

**SHRI SHANKARACHARYA INSTITUTE OF MEDICAL  
SCIENCES**

**JUNWANI, BHILAI (C.G.)**

**PUBLIC NOTICE**

It is informed to the general public that admission for the session 2024-25 in Shri Shankaracharya Institute of Medical Sciences, Junwani, Bhilai (Chhattisgarh) will be done only on the basis of NEET merit through online counseling by the counseling committee constituted by the Directorate of Medical Education. No outsider or concerned person/employee of the institution can get anyone admitted.

No agent or person is authorized for admission in Shri Shankaracharya Institute of Medical Sciences, Junwani, Bhilai (Chhattisgarh). So don't be confused, don't get misled by any person or agent.

For any kind of information related to admission contact Directorate of Medical Education Raipur (Chhattisgarh).

सर्वसाधारण को सूचित किया जाता है कि श्री शंकराचार्य इंस्टीट्यूट ऑफ मेडिकल साइंसेस, जुनवानी, भिलाई (छ.ग.) में सत्र 2024-25 हेतु प्रवेश केवल संचालनालय चिकित्सा शिक्षा में गठित काउंसलिंग समिति के द्वारा ऑनलाईन काउंसलिंग के माध्यम से नीट मैरिट के आधार पर किया जावेगा। कोई भी बाहर का व्यक्ति अथवा संस्था के संबंधित व्यक्ति/कर्मचारी किसी का भी प्रवेश नहीं करा सकते हैं।

श्री शंकराचार्य इंस्टीट्यूट ऑफ मेडिकल साइंसेस, जुनवानी, भिलाई (छ.ग.) में प्रवेश दिलाने हेतु किसी भी एजेंट या व्यक्ति को अधिकृत नहीं किया गया है। अतः भ्रम में ना रहें, किसी भी व्यक्ति या एजेंट के बहकावे में ना आएं।

प्रवेश से संबंधित किसी भी प्रकार की जानकारी के लिए संचालनालय चिकित्सा शिक्षा रायपुर (छ.ग.) में संपर्क करें।

Dean  
SSIMS Bhilai (C.G.)

**SHRI SHANKARACHARYA INSTITUTE OF MEDICAL SCIENCES**  
**JUNWANI, BHILAI (C.G.)**

**REQUIRED DOCUMENTS LIST FOR MBBS ADMISSION 2024**

**Documents to be submitted at the time of verification at scrutiny centre:-**

- 1 Allotment Letter
- 2 Scrutiny Receipt
- 3 Demand Draft of Rs. 10,74,187/- (In Favor of SSIMS, College 1, Payable at Bhilai)
- 4 Demand Draft of Rs. 3,02,700/- (In Favor of SSIMS, Hostel 1, Payable at Bhilai)
- 5 Bank Guarantee of Rs. 7,99,187/- (Kindly see – [www.ssimsb.ac.in](http://www.ssimsb.ac.in) for format)
- 6 NEET Admit Card
- 7 NEET Score Card
- 8 10<sup>th</sup> Marksheet
- 9 12<sup>th</sup> Marksheet
- 10 Transfer Certificate
- 11 Character Certificate
- 12 Migration Certificate
- 13 Cast Certificate (If applicable)
- 14 Domicile Certificate
- 15 Gap Certificate (If applicable)
- 16 Income Certificate of Last Three Year (For OBC)
- 17 FF/PH/SS Certificate (If applicable)
- 18 Medical Fitness Certificate
- 19 Breakage Bond (Kindly see – [www.ssimsb.ac.in](http://www.ssimsb.ac.in) for format)
- 20 Affidavit for Correctness of Documents (Kindly see – [www.ssimsb.ac.in](http://www.ssimsb.ac.in) for format)
- 21 Aadhaar Card of Student & Parent
- 22 08 Passport Size Photo
- 23 05 Set Xerox of all Documents

**Documents to be submitted at the time of reporting in institute:-**

- 1 EDRP Registration Receipt
- 2 Id Card Format
- 3 Hostel Allotment Letter

Authorized Signatory  
SSIMS, Bhilai (C.G.)

**SHRI SHANKARACHARYA INSTITUTE OF MEDICAL SCIENCES**  
JUNWANI, BHILAI (C.G.)

**FEES STRUCTURE**  
FOR  
**MBBS ADMISSION BATCH 2024**

Sr. No.	Type of Fees	Amount
1	Tuition Fees	Rs. 7,99,187/-
2	Caution Money	Rs. 25,000/- (Refundable)
3	Transportation Charges	Rs. 2,50,000/-
4	Hostel Charges	Rs. 3,02,700/-
<b>Total – 13,76,887/- (Rs. Thirteen Lacs Seventy Six Thousand Eight Hundred and Eighty Seven Only)</b>		
<b>Fees For NRI Candidate – 35000/- US Dollar Per Year</b>		

**Important Note:-**

**1. Demand Draft Details For Fees Payment-**

- **DD of Rs. 10,74,187/-** In favor of 'SSIMS College 1'  
Which is payable at Bhilai
- **DD of Rs. 3,02,700/-** In favor of 'SSIMS Hostel 1'  
Which is payable at Bhilai

**2. As per Gazette Notification of Government of Chhattisgarh, Department of Medical Education, (कमांक – एफ21-02/2018/नौ/55-4 दिनांक 25 मई 2018) , Bank Guarantee of One Year Tuition Fees is mandatory to all students admitted in Private Medical Colleges.**

Dean  
SSIMS, Bhilai (C.G.)



To be made on Rs. 250/- Stamp paper

To

The Dean

Shri Shankaracharya Institute of Medical Sciences, Bhilai (C.G.)

Dear Sir,

**Bank Guarantee Number:-**

**Date of Issuing Bank Guarantee:-**

**Amount of Guarantee:- Rs. 7,99,187/- Only**

**Guarantee Coverage Duration:- Date of Admission \_\_\_/\_\_\_/2024 to \_\_\_/\_\_\_/2028**

**Last Date for Lodgment of Claim:- 30/09/2028**

Whereas in consideration of your agreeing to allot admission to MBBS Course to Mr. ....

.....S/O-D/O .....

R/O.....

(hereinafter referred to as 'Party' which expression shall include his/her successors and assigns) on furnishing a bank guarantee of equivalent value in the manner hereinafter contained.

We.....Bank , a body corporate constituted under Banking Companies (Acquisition and Transfer of Undertakings) Act 1970, having its Head Office at.....and interalia a branch office at .....(hereinafter referred to as 'The Bank' which expression shall, unless repugnant to the context, include its successors and assigns) do hereby covenant and agree with you as follows...

1. We hereby undertake to pay to you the sum in aggregate not exceeding Rs. **7,99,187/-** (Rs. Seven Lacs Ninty Nine Thousand One Hundred and Eighty Seven Only) representing the course fees in the manner detailed below.

(a). Rs. **7,99,187/-** (Rs. Seven Lacs Ninty Nine Thousand One Hundred and Eighty Seven Only) from date of admission to **30/09/2028** without demur, merely on the first written demand signed by you or by your duly authorized representative. Any such demand made on us shall be conclusive as regards the amount due and payable to you by us under this guarantee.

2. This guarantee shall come in to force from date of issue of guarantee and shall remain in full force and effect up to and including **30/09/2028**.

To be made on Rs. 250/- Stamp paper

3. Notwithstanding anything contained hereinabove

(a). Our liability under this Guarantee is restricted to Rs. **7,99,187/-** (Rs. Seven Lacs Ninty Nine Thousand One Hundred and Eighty Seven Only).

(b). This Guarantee shall remain valid up to **30/09/2028**.

(c). We are liable to pay the guarantee amount or any part thereof under this Bank Guarantee only if you serve us a written claim or demand on or before 30 days (Thirty Days) after the date of claim period as mentioned column number 3 against each payment due from the part as shown in the below mentioned schedule-

<b>Date of Payment to be made by Party</b>	<b>Amount Due</b>	<b>Date of Expiry of Claim Period</b>
<b>01/04/2025</b>	<b>Rs. 7,99,187/- Only</b>	<b>30/09/2028</b>

Signed and delivered this.....day of .....2024.

Signature of Bank Official with Stamp

**COURSE DISCONTINUATION/BREAKAGE BOND**

I, Mr / Ms/Dr....., aged about..... Years,  
S/D/O..... resident  
of.....  
do hereby swear an oath as follow:

I have been selected to the 1<sup>st</sup> MBBS/MD/MS.....  
course at Shri Shankaracharya Institute of Medical Sciences, Bhilai (C.G.) through the  
C.G. State counseling conducted by the Directorate of Medical Education, Government of  
Chhattisgarh, Raipur through NEET Rank No..... (AIR).

I, say that on my own will and along with my parents/ guardian took admission  
to the MBBS/MD/MS..... course at Shri Shankaracharya  
Institute of Medical Sciences, Bhilai (C.G.) as per the CGDME Allotment No.  
..... Dated.....

I, say in consideration of admission to 1<sup>st</sup> MBBS/MD/MS  
..... course, I Shall complete the MBBS/MD/MS course and  
accordingly undertake to pay all the tuition and other fees as demanded by Shri  
Shankaracharya Institute of Medical Sciences, Bhilai (C.G.).

In event of my discontinuation of MBBS/MD/MS course due to any reason; I  
along with my parent/ guardian hereby undertake to pay balance tuition and other fees  
to Shri Shankaracharya Institute of Medical Sciences, Bhilai (C.G.) payable for the entire  
course without any demur.

What is stated above is true and correct. I along with my parent/ guardian do  
hereby undertake to act accordingly.

Place:-.....

Date:-.....

Signature of the candidate

Signature of the Parent/ Guardian

To be furnished in Rs. 100 Stamp

**UNDERTAKING**

Date- .....

I, .....S/D of .....

R/O .....

have been admitted in Shri Shankaracharya Institute of Medical Sciences Bhilai under Government /Management/NRI Quota for Session 2024-25. I have submitted original documents required for admission in this college.

I declare that all documents submitted by me, are true and correct to best of my knowledge.

If any falsification is found, Government/ University/DME/ College Management is liable to cancel my Candidature/ Enrolment and I am solely responsible for any sort of legal action taken by Government /University/DME/ College Management, against me.

Signature of Student

Signature of Parent/Guardian