicable)		
18.	EWS Certificate (Annexure –A) By Competent Authority Issued After 31/03/2022 (If Applicable)		
19.	School Leaving Or Transfer Certificate		
20.	Defense Claim (D1/D2/D3): All Certificates As Per NEET UG 2022 Information Brochure... (For State Quota Students Only)		
21.	Physically Handicapped Certificate (If Applicable)		
22.	Medical Fitness Certificate In Prescribed Performa		
23.	Income Certificate Issued By Competent Authority Of Financial Year 2021-2022. (For Maharashtra Candidates Only – Claiming EBC For Fees)		
24.	Self-Education Gap Certificate (Affidavit On Rs.100/- Bond) If Applicable		
25.	Migration Certificate (If Applicable)		

Shyam D. Ganvir

Dr. Saqib T. Syed

Dr. Deepti Thokal

Student
Photograph

STUDENTS PROFILE

(KINDLY FILL THE FORM IN THE CAPITAL LETTERS ONLY)

Sex: Male/Female

Date of Admission_____

SML No._____

Roll No. Rank_____

Category Rank_____

Admitted under Category_____

Sr.No.	PARTICULARS	
1	Last Name	
2	First Name	
3	Middle Name	
4	Mother Name	
5	Name of the Student as per Last Qualifying Degree	
6	Name In Marathi	
7	Date of Admission	
8	Round No.	
9	Address For Correspondence*	
10	Email ID*	
11	Mobile	
12	Gender*	
13	Date of Birth *	
14	Place Of Birth	
15	Aadhaar Card Number	
16	Do You Have Voting Card?	
17	Voter ID*	
18	Category of the Student	

P.T.

19	PGP CET Marks*	
20	PGP CET Percentile	
21	Name of University *	
22	B.P.Th. College Name	
23	Month & Year of Passing	
24	First Year B.P.Th. Marks	
25	Second Year B.P.Th. Marks	
26	Third Year B.P.Th. Marks	
27	Final Year B.P.Th. Marks	
28	Grand Total & Percentage	
29	B.P.Th. Passing Certificate	
30	Date of Internship Completion Certificate	
31	Date of B.P.Th. Attempt Certificate	
32	Date of B.P.Th. Degree Certificate	
33	Student Blood Group	
34	SSC School Name	
35	SSC Month & Year of Passing	

Declaration by Candidate:

I hereby declare that all statement made in the application form are true, complete and correct to the best of knowledge and belief. In the event of any information being found false my candidature is liable to be cancelled.

Date: / / 20

Signature of the Student

Student Declaration

1. I declare that, I have read all the Rules of Admission, for the year -----and after ----- understanding these Rules, I have filled the form for Admission for ----- I also agree to abide with all the Rules and Regulations Mentioned in the prospectus.
2. I hereby agree, if admitted, to confirm to the Rules and Regulations at present inforce or that may be here after made for the governance of the college and its attached hospital and I undertake that so long as I am a student of College, will do nothing, either inside or outside the College and Hospital that will interfere with their orderly governance and discipline.
3. I understand if any information furnished by me is found incorrect / misleading / forged, I shall be debarred/ discontinued from the College.

Signature of the Student

UNDERTAKING

APPLICANT

To,
The Principal,

Dr. Vithalrao Vikhe Patil Foundation's
College Of Physiotherapy, Ahmednagar.

Subject: Regarding Non submission of original certificates.

Respected Sir,

I will submit the following certificates within SEVEN days, failing which I shall be liable for the action taken by the college.

1. -----
2. -----
3. -----
4. -----

Signature of the Student

ANNEXURE – M

Status Retention Form

PGP/PGO/M.Sc.(SLP)/M.Sc.(Aud)/MSc(P&C)-CET 2022

Candidate's Name: _____ SML No. _____

Roll. No. : _____ Institute/College: _____ Course. _____

To

COMMISSIONER,

8th Floor, New Excelsior Building,

A. K. Nayak Marg, Fort,

Mumbai- 400 001.

Sir/Madam

I, Dr. _____ wish to retain the seat allotted

(Name of Candidate)

to me at _____

(Name of the College)

for _____ Course for the academic year 2022-23.

(Name of the course)

Declaration

I am fully aware that after filling this **Status Retention Form** that I will not be considered for any subsequent rounds of selection process for the year 2022-2023. I also declare that I will not ask for reconsideration of my name for further selection process.

Date:

Place:

Signature of Candidate

Submitted for necessary action

Date:

Place:

Signature of Dean /Principal (with seal)

9 - - - - -

FEES: To be submitted as Demand Draft Details (DD)

For M.P.T.Admission in the year 2022-23

Selected students are instructed to submit the DD as follows
Demand drafts to be drawn from Nationalized bank in favor of
Principal-DVVPF's College of Physiotherapy, Ahmednagar.
(Errors or spelling mistakes in the DD will NOT be accepted)

CATEGORY	TUITION FEE #	DEVELOPMENT FEE #	TOTAL FEES	HOSTEL FEE	SECURITY DEPOSIT (Refundable)	MUHS FEES			DMER	TOTAL
						ELIGIBILITY FEE	UDF	PRO-RETA FEE	INSURANCE	
OPEN	111111	13889	125000	75000	25000	9700	100	200	665	235665

Note:

- Please Note cash/ cheque will not be accepted.
- The demand draft will be deposit in the accounts only after cutoff date of admission process.
- If students are allotted another college in subsequent rounds of State quota. In such situation, DD will be refunded back to the student. All such students will be required to pay an amount of Rs. 1500/- as cash (admission cancellation fees) in the cash section of accounts department.

Application Form for
Hostel Accommodation

To,
The Principal,
DVVPF's College of Physiotherapy,
Ahmednagar.

Subject: Application for Hostel Accommodation in College of Physiotherapy.

Respected Sir,

I, _____ is
admitted for Course _____ in the academic year _____ at DVVPF's
College of Physiotherapy, Ahmednagar.

I and my parents/ Legal guardian have gone through the SOP for hostel accommodation
given in the admission manual at the time of Joining. We have clearly understood all rules and
regulations mentioned in SOP.

I hereby declare that I am suffering from _____ disease(S)
and on treatment. I am receiving following _____ drugs
for my disease element since _____ day/ Months/Year. I am not hiding any
information related to my health issues.

We, hereby undertake and declare that, if hostel accommodation is allotted, I will abide with
all the rules and regulation mentioned in the SOP. If I break any rule mentioned thereof in the SOP,
I will be liable for appropriate action.

Signature of student with Date

- **Name of the Student:** _____
- **Full Address with Pin code:** _____

- **Mobile No.** _____
- **Email Address:** _____

Signature of Parents / Legal Guardian with Date

- **Name of Parents / Legal Guardian:** _____
- **Full Address with Pin code:** _____

- **Mobile No.** _____
- **Email Address:** _____

ADMISSION APPLICATION FORM

(To be filed by candidate)

<p>Rank / SML. No.-----</p> <p>Marks :-</p> <p>DOB :-</p> <p>Category :- -----</p> <p>Quota :- -----</p>	<p>Name of Candidate :- Shri / Kum.-----</p> <p>-----</p> <p>Address :-</p> <p>-----</p> <p>-----</p>
<div style="border: 1px solid black; width: 150px; height: 100px; margin: 0 auto; text-align: center; line-height: 100px;">Photo</div>	<p>PH. No. (Landline)</p> <p>-----</p> <p>Mobile No.</p> <p>-----</p> <p>Date :-</p>

To,
The Principal
DVVPF's College of Physiotherapy,
Ahmednagar.

Subject: - Joining in M.P.T. course at DVVPF's College of Physiotherapy, Ahmednagar Academic Year 2022-23.

Ref.:- Selection Letter / List : Printout attached).

Respected Sir,

I the Undersigned Shri/ Kum. (Full Name in Capital) -----
----- has been selected for M.P.T.Course in DVVPF's College of Physiotherapy, Ahmednagar as per the selection letter of State List.

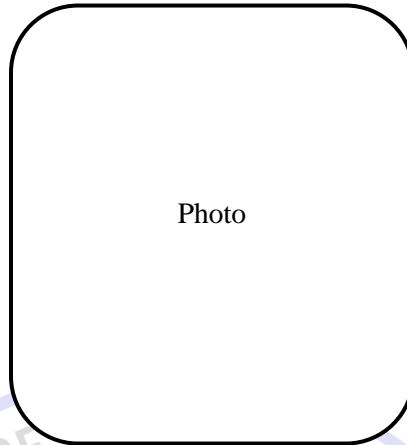
Kindly enroll me in your college as M.P.T.student for the Academic Year 2022-23. I am submitting herewith following original Certificate & two set of attested Xerox copies.

Please allow me to join the same.

Thanking you

Yours faithfully,

Identity Card Information



- Name :-----

- Student : Master of Physiotherapy Roll No.:-----
- Year :-----
- Date of Birth :-----/-----/----- Blood Group :-----
- Address :-----

- Phone No.:-----

Principal