

URGENT

E-MAIL

TO : ADG/APS AND ALL SECTOR IsG, CISF  
FROM: WELFARE DTE. CISF HQRS NEW DELHI

NO.E-42099/MBBS/BDS-WEL/2018/ - 496

DATED: 20 May, 2018

**CENTRAL POOL MBBS/BDS SEATS FOR WARDS OF CAPFs FOR ACADEMIC SESSION**

**2018-19**(.) APPLICATIONS OF ELIGIBLE WARDS OF COMBATISED FORCE PERSONNEL ARE TO BE FORWARDED TO MHA UNDER GOVT SCHEME PRESCRIBED FOR CENTRAL POOL MBBS/BDS SEATS FOR CAPFs IN THE FOLLOWING CATEGORY(.)

PRIORITY -I : WARDS/WIDOW OF THOSE KILLED IN ACTION

(i.e THOSE WHO ARE ELIGIBLE FOR LPA (.)

PRIORITY -II : WARDS/WIDOWS/WIVES OF PERSONNEL PERMANENTLY DISABLED IN ACTION AND BOARDED OUT FROM SERVICE(.

PRIORITY -III : WARDS OF ALL SERVING AND RETIRED PERSONNEL (.)

COPY OF APPLICATION IN FORMAT FOR SENDING BIO-DATA IS ALSO ENCLOSED (.)

THE SAME MAY PLEASE BE CIRCULATED TO ALL HQRS/ESTTs/UNITS/BNs/RTCs UNDER YOUR JURISDICTION INCLUDING RETIRED PERSONNEL OF YOUR SECTOR(.

10<sup>TH</sup> CLASS CERTIFICATE AS PROOF OF DATE OF BIRTH COMMA MARK SHEET OF 12<sup>TH</sup> CLASS COMMA **ENTRANCE TEST BY NEET ARE ALSO REQUIRED** (.) A COPY OF

UNDERTAKING COMMA FORM-O AND FITNESS CERTIFICATE IS ALSO ENCLOSED WHICH MAY BE ATTACHED WITH THE APPLICATION FORM OF ALL ELIGIBLE WARDS

OF RETIRED/SERVING PERSONNEL (.) IT MUST ALSO BE ENSURED THAT WARDS OF

FORCE PERSONNEL APPLYING FOR BOTH COURSES i.e. **MBBS AND BDS, WILL GIVE SEPARATE APPLICATION IN DUPLICATE FOR EACH MBBS AND BDS SEAT AND**

**INDICATE THEIR PREFERENCE** (.) ON RECEIPT OF APPLICATIONS OF WARDS OF

FORCE PERSONNEL OF YOUR SECTOR COMMA SAME SHOULD BE SCRUTINIZED AND FIT CASES ONLY BE FORWARDED IN A CONSOLIDATED SEPARATE CATEGORY-

WISE PROFORMA (i.e. GEN,SC AND ST) IN BOTH COURSES (MBBS AND BDS) FORM SO AS TO REACH TO THIS DIRECTORATE (WELFARE BRANCH) IMMEDIATELY AFTER

DECLARATION **OF RESULT OF NEET 2018** (.) IT MUST ALSO BE KEPT IN VIEW THAT

APPLICATIONS ARE ACCOMPANIED BY A MERIT LIST (AS PER ENCLOSED PROFORMA DULY MENTIONING THE ABOVE CATEGORY i.e. PRIORITY-I, PRIORITY-II

& PRIORITY-III) IN DUPLICATE EACH FOR MBBS AND BDS DRAWN IN DESCENDING ORDER DULY COUNTERSIGNED BY THE UNIT IN-CHARGE

ENSURING THAT INFORMATION SO FURNISHED IN THE APPLICATION FORM ARE CORRECT IN ALL RESPECT(.) IT IS FURTHER INFORMED THAT DIRECTION IN THIS REGARD HAS NOT BEEN RECEIVED SO FAR FROM MHA (.) IT SHALL BE NECESSARY FOR THE CANDIDATES TO OBTAIN MINIMUM MARKS AT 50<sup>TH</sup> PERCENTILE AT NEET 2018(.)HOWEVER, IN RESPECT OF CANDIDATES BELONGING TO SCHEDULED CASTES, SCHEDULED TRIBES, THE MINIMUM MARKS SHALL BE AT 40<sup>TH</sup> PERCENTILE COMMA IN RESPECT OF CANDIDATES WITH LOCOMOTORY DISABILITY OF LOWER LIMBS, THE MINIMUM MARKS SHALL BE AT 45<sup>TH</sup> PERCENTILE(.) LIST OF COLLEGES AND NUMBER OF SEATS RESERVED FOR WARDS OF ALL CAPFs PERSONNEL IN MBBS AND BDS ARE AS UNDER AS PER THE LAST ACADEMIC YEAR(.)


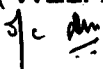
**MBBS**

(1)	LADY HARDINGE MEDICAL COLLEGE	:	NEW DELHI	:	01
(2)	MEDICAL COLLEGE	:	ALAPPUZHA (KERALA)	:	01
(3)	NSCB MEDICAL COLLEGE	:	JABALPUR (M.P)	:	01
(4)	GOVT. MEDICAL COLLEGE	:	RAJNANDGAOH (CHHATTISGARH)	:	01
(5)	B.J. MEDICAL COLLEGE	:	PUNE (MAHARASHTRA)	:	01
(6)	GOVT. MEDICAL COLLEGE	:	NAGPUR (MAHARASHTRA)	:	01
(7)	GRANT MEDICAL COLLEGE	:	MUMBAI (MAHARASHTRA)	:	01
(8)	S.P MEDICAL COLLEGE	:	BIKANER (RAJASTHAN)	:	01
(9)	MLN GOVT. MEDICAL COLLEGE	:	ALLAHABAD (UP)	:	01
(10)	SILCHAR MEDICAL COLLEGE	:	SILCHAR (ASSAM)	:	01
(11)	S.K. MEDICAL COLLEGE	:	MUZAFFARPUR (BIHAR)	:	01
(12)	R.I.M.S	:	RANCHI (JHARKHAND)	:	02
(13)	P.M.CH	:	DHANBAD (JHARKHAND)	:	02
					TOTAL : 15

**BDS**

(1)	Dr. R.AHMED DENTAL COLLEGE	:	KOLKATA (WB)	:	01
(2)	GOVT. DENTAL COLLEGE	:	RAIPUR (CHHATTISGARH)	:	01
(3)	K.G DENTAL COLLEGE	:	LUCKNOW (UP)	:	01
					TOTAL : 03

ANY CHANGE IN CRITERIA IN METHOD/ SYSTEM IF ANY, RECEIVED FROM MHA WILL BE COMMUNICATED SUBSEQUENTLY (.) KINDLY ACCORD PRIORITY TO THIS MATTER BEING MOST URGENT(.) MSG ENDS(.)

  
 (TAPASYA OBHRAI NAIR)  
 AIG ( WELFARE )  


ENCL:-AS ABOVE

**Internal :-**

1. All AIsG at FHQrs :- For information and similar action, please.
2. AIG/TECH,FHQ :- Please display immediately the contents of the message and its enclosures on the CISF website.



**APPLICATION FORM FOR RESERVATION OF SEATS IN MEDICAL / DENTAL  
COLLEGES FOR CAPFs PERSONNEL AGAINST ALLOCATION OF CENTRAL  
POOL MBBS/ BDS SEATS FOR THE ACADEMIC YEAR 2019-19**

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APPLICATION FORM FOR : MBBS/ BDS  
(APPLY FOR MBBS & BDS SEPARATELY)

1.	Name of the Student (in block letters)	:	
2.	Rank, <del>(Regt)</del> No., Name of father with unit/HQr address (in case of widow applied for herself, intimate Rank, Regt. No., Name of husband with unit/HQr)	:	
3.	Present complete Address with contact Phone No.	:	
4.	Permanent Address with contact Phone No.	:	
5.	Date of Birth of student (Copy of 10 <sup>th</sup> Mark sheet/ certificate to be attached for verification of DOB)	:	
6.	Category of candidates i.e., whether belongs SC/ST/OBC or otherwise.	:	
7.	Category of candidates should be mentioned out of three category mentioned below :-	:	
(a)	Category "A" : Wards/Widow wives of personnel those Killed in action who are eligible for LPA.		Certificate to be attached as per Appendix 1.
(b)	Category "B": Wards/widow wives of personnel permanently disabled in action and boarded out from service.		Certificate to be attached as per Appendix 2.
(c)	Category "C" : Wards of serving / retired BSF personnel and wards of widow of normal death cases.		Certificate to be attached as per Appendix 3.
Contd....P/2			

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8.	Mark obtained in entrance exam conducted by the beneficiary State/UT/ Govt. Department, If the beneficiary State /UT/Govt Deptt is not conducting any examination, marks obtained by the student in All India Pre-Medical Entrance Test(AIPMT) conducted by CBSE. (The selection of students will not be made merely on academic merit of 10+2 marks)	:	Physics : _____ Chemistry : _____ Biology : _____ Total : _____ (Result sheet should be attached)
9.	Undertaking to be attached as per proforma enclosed	:	Yes / No
10.	Attested copy of Mark sheet of 10+2 to be attached	:	Yes / No
11.	Medical certificate of candidate duly signed by the MO to be attached	:	Yes / No
12.	Character certificate of candidates issued by the School authority to be attached	:	Yes / No

I hereby declared that the above particulars are checked and found correct as per my knowledge and in case of any incorrect, my candidature can be cancelled.

(Signature of Student)

(Signature of Parents/Guardian)

UNDERTAKING

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\_\_\_\_\_, Son/daughter of \_\_\_\_\_

OR

I, \_\_\_\_\_ IRLA/Force No./ID No. \_\_\_\_\_

Serving in \_\_\_\_\_ (Force/IB ) as \_\_\_\_\_

resident of \_\_\_\_\_

hereby give undertaking that none of my siblings / children has earlier been selected for a MBBS/BDS seat under Central Pool Quota for wards of CAPFs & AR & IB personnel. In case the above information is found to be false at any stage, I may be debarred from pursuing the MBBS/BDS courses for which I have been selected under Central Pool quota (in case of the candidate)

OR

suitable disciplinary action may be taken against me ( in case of the parent / personnel).

(Signature of Parents/Guardian)

(Signature of Candidate)

**FITNESS CERTIFICATE**

Certified that I have examined Kumari/Master \_\_\_\_\_  
D/O/S/O Shri \_\_\_\_\_, CISF and found that  
she/he is physically fit to undergo MBBS/BDs course. Her/his signatures are appended  
below:-

Specimen Signature:- \_\_\_\_\_

**Medical officer**

Place:- \_\_\_\_\_

Date:- \_\_\_\_\_

**FORM "O"**

**FOR SON/DAUGHTER OF SERVING OFFICER/SOs/ORs**

This is to certify that No. \_\_\_\_\_ Rank \_\_\_\_\_  
Name \_\_\_\_\_ is presently serving in the  
unit and his date of retirement is \_\_\_\_\_.

Signature with full particulars of  
Attesting Officer