

ADMISSION PROCEDURE MANUAL – 2022-23

The candidates allotted Medical Seats through - Karnataka Examination Authority Government of Karnataka, Bengaluru (www.kea.kar.nic.in) the admission process in respect of Undergraduate courses in Medical (MBBS) in the respective constituent units of the University viz. **KLE JAWAHARLAL NEHRU MEDICAL COLLEGE, BELAGAVI (JNMC)** for the academic year 2022-23 as follows:

FIRST YEAR FEES STRUCTURE FOR MBBS COURSE FOR THE YEAR 2022-23:

ANNUAL FEE STRUCTURE		
Sl. No.	COLLEGE NAME	FEE (INR)
1.	KLE JAWAHARLAL NEHRU MEDICAL COLLEGE, BELAGAVI	Rs. 3,24,246 /- Per year

Mode of Payment: - RTGS or Demand Draft

- **RTGS Details of CANARA BANK, BELAGAVI**

(KLE JAWAHARLAL NEHRU MEDICAL COLLEGE, BELAGAVI)

Beneficiary Name:	Registrar, KAHER for JNMC Bgm
Beneficiary Address:	JAWAHARLAL NEHRU MEDICAL COLLEGE, NEHRU NAGAR, BELGAUM KARNATAKA INDIA. PIN CODE-590010.
Beneficiary Account No:	05042170000096
Beneficiary Bank Name:	CANARA BANK. BELGAUM
BANK IFSC Code:	CNRB0010504
Bank Address:	J N M C Campus, Nehru, Nagar Bgm Kar, India

OR

Demand drafts should be drawn in favor of **THE REGISTRAR KAHER FOR JNMC, 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 Draft.) 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.



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 (3rd 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.kledeemeduniversity.edu.in>

E-mail: info@kledeemeduniversity.edu.in

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

<https://kledeemeduniversity.edu.in/hostel-fees/>

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

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

ANNEXURE – I

Sl. No	Documents to be submitted while reporting		
1	Admission form/ Registration copy of information. (Kindly click the link and provide the online information) <table border="1" style="margin-left: 20px;"> <tr> <td style="color: green;">Medical (MBBS) JNMC Belagavi</td> <td>https://jnmc.contineo.in/admission/index.php</td> </tr> </table>	Medical (MBBS) JNMC Belagavi	https://jnmc.contineo.in/admission/index.php
Medical (MBBS) JNMC Belagavi	https://jnmc.contineo.in/admission/index.php		
2	KEA Confirmation Letter / Provisional Allotment Letter.		
3	KEA Document acknowledgement slip		
4	NEET Admit Card issued by NTA-2022		
5	Score Card / Rank Letter issued by CBSE (NTA-2022)		
6	10 th / SSLC Standard marks Card for proof of Date of Birth		
7	Marks Card of 10+2 (12 th)		
8	Transfer Certificate / School Leaving		
9	Migration Certificate (if applicable need to be submitted before 15 th December 2022)		
10	Study certificate		
11	Two recent passport-sizes colored photographs		
12	Fee remittance – Annexure - III		
13	Photo Copy of PAN CARD (Candidate /Parent) for Indian Residents		
14	Copy of Aadhaar Card Compulsory for Indian Residents		
15	Caste certificate (for candidates claiming reservations)		
16	Category/Quota certificate if any		
17	Certificate of Domicile		
18	Original challan for having fee paid in KEA		
19	UG NEET KEA Application form		
20	Rural Service Bond as per KEA (ANNEXURE – 9)		
21	Annexure II		
22	Anti-Ragging undertaking by students and parents. (This has to be submitted on or before 25 th December 2022). www.antiragging.in		



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ANNEXURE – II

MBBS COURSE DISCONTINUATION BOND FORMAT (UNDERTAKING)

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 **KLE Jawaharlal Nehru Medical College, Belagavi** a constituent college of **KLE Academy of Higher Education and Research (KAHER) Belagavi**, Deemed-to-be University under Section 3 of the UGC Act 1956 through Deemed-to-be University under Section 3 of the UGC Act 1956 through the Common Counseling conducted by the Karnataka Examination Authority (KEA), Government of Karnataka, through NEET Rank No..... (All India Rank).

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

In the event of my discontinuation of **MBBS** 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 2022.

Identified by me

Advocate
No. of corrections.

DEPONENT

Note: - for e-stamp / Bond paper of Rs.200/- to be Notarized. (Karnataka state)

FIRST PARTY: - Candidates Name

SECOND PARTY: - Registrar, KAHER, Belagavi



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ANNEXURE – III

FEE REMITTANCE DETAILS

NEET Roll No:	
Name of the Candidate:	
NEET All India Rank:	
Seat allotted:	
Bank Name:	
Remitter Name:	
Remitter account No:	
IFSC Code:	
Reference Number/UTR No/ DD Number	
Date of Transaction:	
Remitted Amount:	
Candidate Contact No	
Alternate Contact No	
Email ID	
Signature of the candidate	_____