

**OFFICE OF THE CONTROLLER OF EXAMINATIONS**  
**Aligarh Muslim University, Aligarh.**

**IMPORTANT INSTRUCTIONS**  
**For MBBS / BDS Courses 2025-26**

Candidates selected for admission at A.M.U., Aligarh in the above courses are required to register ONLINE on the University's Counselling Portal '[counselling.amuonline.ac.in](http://counselling.amuonline.ac.in)' for creating their ONLINE Counselling Account. Candidates are advised to read the User Manual available on the Counselling Portal ([counselling.amuonline.ac.in](http://counselling.amuonline.ac.in)) for detailed instructions and rules. Candidates should note that at the time of Registration, Roll No. and Application No. refer to their NEET Roll Number.

After registration and subsequent login, the candidates are required to upload the colored Scanned Copy of the following:

1. Latest Front Facing good quality colored Photo with white background & signature
2. Secondary School (Class 10<sup>th</sup>) Certificate detailing the Date of Birth
3. Date of Birth Certificate (if Secondary School Certificate does not bear the same)
4. Marks Sheet/ grade sheet of qualifying examination (Senior Secondary School Certificate).
5. Admit Card of NEET (UG) 2025 exam issued by National Testing Agency (NTA)
6. Provisional allotment letter issued by MCC.
7. Result/ Rank letter of NEET (UG) 2025 issued by NTA

**Note:**

- (i) The candidate who possess the Internet downloaded marks-sheet / grade-sheet of qualifying examination may be considered for provisional admission to the course concerned if the same is attested by the Controller / Registrar / Issuing Authority of the concerned University / Board or Principal / Head of the School / College / Institution concerned.

Such a candidate shall give an undertaking on prescribed Proforma (as given in Appendix IV) to submit the Original Marksheet/Grade Sheet of the qualifying examination in the Office of the Dean, Faculty of Medicine to submit the same by 03.10.2025.

If any discrepancy is found in the examination result of the aforesaid candidate or the original Marksheet/Grade sheet is not submitted by the stipulated time, the University reserves the right to cancel his/her admission.

- (ii) If the result of qualifying examination of a candidate has not been declared at the time of counselling, such a candidate will not be eligible for provisional admission. Candidates awaiting results of their Annual / Supplementary / Compartmental / Improvement examination shall not be considered for admission.

8. Proof of identity (Aadhar/ PAN/ Driving License/ Passport).
9. NRI/ OCI candidates are required to upload the following additional documents:
  - a) Copy of the passport of sponsorer
  - b) Sponsorship affidavit (stating that sponsorer is ready to bear the expenses for the whole duration of study)
  - c) Relationship Affidavit (Relation of Candidate with the sponsorer)
  - d) NRI certificate/Employment certificate attested by Indian Embassy
  - e) The NRE Bank Account Number in India with copies of relevant valid document(s)duly attested by the concerned bank from which payment is to be made

After uploading the documents, the candidates are required to report in person along with the above detailed original documents for verification and to complete all other Admission requirements at Dean's Office, Faculty of Medicine, AMU, Aligarh, on the given date and time as notified by the Medical Counselling Committee (MCC). The candidates are also required to produce & submit following additional documents at the time of physical reporting:

1. Medical Fitness Certificate on prescribed Format (**available on our website**).
2. Transfer / Migration and Character Certificate from the Institution last attended (if not enrolled at AMU). If the Certificate(s) is/are not available, the candidates may give an undertaking on the prescribed format to submit the same in a month's time from the date of admission.
3. Name Removal Certificate from the rolls of the concerned Faculty / College / Institution (if already enrolled to any full time course of study in any institution), if applicable.
4. Undertaking before the Vice-Chancellor, AMU, Aligarh on plain paper regarding Compulsory 75% Attendance in each Subject / Course / Paper as per MCI / DCI norms.
5. **Affidavits on simple plain paper** – one on the candidates behalf and the other on behalf of the candidates parents / guardian regarding not to indulge in ragging. The sample format of these Affidavits are available on the website [www.amucontrollerexams.com](http://www.amucontrollerexams.com)

**NOTE:**

1. 02 – 03 days may be required to complete all the admission related formalities.
2. Admission fee of Rs. 55900/- for Non-Residents and Rs.59400/- for Residents (for MBBS) and Rs. 48600/- for Non-Residents and Rs.52100/- for Residents (for BDS) will be paid ONLINE using their Login Credentials.
3. **In addition to online mode, the additional NRI Fee (wherever applicable) may also be payable in the form of Demand Draft in the favour of Finance Officer, AMU, Aligarh, to be paid at the time of admission.**
4. No candidate shall be admitted unless he/she has completed all the eligibility requirements at the time of admission and paid the requisite fee.
5. Hostel Accommodation is not guaranteed. Students allotted a Hall of Residence will have to pay three months Dining Hall Charges at the time of room allotment.
6. Candidates are required to produce the following downloadable Medical Checkup form at the time of reporting for admission, countersigned by C.M.O./M.O./ Incharge, Govt. Hospital (with Seal & Date).

**(MEDICAL CHECKUP FORM)**  
**MBBS/BDS COURSE**

**Dated:** \_\_\_\_\_

Photograph

**Full Name (in Capital)** : .....

**Father's Name** : .....

**Permanent Address** : .....

**Date of Birth (in words)** : .....

**(in figure)** : .....

**By Physician:**

**General Examination:**

Appearance

Weight

Height

Skin

Pulse

Anemia

B.P

Jaundice

Oral Cavity

Lymph Nodes

Nails

Spine

C.V.S.

Respiratory System

Abdomen

C.N.S.

**Remarks**

**Fit/Unfit**

**Signature**  
(with Seal & Date)

**By Ophthalmologist:**

V/A

using/not using glasses

Color vision

Fundus

**Remarks**

**Fit/Unfit**

**Signature**  
(with Seal & Date)

**Countersigned by C.M.O./M.O./Incharge, Govt. Hospital**  
(with Seal & Date)