

6th November 2020

ADMISSION PROCEDURE MANUAL - 2020-2021

The candidates allotted Medical / Dental Seats through -Directorate General of Health Services, (DGHS) Ministry of Health & Family Welfare Government of India, Medical Counseling Committee (MCC) (www.mcc.nic.in) the Counseling/admission process in respect of Undergraduate courses in **Medical (MBBS), Dental (BDS)**, in the respective constituent units of the University viz. **Jawaharlal Nehru Medical College, Belagavi, KLE V. K. Institute of Dental Sciences, Belagavi** for the academic year **2020-2021** as follows:

Sl. No	PROCEDURE
A	SCHEDULE OF ADMISSION PROCESS
B	REGISTRATION FOR ALLOTMENT PROCESS AT ALLOTTED INSTITUTION
C	VERIFICATION OF DOCUMENT & WILLINGNESS
D	GENERATING OF ADMISSION LETTER/SEAT CANCELLATION RECEIPT
E	ISSUE OF ELIGIBILITY CERTIFICATE
F	FEE STRUCTURE & MODE OF PAYMENT (BANK DETAILS)
G	REFUND POLICY
H	HOSTEL ADMISSION
I	OTHER RELEVANT INFORMATION
J	ANNEXURES

A. SCHEDULE OF ADMISSION PROCESS

1. The admission process will be conducted for MBBS/BDS at **KLE Deemed University, Jawaharlal Nehru Medical College Campus, Nehru Nagar, Belagavi –590010.**

2. ADMISSION PROCESS SCHEDULE*

Date	Time	Venue
1st Round of Admission		KLE DEEMED UNIVERSITY JNMC Campus, Nehru Nagar, Belagavi.
7th Nov 2020 to 12th Nov 2020 (Up to 5:00 PM, as per server time of MCC/DGHS)	10.30 AM to 01.30 PM	
	01.30 PM to 3.00 PM Lunch Break	
	3:00 PM to 05:00PM	

*Above schedule is based on SCHEDULE FOR ONLINE COUNSELLING (ALLOTMENT PROCESS) FOR NEET DEEMED / CENTRAL UNIV (MBBS/BDS) SEATS – 2020. <https://mcc.nic.in/UGCounselling/Documents/Edited-Schedule-dated-29.10.2020.pdf>

Note: Candidates are informed to visit frequently www.mcc.nic.in in case if any change in schedule

Note: The duration of the admission process may exceed the above schedule time due to various reasons, the University shall not be responsible for the delay in the admission process and the consequences there upon including pre decided travel schedule of the parents/applicants, if any.

B. REGISTRATION FOR ALLOTMENT PROCESS AT ALLOTTED INSTITUTION

- Candidate should register their name in the attendance register at the venue for admission process.
- To facilitate the admission process and save time candidates are requested to Register online and get signed copy of the form for admission process.

Click following link for registration

Medical (MBBS)	https://jnmc.contineo.in/admission/index.php
Dental (BDS)	https://dental.contineo.in/admission/index.php

C. VERIFICATION OF DOCUMENT & WILLINGNESS

- On the day of admission process, the candidate should be present physically and appear for verification of original documents, before seeking admission confirmation at Institution/allotted college and course.
- The candidate has to produce his/her provisional allotment letter along with original certificates /documents required as per the Counselling Scheme for verification.
- Both the Candidate & Parent should give Notarised undertaking for willingness to pay the fees as per University Norms (**Annexure – II**)

Note: There is no Service Bond for admitted student.

D. GENERATING OF ADMISSION LETTER / SEAT CANCELLATION RECEIPT

After documents verification, the provisional admission letter will be issued after signing by the candidate, reporting official and the Dean/Principal (in charge) of the allotted Institute.

E. ISSUE OF ELIGIBILITY CERTIFICATE:

Those of the candidates who have been allotted seat as per MCC the eligibility certificate will be issued as per their eligibility criteria prescribed by the respective Regulating Council and as per University norms for respective course.

- Eligibility for admission will be as per the Regulations of Medical Council of India (MCI) & Dental Council of India (DCI).

Following original documents along with THREE sets of attested photocopies to be submitted at the time of admission:

(Note: Photocopies of documents are to be attested by any Gazetted officer/Notary/Principal/Dean of the College.)

(Note: Keep original scanned copies of all documents with you for future use)

ANNEXURE – I

Sl. No	Arrange the following documents in the given sequence only				
<i>For GENERAL & NRI Seats</i>					
1	Duly signed Registration copy of information. (Kindly click the link and provide the online information) <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Medical (MBBS)</td> <td style="padding: 2px;">https://jnmc.contineo.in/admission/index.php</td> </tr> <tr> <td style="padding: 2px;">Dental (BDS)</td> <td style="padding: 2px;">https://dental.contineo.in/admission/index.php</td> </tr> </table>	Medical (MBBS)	https://jnmc.contineo.in/admission/index.php	Dental (BDS)	https://dental.contineo.in/admission/index.php
Medical (MBBS)	https://jnmc.contineo.in/admission/index.php				
Dental (BDS)	https://dental.contineo.in/admission/index.php				
2	MCC/ DGHS Confirmation Letter / Provisional Allotment Letter.				
3	NEET Admit Card issued by NTA-2020				
4	Score Card / Rank Letter issued by CBSE (NTA-2020)				
5	10 th / SSLC Standard marks Card for proof of Date of Birth				
6	Marks Card of 10+2 (12 th)				
7	Transfer Certificate / School Leaving / Migration Certificate (if applicable)				
8	Two recent passport-sizes colored photographs				
9	Fee remittance copy/ acknowledgement / Demand Drafts (of Nationalized / Scheduled Bank) for fees				
10	Photo Copy of PAN CARD (Candidate & Parent) for Indian Residents				
11	Copy of Aadhaar Card Compulsory for Indian Residents				
12	Caste certificate (SC/ST/OBC/EWS) (in English version)				
13	Certificate of Domicile (need to be submitted before 31 st December 2020)				
14	Annexure II				
15	<p>I. Mandatory Documents submission by NRI/Foreign Candidates : NRI / NRI ward/ OCI / PIO / Foreign Nationals Candidates:</p> <ol style="list-style-type: none"> a) Candidate's parents resident certificate issued by the Embassy of that country complying with the Income Tax Rules / any other certificates to establish evidence that they are resident of that country / affidavit on Rs.100/- e-stamp paper to that effect. b) Candidate's passport / VISA / Resident VISA. c) Citizenship of the candidate. d) Income Tax Documents required as per the Income Tax Act 1961. e) If NRI Ward - with Ward Certificate. <p>II. Mandatory Other documents as prescribed in MCC website:</p> <ol style="list-style-type: none"> a. Affidavit of the person who is NRI and the sponsorer. b. Documents claiming that the sponsorer is an NRI (Passport, Visa of the sponsorer) c. Relationship of NRI with the candidate as per the court orders of The Hon'ble Supreme Court of India in case W.P.(c) No. 689/2017-Consortium of Deemed Universities in Karnataka (CODEUNIK) & Ans. Vs Union of India & Ors. dated 22-08-2017 d. Affidavit from the sponsorer that he/ she will sponsor the entire course fee of the candidate. e. Embassy Certificate of the Sponsorer.(Certificate from consulate). f. Passport copy of the Candidate 				
16	Anti ragging undertaking by students and parents/guardians. (This has to be submitted on or before 3 rd week of December 2020). www.antiragging.in				

Note: Candidates without original certificates/documents shall not be given admission in allotted Medical/Dental College. Candidates who have deposited their original documents with any other Institute/College/University and come for admission with a certificate stating that "their original certificates are deposited with the Institute/College/ University" shall not be given admission in allotted Medical/Dental College.

F. FIRST YEAR FEES STRUCTURE FOR MBBS / BDS COURSE FOR THE YEAR 2020-21:

Fees Link: <https://kledeemeduniversity.edu.in/admissions-2020/#1572672151688-bd3ec501-f3a6>

Sl. No.	COURSE & COLLEGE NAME	ANNUAL FEES (INR) MNG/PAID SEATS	*ANNUAL FEES (\$) NRI SEATS
1.	Bachelor of Medicine, Bachelor of Surgery – (MBBS) (KAHER Jawaharlal Nehru Medical College, Belagavi)	Rs.18,28,800/-	US \$ 52,635
2.	Bachelor of Dental Surgery - (BDS) (KAHER V. K. Institute of Dental Sciences, Belagavi)	Rs.4,47,350/-	US \$ 12,100
*Note: Seats allotted under NRI category have to pay fees in US Dollar only.			

➤ **MODE OF PAYMENT**

For Management / Paid Seat (General) Category Candidates:-

➤ : - **RTGS / NEFT or Demand Draft**

FEE REMITTANCE DETAILS TO BE UPDATED BY FILLING THE GOOGLE FORM THIS LINK:

<https://forms.gle/YOJpfwPOuTwYXj6h8>

✚ **SYNDICATE BANK, BELAGAVI**

Account No	05042140000240
Account Name	THE REGISTRAR KAHER FOR ADMISSIONS
IFSC Code	SYNB0000504
MIRC Code	590025005
Branch Name	Syndicate Bank, Nehru Nagar, Belagavi

OR

✚ **AXIS BANK, BELAGAVI**

Account No	916010049680949
Account Name	KAHER (Formerly Known as KLE University Belagavi)
IFSC Code	UTIB0002941
Branch Name	AXIS BANK, Kadolkar Galli, Belgaum

OR

Demand drafts should be drawn in favor of **THE REGISTRAR KAHER FOR ADMISSIONS, Payable at Belagavi (Belgaum)**. (Demand Draft should be drawn on any nationalized / scheduled Bank)

The requisite Demand Draft **drawn on any Nationalized / Scheduled Bank** towards tuition fee for the course concerned shall be deposited at the admission counter. (Candidate shall mention his/her name, NEET Rank at the back of the Demand Dra ft.) The Demand Draft shall be purchased by the candidate / parents only. In case, the Demand Drafts are purchased by any person other than the candidate / parents for paying the tuition fee, an Undertaking has to be provided in the format prescribed by the University.

➤ **For NRI Candidates FEES Remittance Bank Details :-**

For payments of fees in US \$ for **MEDICAL**
Admissions in KAHER J. N. Medical College, Belagavi.

Beneficiary Name:	REGISTRAR, KLEU FOR JNMC BELGAUM
Beneficiary Address:	JAWAHARLAL NEHRU MEDICAL COLLEGE, NEHRU NAGAR BELGAUM KARNATAKA INDIA. PIN CODE-590010.
Beneficiary Account No.	05001070000061
Beneficiary Bank Name:	SYNDICATE BANK. BELGAUM
BANK Swift Code:	SYNBINBB155
BANK IFSC Code:	SYNB0000500
Bank Address:	MARUTHI GALLI, BEGLAUM, BELGAUM, KARNATAKA, INDIA. PIN CODE-590002.
Bank contact no.	08312405060

For payments of fees in US \$ for **DENTAL**
Admissions in KAHER V. K. Institute of Dental Sciences, Belagavi.

Beneficiary Name:	Registrar, KLEU for V K INSTITUTE OF DENTAL SCIENCE
Beneficiary Address:	V K INSTITUTE OF DENTAL SCIENCE, BELAGAVI. NEHRU NAGAR BELGAUM KARNATAKA INDIA. PIN CODE-590010.
Beneficiary Account No.	05001070000076
Beneficiary Bank Name:	SYNDICATE BANK. BELGAUM
BANK Swift Code:	SYNBINBB155
BANK IFSC Code:	SYNB0000500
Bank Address:	MARUTI GALLI BELGAUM, KARNATAKA, INDIA. PIN CODE-590002.
Bank contact no.	08312405060

FEE REMITTANCE DETAILS TO BE UPDATED BY FILLING THE GOOGLE FORM THIS LINK:

<https://forms.gle/YQJpfwPOuTwYXj6h8>

G. ## Refund Policy :-

Sl. No	Particulars	Refund Eligible
1	The Amount of Fee deduction in case of Seat Upgradation from first round to second round	<i>Paid fees will be refunded, after deducting processing charges of Rs.12,000/-</i>
2	The Amount of Fee deduction in case of seat Surrender / Resign / Cancel after completion of first round	*No fees will be refunded (Entire Course Fees need to be paid by the candidate)
<p>Note*</p> <ul style="list-style-type: none"> • However you are also liable to pay penalty (Entire course fee) if MCC/DGHS does not permit us to fill the vacant seat (due to your withdrawal) in the subsequent round • <i>Paid fees will be refunded, after deducting processing charges of Rs.12,000/-. If MCC/DGHS permits us to fill the vacant seat (due to your withdrawal) in the Subsequent rounds.</i> 		
4	In case Candidate Surrender/ Resign/ Cancel after counselling period (Institutional Mop up round).	*No fees will be refunded (Entire Course Fees need to be paid by the candidate)
5	Reimbursement Time Period.	15 Days.
6	In case candidate Surrender/Resign/ Cancel after final round of Counselling (Deemed)	The candidate will have to pay entire course fee since that seat will go vacant.

Subject to change as per the guidelines received from the concerned statutory body.

Note: In case of refund of fees against cancellation, the amount will be credited to candidates account only with valid PAN number.

The MBBS and BDS course will commence from 15th December 2020 (Tentatively).

H. HOSTEL ADMISSION :-

Hostel facility is available, both for boys & girls. The candidates desirous of seeking admission to hostels will have to apply in prescribed form. The hostel fees shall be charged separately.

For any details regarding hostel facility please contact the **Hostel Officer: +91- 0831-2474886**

Medical: <https://kledeemeduniversity.edu.in/wp-content/uploads/2020/10/HOSTEL-MBBS-.pdf>

Dental: <https://kledeemeduniversity.edu.in/wp-content/uploads/2020/10/HOSTEL-BDS.pdf>

I. OTHER RELEVANT INFORMATION :-

- Differences of opinion & disputes arising in the interpretation & implementation of the clauses in the Brochure, if any, will be referred to the Competent Authority and same will be informed to the Vice-Chancellor of the KLE University, Belagavi & his decision shall be final & binding on all the concerned.
- Any legal matter arising out of the total admission process of UG Medical /Dental Degree courses through KLE Deemed University, Belagavi will be in the courts of BELAGAVI, Karnataka State.
- **Please note:** KLE Deemed University does not have any agents, liaison / admission offices, representatives or any other office/s other than the office mentioned in this brochure. Candidates are requested not to depend upon or deal with any person or organization/s claiming to be associated with the KLE Deemed University activities or claiming to help with admission or entrance tests. KLE Deemed University will not be responsible for the same.
- **In case any candidate is found to be involved in or indulged in impersonation or any other unfair means or cheating to procure admission, KLE Deemed University reserves the right to cancel the allotted seat and forfeit of the entire amount of fees paid by such candidate. Such candidates are liable for prosecution as per the law of the land.**
- **All concerned communication will be received or sent through registered e-mail id only.**

J. List of Annexure (Download) :-

[Annexure – I \(List of documents\)](#)

[Annexure – II \(Undertaking/Bond\)](#)

[Annexure – III \(Undertaking for Demand Draft\)](#)

Note:

- **The above guidelines are not exhaustive they are only indicative. Any changes or modification of the above will be notified on website**
- The KLE Deemed University admission committee may from time to time specify for submission such other additional documents as deemed essential from all candidates through the application form or through a notification on their website.
- In case, if any of the documents produced in respect of the Clause claimed by the candidate is found to be false / incorrect, the seat allotted to the candidate will be cancelled at any stage and the entire fee amount paid by such candidate will be forfeited.
- **The eligible candidates should check the update on university website regularly.**
- **No candidates will be informed / notified individually if any updates; candidates must visit our website KLE Deemed University / MCC (www.kledeemeduniversity.edu.in & www.mcc.nic.in) frequently for any update or any notifications.**

Following original documents along with THREE sets of attested photocopies to be submitted at the time of admission:

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(Note: Keep original scanned copies of all documents with you for future use)

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15	Anti ragging undertaking by students and parents/guardians. (This has to be submitted on or before 3 rd week of December 2020). www.antiragging.in				



ANNEXURE – II

MBBS / BDS COURSE DISCONTINUATION BOND FORMAT

UNDERTAKING for General / NRI

(to be stamped on Rs.200/- stamp Paper)

I, Mr/Ms..... (Name of the Candidate), aged about.....years, S/D/o.....(Name of the Parents resident of (Permanent/present address of Parent) do hereby swear an oath as follows:

I, have been selected to the 1st MBBS course at **Jawaharlal Nehru Medical College, Belagavi** / 1st year of BDS course at **KLE V. K. Institute of Dental Sciences, Belagavi** a constituent college of **KLE Deemed University**, Deemed-to-be University under Section 3 of the UGC Act 1956 through the Common Counseling conducted by the Directorate General of Health Services (DGHS), Government of India, New-Delhi through NEET Rank No..... (All India Rank).

In consideration of admission to **1st year MBBS / BDS** course, I shall complete the MBBS/ BDS course and accordingly undertake to pay all the tuition and other fees as per University Norms.

In the event of my discontinuation of **MBBS/ BDS** course due to any reason, I along with my parent /guardian hereby undertake to pay balance tuition and other fees University, Belgaum payable for the entire course without any demur.

I have executed this affidavit in sound mind, out of free will without any force or coercion to either sign or execute this Affidavit.

Signature of the Candidate

Signature of the Parent/Guardian

VERIFICATION

This is to verify that the contents of this affidavit are true to the best of my knowledge, information and belief.

Verified aton this the day of 2020.

Identified by me

Advocate
No. of corrections.

DEPONENT



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited '**A**' Grade by NAAC (2nd Cycle)

Placed in **Category 'A'** by MHRD (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

☎ : 0831-2444444

FAX: 0831-2493777

Web: <http://www.kedeemeduniversity.edu.in>

E-mail: info@kedeemeduniversity.edu.in



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☎ : 0831-2444444

FAX: 0831-2493777

Web: <http://www.kledeemeduniversity.edu.in>

E-mail: info@kledeemeduniversity.edu.in

Annexure-III

KLE DEEMED UNIVERSITY, BELAGAVI

Undertaking for Demand Draft

Format of the Undertaking to be submitted if the Demand Drafts are purchased by any person other than the candidate/parents for paying the tuition fee.

I the
undersigned.....
.....
S/O /
D/O.....
.....
Address.....
.....
.....have purchased the demand draft bearing
number.....
.....dated.....for Rs.....favoring, Registrar,
KLE Deemed University for paying tuition fee of Dr.
.....(Rank
No.....) who is my (mention the relation with the
candidate).....

Name of the person who has purchased the Demand draft:

Signature of the person who has purchased the Demand draft

Complete Name, Address:

PAN Number:

(Photocopy of PAN card to be enclosed)