**GOVERNMENT OF MEGHALAYA**

**HEALTH & FAMILY WELFARE DEPARTMENT**

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**PROVISIONAL SEAT ALLOTMENT LETTER**



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| 1. CANDIDATE DETAILS | |
| Name of Candidate : |  |
| Roll No. (NEET-UG) : |  |
| Category : | ☐ Khasi & Jaintia ☐ Garo ☐ UR ☐ SC/OST |
| Gender : | ☐ Male ☐ Female ☐ Other |
| Date of Birth: | \_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_ (DD/MM/YY) |

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| 1. ALLOTMENT DETAILS | |
| Allotted Round: | ☐ Round 1 ☐ Round 2 ☐ Round 3 ☐ Stray Vacancy Round |
| Course Allotted: | MBBS |
| Institute Allotted: | P.A. Sangma International Medical College & Hospital (PIMC), USTM, Meghalaya |
| Allotted Quota & fees: | ☐ State Quota (\*Annual Tuition Fees payable: Rs. 4,95,000.00)  ☐ Management Quota (\*Annual Tuition Fees payable: Rs. 22,00,000.00)  ☐ NRI Quota (Annual Tuition Fees payable: $ 43,000.00) |

**\* Annual Tuition Fees shall be inclusive of Admission Fee, Registration Fee and Examination Fee.**

1. **INSTRUCTIONS TO CANDIDATE**
2. The candidate must complete the admission process and deposit the prescribed Tuition fee in favour of PIMC, USTM on or before **2nd October, 2025** during working hours. Failure to do so will lead to cancellation of the seat.
3. Candidates are required to produce all original documents (academic, NEET scorecard, category certificate if applicable, ID proof, etc.) at the time of admission.
4. If the candidate wishes to surrender the seat after admission, they must follow due process and obtain a Seat Surrender Receipt from the competent authority.
5. **DECLARATION BY THE CANDIDATE**

I hereby declare that all information furnished and documents submitted by me are true and correct to the best of my knowledge. I understand that if any information or document is found to be false, fabricated, or misleading at any stage of my admission or course of study, my admission shall be cancelled forthwith, and I shall be liable for expulsion from the Institution as well as for any legal action as deemed appropriate under applicable laws.

Full Signature of the Candidate: ………………………………………………………………

Date : ………………………

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| **NOTE:**  **This allotment letter shall be submitted by the candidate during to PIMC during the time of admission. The institution and counselling authority shall not be held responsible for any discrepancy arising from incorrect information furnished by the candidate.** |