

BROCHURE

Admission M.B.B.S. Batch 2024

Dr. Ram Manohar Lohia Institute of Medical Sciences,

Vibhuti Khand, Gomti Nagar, Lucknow-226010

1. 30 seats will be filled through All India Counseling.

The schedule for All India Counseling is available on https://mcc.nic.in/ug-medical-counselling/

Click on COUNSELLING SCHEDULE UG 2024 under CURRENT EVENTS.

170 Seats will be filled by state counseling as per the schedule declared in the website of by DGME U.P.

LINK – UP NEET UG 2024 DGME brochure and important instructions are available on the website https://upneet.gov.in and www.dgme.up.gov.in

NOTE: - Please keep visiting above provided links regularly for updated information



3. Fee Structure: -

A. Under Graduate (MBBS) First Year Fees

| S.No. | Heads | Amount | Remarks |
|-----------------|--------------------|---|--|
| 1. | Admission Fees | 2000/- | At the time of Admission |
| 2. | Enrolment Fee | 1000/- | At the time of Admission |
| 3. Tuition Fees | | 18000/- (GEN/EWS) 9000/- (SC/ST/OBC) | Each Year |
| 4. | Others | 4000/- | Each Year |
| 5. | Development | 2000/- | Each Year |
| 6. | Library | 2000/- | Each Year |
| 7. | Examination Fees | 6000/- | Each Year/Per Examination |
| 8. | Mark Sheet Fees | 1000/- | Each Year/Per Examination |
| 9. | Caution Money | 10000/- | At the time of Admission (Refundable) |
| 10. | Athletic | 100/- | At the time of Admission |
| 11. | Student Welfare | 1000/- | At the time of Admission |
| 12. | Admission Form Fee | 100/- | At the time of Admission |
| 13. | Computer Fees | 500/- | At the time of Admission |
| 14. | Alumni Fees | 1000/- | At the time of Admission |
| 15. | Foundation Course | 1000/- | At the time of Admission |
| Total (| GEN/EWS) | 49,700/- | |
| Total (| SC/ST/OBC) | 40,700/- | |

B. HOSTEL FEES DETAILS, TO BE PAID AT THE TIME OF HOSTEL ALLOTMENT (MBBS STUDENTS 2024-25 BATCH)

| Hostel Security Money (Refundable) | 5000/- |
|------------------------------------|--------|
|------------------------------------|--------|

For Boys Students (Each Year)

| Hostel | The Control of the Co | Rs. 2400/- Per year |
|-------------------------|--|----------------------|
| Electricity | Double Scated | Rs. 2500/- Per year |
| Air conditioner charges | | Rs. 18000/- Per year |
| | Total | 22900/- |

For Girls Students (Each Year)

| Hostel | Double Seated | Rs. 2400/- Per year |
|-------------|---------------|---------------------|
| Electricity | Double Seated | Rs. 2500/- Per year |
| | Total | 4900/- |

Prof. Vineeta Mittal Chairperson, U.G. Committee Dr. R.M.L.LM.S., Lucknow The fees may be deposited in the following manner-

 Only Through Online Mode using Bar Code Scanner available with the Finance Personnel of the institute

OR

(ii) Direct Deposit in the form of Demand Draft in favor of "Director, Dr. Ram Manohar Lohia Institute of Medical Sciences, Vibhuti Khand, Gomtinagar, Lucknow."

Note: - No Cash / Credit Card / Debit Card / Cheque or any other mode is allowed for deposition of Fees.

- 4. All students will be required to bring the following documents in original at the time of admission: -
- Original Admit/Rank Card Letter / NEET Score Card / Allotment Letter.
- · Original Verification Slip.
- Security Money Submission Proof / Slip.
- Original High School Mark Sheet and Pass Certificate with 2 set of self-attested photocopy.
- Original Intermediate Mark Sheet and Pass Certificate with 2 set of self-attested photocopy.
- Others, if any, (B.Sc. Mark sheet in Original etc.) with 2 set of self-attested photocopy.
- Transfer/Migration Certificate in Original with 2 self-attested photocopies.
- Character Certificate in Original with 2 self-attested photocopies.
- Caste Certificate in Original with 3 attested photocopies.
- Subcategory with 2 set of self-attested photocopies. (i.e. EA/FF/PH/NC) if applicable as prescribed in NEET - 2024 brochure.
- 04 Photographs-passport size.
- · Affidavits as prescribed in this brochure.
- Self-addressed 2 Envelopes with 40 Rupees stamp.
- Domicile Certificate with 2 set of self-attested photocopies. if applicable.
- Copy of Aadhar Card.
- 5. All the students will have to undergo medical examination at this institute before admission which will take minimum two days, therefore candidates are requested to appear at the Nodal Center for admission accordingly.
- All students will be required to submit following <u>affidavits on stamp paper</u> of money as mentioned in the format provided in the brochure.
- i. Format of Undertaking by The Student (Anti Ragging)- 10/- Rs Stamp Paper with notary (Bond)
- Format of Undertaking by Parent / Guardian of The Candidate/Student (Anti Ragging) 10/- Rs Stamp Paper with notary (Bond)
- iii. Format of Undertaking for year Gap- 10/- Rs Stamp Paper with notary (Bond)
- Format of Undertaking for Address and Income-10/- Rs Stamp Paper with notary (Bond)
- v. Format of Undertaking for Caste- 10/- Rs Stamp Paper with notary (Bond)
- vi. Format of Undertaking for rule and regulation- 10/- Rs Stamp Paper with notary (Bond)
- vii. Agreement Bond for Candidates Admitted to MBBS Course- 100/- Rs Stamp Paper with notary (Bond)

Prot. Vineeta Mittel
Chairperson, U.G. Committee
Or. R.M.LLM.S., Lucknow

BEFORE THE DEAN, DR.RAM MANOHAR LOHIA INSTITUTE OF MEDICAL SCIENCES, LUCKNOW, U.P.

FORMAT OF UNDERTAKING BY THE STUDENT

| 1. I | (Full Name in Block Letters) Son/ Daughter of |
|---|--|
| Mr./Mrs./Ms | (Full Name in Block Letters) |
| admitted to the course of | (Name of Course) with NEET Roll |
| No at Dr. Ram Mar | ohar Lohia Institute of Medical Sciences, Lucknow, |
| UP affiliated to (Dr. RMLIMS, Luckno | w) have received a copy of the National Medical |
| Commission (Prevention and Prohibition | of Ragging in Medical Colleges and Institutions) |
| Regulations, 2021(hereinafter referred to a | the said regulations). |

- 2. I have carefully read and fully understood the provisions in the said regulations.
- I have particularly perused the provisions of regulations3 and 4 of the said regulations and have fully

Understood what constitutes —ragging.

- 4. I have also in particular perused the provisions of Chapter IV and read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- I hereby undertake that—
- I will not indulge in any behavior or act that may come under the definition of ragging as may be constituted under regulation3 of the said regulations.
- (ii) I will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulation3 of the said regulations.
- (iii) I will not hurt anyone physically or psychologically or cause any other harm.
- I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.
- 7. I also declare that I have never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled / withdrawn.

Signed on this the day of monthof year.

Signature

Name:

Address:

Tel/ Mobile No:

Signature of Witness 1:

(Name of Witness 1):

Address:

Signature of Witness 2:

(Name of Witness 2):

Address:

Procedure Anneeta Mittau Chairperson, U.G. Committee Dr. R.M.L.I.M.S., Lucknow

[BEFORE: THE DEAN, DR.RAM MANOHAR LOHIA INSTITUTE OF MEDICAL SCIENCES, LUCKNOW, U.P.]

FORMAT OF UNDERTAKING BY PARENT / GUARDIAN OF THE CANDIDATE/STUDENT

| I(Full Name in Block Letters) Father / Mother/ |
|---|
| Guardian of |
| Mr./Mrs./Ms (Full Name of Student in Block Letters) |
| admitted to the course of |
| 2. I have carefully read and fully understood the provisions in the said regulations |
| 3. I have particularly perused the provisions of regulations3and 4 of the said regulations and have fully Understood what constitutes —ragging. |
| 4. I have also in particular perused the provisions of Chapter IV and read and understood the administrative and penal actions that may be taken against my son/ daughter/ward in case he /she is found guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging. |
| 5. I hereby undertake that my son/ daughter/ ward — |
| (i) Will not indulge in any behavior or act that may come under the definition of ragging as may be Constituted under regulations3 and 4 of the said regulations. |
| (ii) Will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under regulations 3 and 4 of the said regulations. |
| (iii) Will not hurt anyone physically or psychologically or cause any other harm. |
| 6. I hereby agree that if my son/ daughter/ ward is found guilty of any aspect of ragging, he/ she may be punished as per the provisions of the said regulations or as per the applicable law for the time being in force. |
| 7. I also declare that he/she has never been found to be guilty of ragging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, his/her admission is liable to be cancelled/withdrawn. |
| Signed on this the dayof month of year |
| Signature |
| Name: |
| Address: |
| Tel/ Mobile No. |
| Signature of Witness 1: |
| (Name of Witness 1): |
| Address: |
| Signature of Witness 2: |
| (Name of Witness 2): |
| Address: |



समक्ष:—निदेशक, डा० राम मनोहर लोहिया आयुर्विज्ञान संस्थान विभूति खण्ड, गोमतीनगर, लखनऊ उ०प्र०।

शपथ पत्र

| 幹 | शपथी | आयु लगभग | वर्ष पुत्र/पुत्री श्री |
|--------|--|--------------------|---|
| | ि——िवासी | | |
| | | | का / की हूँ और शपथ |
| पूर्वक | निम्न बयान करता / करती हूँ कि:- | | |
| 1. | यह कि शपथी ने सन् | ¥ | की परीक्षा उत्तीर्ण किया है। |
| 2. | यह कि शपथी ने सन् | से | के मध्य प्रतियोगी परीक्षा की |
| | तैयारी करता रहा/रही। इस कारण | ा से | वर्ष का अन्तराल हो गया है। |
| 3. | यह कि शपथी ने सन् | से | सत्र तक किसी सरकारी या |
| | | | |
| दि | नांक:- | | शपथी |
| | | सत्यापनः | |
| | शपथी उपरोक्त सत्यापित करती/व एवं सही है। कोई भी तथ्य छिपाया न | | पत्र में वर्णित तथ्य मेरे निजी ज्ञान से |
| आज 1 | देनांकको लख | नऊ में उपस्थित होक | र अपने हस्ताक्षर बनायें। |

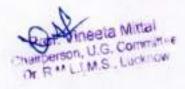
शपथी

Prodvineeta Mittal
Chairperson, U.G. Committee
Dr. R.M.L.I.M.S., Lucknow

समक्ष:--निदेशक, डा० राम मनोहर लोहिया आयुर्विज्ञान संस्थान विभूति खण्ड, गोमतीनगर, लखनऊ उ०प्र०।

शपथ-पत्र (पिता / संरक्षक)

| 中. | शपथी | आय लगभग | वर्ष पुत्र/पुत्री श्री |
|----|--|---|--|
| | निवासी | | |
| | | | |
| 1. | यह कि शपथी का पुत्र नीट-2024 की प्रवेश एम0बी0 लखनऊ में प्रवेश ले रहा है/ | /पुत्री व्या०एस० डा० राम मनोहर लो ले रही हूँ। | हिया आयुर्विज्ञान संस्थान, उत्तर प्रदेश, |
| 2. | यह है कि शपथी की समस्त | श्रोतों से कुल आय रू० | मासिक है। |
| ल | खनऊ / दिनोंक | | शपथी |
| | | सत्यापनः | |
| | मै शपथी उपरोक्त सत्यापित र | करता / करती हॅ कि शपथ पत्र | में वर्णित तथ्य मेरे निजी ज्ञान से सत्य |
| | | नहीं गया है। आज दिनांक | को लखनऊ में |
| | | | |
| ल | खनऊ / दिनॉक | | शपथी |





समक्षः-निदेशक, डा० राम मनोहर लोहिया आयुर्विज्ञान संस्थान, विभूति खण्ड, गोमतीनगर, लखनऊ उ०प्र०।

शपथ-पत्र

| ň | शपथी | आय लगभग | वर्ष पत्र / पत्री श्री | |
|----|--|-------------------------|---------------------------|----------------------|
| | निवासी | 3 15 15 | | |
| | शपथ पूर्वक | | | |
| | यह कि मेरा नीट-2024 में चय | | | -0.4 |
| | यह कि मेरी उपजाति अन्तर्गत आती है। | | | |
| 3. | यह कि मेरे द्वारा जो जाति ! | | | |
| | समय दाखिल किया जा रहा है गलत/झूठा पाया जाता है त तदानुसार भारतीय दण्ड संहिता | तो मेरा प्रवेश बिना किर | ी पूर्व सूचना के निरस्त व | ज्य दिया जाये |
| | লম্বনজ | | | |
| | दिनांक: | | श | पथी |
| | | सत्यापन | | |
| | मैं शपथी उपरोक्त प्रमाणित क त्य व सही है। इसमें कोई तथ्य : र सत्यापित किया। | | | |
| | | | | |
| लर | बनऊ। | | | |
| दि | नांक: | | श | पथी |

Prodiction of the Production o

समक्ष:--निदेशक, डा० राम मनोहर लोहिया आयुर्विज्ञान संस्थान, विभूति खण्ड, गोमतीनगर, लखनऊ

उ०प्र०।

शपथ-पत्र

| न्तवासी | |
|---|--|
| का/की हूँ। मेरा नीट~2024 रोल नम्बर /करती हूँ कि :, | है तथा यह घोषणा करता |
| यह कि मैंनें निदेशक, डा0 राम मनोहर लोहिया पाठ्यक्रम में प्रवेश हेतु हिपेटाइटिस बी के वैक्सीनेशन 3 यह कि मैं नीट-2024 से चयनित होकर किसी कार यदि ऐसा पाया जाये तो मेरा प्रवेश निरस्त कर दिया जा 3, यह कि नीट-2024 के प्रवेश के संदर्भ में मेरे द्वार असत्य पाया जाये तो मैं ख्वयं हैं। दोषी माना/मानी जाउ कोई आपत्ति नहीं होगी। | पर्ने स्वयं के खर्चे से वहन करूंगा/करूंगी। रेज/विश्वविद्यालय में कहीं भी अध्ययनरत नहीं हूं और ये जिस पर मुझे कोई आपत्ति नहीं होगी। व दी गयी सूचना/विवरण/प्रमाण–पत्र/घोषणा आदि |
| 4. यह कि मैं इस चिकित्सा विश्वविद्यालय में प्रवेश लेने होऊंगा / होऊंगी। अगर ऐसा पाया जाये तो मुझे विश्वविद् 5. यह कि पिछले सत्रों में सी0बी0एस0ई0 के प्रवेश से है और यदि लम्बित है तो सत्र 2024-25 में प्रवेश लेने व 6. यह कि मैंने एम.सी.आई. / डी.सी.आई. के सभी नियम प्रतिदिन परीक्षा में बैठने का हकदार नहीं होऊंगा / होऊंग | प्रातय से निष्काषित कर सकते हैं, जो मुझे मान्य होगा। सम्बन्धित मेरे द्वारा दायर कोई भी याचिका लम्बित नहीं पश्चात उस याचिका को वापस ले लूंगा/लूंगी। स पढ़ लिये हैं तथा उनके अन्तर्गत उपस्थित तथादिन, |
| 7. यह कि किसी भी स्थिति में महानिदेशक, ठा० राम म निर्णय अन्तिम होगा और मैं उसके लिए बाध्य रहूंगा/रहं 8. यह कि मैं विश्वविद्यालय की निर्धारित (प्रेस्काइब्ड) पहनकर आऊंगा/आऊंगी जिस पर मेरा नाम ऑकत ह परिचन्न-पत्र (आईडेन्टी कार्ड) विश्वविद्यालय अथारिटी | नोहर लोहिया आयुर्विज्ञान संस्थान, लखनऊ (उ०प्र०) का गी। ड्रेस तथा हास्पिटल में कार्य करने हेतु सफेद अप्रेन गा एवं चिकित्सा विश्वविद्यालय द्वारा जारी किया गया |
| होऊंगी / होऊंगा। 9. यह कि एतद्द्वारा निर्बन्धित (अण्डरटेकिंग) देता / देती तो मेरा प्रवेश अविलम्ब निरस्तकर दिया जाये तदानुसा प्रारम्भ की जा सकतीहै। | |
| 10.यह कि मैं निश्चित रूप से | श्रेणी का / की हूं। जिसके संबंध में साक्ष्य स्वरूप प्रमाण |
| 11.यह कि मुझे जो सूचनायें उपलब्ध करायी गयी हैं, उ राम मनोहर लोहिया आयुर्विज्ञान संस्थान, उत्तर प्रदेश, प्रवेश समस्त प्रमाण-पत्र एवं दस्तावेज संबंधित अधिकारि पृष्टि (कन्फर्म) की जाये। | लखनऊ में स्वीकार करता/करती हूं। मेरा वैकल्पिक |
| 12.यह कि मैं इस चिकित्सा विश्विद्यालय में प्रवेश लेने होऊंगा / होऊंगी। अगर ऐसा पाया जाये तो मुझे विश्वविद्य 13.यह कि मुझे जो सूचनायें उपलब्ध करायी गयी हैं, उर राम मनोहर लोहिया आयुर्विज्ञान संस्थान उत्तर प्रदेश, प्रवेश समस्त प्रमाण-पत्र एवं दस्तावेज संबंधित अधिकारि पुष्टि (कन्फर्म) की जाये। | ग्रलय से निष्काषित कर सकते हैं, जो मुझे मान्य होगा। सके आधार पर मैं वैकल्पिक प्रवेश एम0बी0बी0एस0 डा0 लखनऊ में स्वीकार करता∕करती हं। मेरा वैकल्पिक |
| | |

लखनकः-दिनांकः-

Prot. Vinegia Mittal
Imperson, U.G. Committee
Ir. R.M.L.I.M.S., Lucknow

शपथी का पूरा हस्ताक्षर नामः पिता का नामः पूरा पताः

ANNEXURE NO. - 2

AGREEMENT BOND FOR CANDIDATES ADMITTED TO MBBS COURSE 2024-25 SESSION

| OF |
|--|
| NAME: |
| S/O,D/O,W/O |
| RESIDING AT (PERMANENT ADDRESS) (LOCAL ADDRESS) MOBILE NO |
| (LOCAL ADDRESS) MOBILE NO |
| (LOCAL ADDRESS) |
| MOBILE NO E-MAIL ID: |
| MOBILE NO E-MAIL ID: |
| E-MAIL ID: |
| AADHAR NO.: |
| Hereinafter referred to as ("FIRST PARTY" of the one part AND |
| AND |
| Governor of Uttar Pradesh (here in after referred to as "Government" of the Second Part |
| WHEAREAS FIRST PARTY has applied for admission to course and |
| FIRST PARTY has been selected to the said course. As per the Prospectus, the FIRST PARTY has |
| agreed to serve the Government for a period not less than two year after successful completion of |
| the course. If the FIRST PARTY fails to serve the government for a period of two |
| year the FIRST PARTY shall forthwith pay a sum of Rs. 10 Lacs to Government at the specified |
| Government Treasury. During the above period the FIRST PARTY shall be paid Stipend, and the |
| Government will request their services within a period of three months from the date of successful |
| completion of the MBBS course. In case the Government does not provide services in mentioned period, the BOND shall be released; AND WHEREAS the FIRST PARTY has also agreed that on |
| successful completion of the MBBS Course his/her certificates relating to |
| not be given to the FIRST PARTY unless the FIRST PARTY successfully Serves the Government |
| for a period of two year or pay to the Government on demand the sum of Rs.10 Lac (Rupees Ten |
| Lac only). |
| If the FIRST PARTY fails to deposit the aforesaid amount in specified period, FIRST PARTY shall |
| be liable to pay interest at the rates specified by the Government as per applicable law during the |
| period of delay: AND WHEREAS the Government have, at the request of the FIRST PARTY |
| employed as Granted stipend to him/her for a period of 24 |
| months effect from in order to enable his/her to study at |

Prod Vineeta Mittal Chairperson, U.G. Committee Dr. R M L.I.M.S., Lucknow

| AND | WHERE | | | | | |
|----------------------|--|---|---|--|---|--|
| Degree Rs balan Laws | of less than 24 month e, MBBS course, the proceed amount of stipend to of India, for the time be dingly determined by the | (Rupees the Government in force, | mount will be shall pent. This be and the rig | oe treated as s y back in add ond shall in a hts and liabil | tipend and the F lition to the secu | TRST PARTY rity amount ofonly) the verned by the |
| Now 7 | This deed of Agreement | Bond witnesse | es as follows | :- | | |
| 1. | The FIRST PARTY successful completion the FIRST PARTY fa shall pay forthwith a specified Government | of the nils to serve th sum of Rs. 10 | e Governme | ent for a perio | cialty course, <u>Mi</u> od of two year, F | BBS course. If TRST PARTY |
| 2. | The FIRST PARTY service to the Government has a of admission. | ment or till the custon in the custon | he payment is paid the dy of the C | of Rs | relating to Gra | duate Degree, ty/College and |
| 3. | The FIRST PARTY of the certificates till t | | | | | for retention |
| 4. | This BOND shall in all and the rights and I appropriate courts in | iabilities shall | | | | |
| 5. | If the FIRST PARTY PARTY shall be liable right to recover the af | e to pay inter | est at the r | ate specitied | by the Governm | ent shall have |
| 6. | The First Party shall WHEREOF parties to | | | | | |
| | For and behalf of FIF | RST PARTY | | | For and behalf | of Governor |
| | (|) | | | (|) |
| | Witnesses :- | | | | , | |

Prof. Vineeta Mittai Chairperson, U.G. Committer Dr. R.M.L.LM.S., Lucknow