



**Government of Karnataka**  
**HAVERI INSTITUTE OF MEDICAL SCIENCES**  
**HAVERI-581110**  
(Autonomous Institution of Government of Karnataka)

**PROFORMA FOR ADMISSION TO UNDER GRADUATE (MBBS) COURSE  
FOR THE  
ACADEMIC YEAR 2023-24.**

**GENERAL INSTRUCTIONS FOR THE STUDENTS WHO ARE TAKING ADMISSION  
FOR 1<sup>st</sup> MBBS COURSE AT HAVERI INSTITUTE OF MEDICAL SCIENCES, HAVERI (HIMS).**

1. Students must report in Principal's/Deans office at HIMS for MBBS admission on or before date indicated on their selection letter issued by KEA/ NEET AIQ by 10-00 am. If any student fails to report before the last date indicated in the office letter, his/her admission will stand cancelled and the same will be intimated to concerned authorities.
2. One of the parent / guardian must accompany students at the time of admission or surrendering seats as certain documents are to be signed by them.
3. The admission process is likely to take more than one day. Outstation candidates are requested to not make hurry in admission or surrendering seats.
4. The admission offered to a candidate will be only provisional. DME/RGUHS/MCC-DGHS are final authorities.
5. As the original documents will be sent to Rajiv Gandhi University of Health Sciences, Bangalore for admission approval, students are instructed to keep atleast 3 Xerox copies of original documents with themselves for future use.
6. Institute working hours: 10.00 am to 1.30 pm and 2.15 pm to 5.00 pm.
7. Each candidate must submit the following original certificates shown below along with three sets of attested copies. The originals and Xerox must be produced in the prescribed sequence. **CANDIDATES MUST PROVIDE ONE FILE/FOLDER FOR THEIR ORIGINAL DOCUMENTS.**
8. In case of AIQ/NEET seats- seat surrender procedure will be duly followed. Kindly generate online seat surrender receipt and contact the NODAL officer of HIMS Haveri Dr. Kavana G Venkatappa on phone 08375-200015 / 9591018000. Kindly report on working days and take a note of Karnataka holiday schedules. **SUNDAY WILL BE HOLIDAY & on any other national holidays, the college office will remain closed.**

Note:

- 1. Students admitting through KEA shall pay fees as prescribed by the KEA and reporting college other fee amount to Institution - HIMS HAVERI**
- 2. Students belonging to SC/ST category shall also pay tuition fees and register for reimbursement under SSP Karnataka.**

**REQUISITION LETTER**  
**(FOR AIQ/KEA-NEET-2023 STUDENTS)**

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To  
The Director,  
Haveri Institute of Medical Sciences  
Haveri

Date :

Sir,

Sub:- Application for admission to I Year MBBS course at HIMS Haveri allotted through **AIQ/KEA-NEET-2023** – reg.

I, Sri / Kum. \_\_\_\_\_

S/o, D/o. \_\_\_\_\_ have been allotted MBBS seat at HIMS Haveri by AIQ/KEA through NEET-2023 Counseling. My details are as follows :

**FOR AIQ/KEA-NEET-2023 STUDENTS**

Admission Order No :  
Date of issue :  
NEET No :  
Roll No :  
Rank :  
Claimed Category :  
Allotted Category :  
Fee paid at KEA :  
Date of Reporting :

I am herewith enclosing the Challan for Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_) (Only)

Bearing No. \_\_\_\_\_ Dated \_\_\_\_\_ of \_\_\_\_\_

(Name of the Bank) towards admission fees along with necessary original documents.

Hence, I request you to admit me at HIMS Haveri for I MBBS course. Admission taken by me is at my own risk & request. I am aware that my admission is subject to the approval of the concerned competent authorities for which HIMS Haveri will not be held responsible for any consequences / objections arise in future.

Further I hereby affirm that the information provided by me at HIMS Haveri during Ist year MBBS admission is true and correct to the best of my knowledge. If at any stage, the information / documents submitted by me is found to be false / invalid; my admission will be liable to be cancelled / withdrawn.

Yours faithfully,

(Signature of the candidate)

(Signature of the parent /  
Guardian of the student)

**ADDRESS FOR CORRESPONDENCE :**

**From :**

**HAVERI INSTITUTE OF MEDICAL SCIENCES,HAVERI**  
**Instructions for students seeking Admission to First MBBS**  
**(Academic Year 2023-24)**

**Original documents along with Three Sets of Attested Photocopies and a Soft Copy [in pdf format below 150 KB only] of all the documents individually scanned and labelled alongwith Photograph(JPG format below 50 KB) on a pen drive to be submitted in the following order.**

1. NEET UG Score card.
2. NEET UG Admit card.
3. NEET UG Rank Card.
4. NEET /KEA Allotment Order.
5. SSLC Marks Card / Birth Certificate.
6. II PUC/12<sup>th</sup> Standard Marks card.
7. Study Certificate 1<sup>st</sup> Std to 12<sup>th</sup> Std
8. Transfer Certificate.
9. Domicile Certificate.
10. Caste Certificate. (For candidates claiming Reservation)
11. Income Certificate of Parent. (For candidates claiming Reservation)
12. Migration Certificate. (For CBSE/ICSE/AIQ Students)
13. Eligibility Certificate issued by RGUHS. (For CBSE/ICSE/AIQ Students other than PU Board Karnataka only)
14. Physical Fitness Certificate. (Issued by authorized Government Medical Officer)
15. Rural Service Bond. (Rs.100/- Bond paper-Duly Notarised) (Format provided to be downloaded)
16. Anti Ragging Bond. (Rs.50/-& 50/- bond paper -Duly Notarised) (Format provided to be downloaded)
17. RGUHS Bond. (Rs.50/- bond paper -Duly Notarised) (Format provided to be downloaded)
18. Photograph. (3 Pass Port Size and Soft copy in JPG less than 50KB)
19. Aadhar card. (Photo copy)
20. Physical Disability Certificate. (For differently disabled candidates as per norms)
21. Xerox Copy of Fee Receipt.
22. Online Fees payment Details are in last page of the Proforma.
23. General Affidavit Bond (Rs.20/- bond paper -Duly Notarized) (Format provided to be downloaded)

**THE FOLLOWING DOCUMENTS TO BE FILLED UP IN CAPITAL LETTERS**  
**ONLY (FORMAT PROVIDED TO BE DOWNLOADED)**

- OFFICE NOTE.
- PARTICULARS OF UNDER GRADUATE STUDENT.
- DECLARATION.
- FORMAT FOR OBTAINING TRANSFER CERTIFICATE.

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

**OFFICE NOTE****Sub: - Admission to MBBS Phase-I for the Academic Year 2023-24 – reg.**

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**TO BE FILLED BY CANDIDATE IN CAPITAL LETTERS ONLY**

DEGREE	MBBS 2023-24	AIQ	SEQ	Counseling session( Round)	I	II	III	MOP UP
Mr./Miss								
Mother's Name								
Father's Name								
UG NEET Roll No.								
All India Rank No.								
State Rank No.								
UG NEET Score					/720			
UG NEET Percentage					%			
UG NEET Percentile								

has submitted the following Original certificates.

SI No	Particulars				Submitted	Not Submitted
1	NEET UG Admit card					
2	NEET UG Score card					
3	NEET UG Rank Card					
4	NEET /KEA Allotment Order					
5	SSLC Marks Card / Birth Certificate					
6	II PUC/12 <sup>th</sup> Standard Marks card					
7	Study Certificate					
8	Transfer Certificate					
9	Domicile Certificate					
10	Caste Certificate (For candidates claiming Reservation)					
11	Income Certificate of Parent (For candidates claiming Reservation)					
12	Migration Certificate (For CBSE/ICSE/AIQ Students)					
13	Eligibility Certificate issued by RGHUS (For CBSE/ICSE/AIQ Students)					
14	Physical Fitness Certificate ( Issued by authorized Government Medical Officer)					
15	Rural Service Bond (Rs.100/- Bond paper-Duly Notarised)					
16	Anti Ragging Bond (Rs.50/- bond paper -Duly Notarised)					
17	Photograph (3 Pass Port Size and Soft copy in JPG less than 45KB)					
18	Aadhar Card (Photo copy)		No:			
19	Physical Disability Certificate (for differently abled candidates)		No:			
			Issued by:			
20	Fee Details		Syndicate Bank		Branch KIMS Campus, HUBBALLI	
	Receipt No.		Amount		Rs. Date	

Signature of Candidate

Signature of Parent/Guardian

Remarks: OFFICE USE ONLY

	Provisional admission approval.			
Scrutiny Officer	Office Superintendent	Assistant Administration Officer	Nodal Officer	Principal

**PARTICULARS OF UNDER GRADUATE STUDENT (MBBS) ACADEMIC YEAR 2023-24**

MBBS 2023-24	AIQ	SEQ	Counseling session (Round)	I	II	III	MOP UP
Sl. No.	Particulars		TO BE FILLED IN CAPITAL LETTERS ONLY				
1	Name of the Candidate						
2	Gender						
3	Native Place						
4	Date of Birth with Age						
5	Mother's Name						
6	Father's Name						
7	Father's Occupation						
8	Mother's Occupation						
9	Parents Income per Annum						
10	Religion						
11	Caste						
12	Sub-caste						
13	Permanent Address						
14	Correspondence Address						
15	Landline Phone No( With STD Code )						
16	Mobile No						
17	Email ID						
18	Aadhar No						
19	Blood Group & Rh typing						
20	Institution last studied						
21	Highest examination passed		II PUC/12 <sup>th</sup> Standard				
22	Registration No.( II PUC/12 <sup>th</sup> Standard)						
23	Total Marks Scored ( II PUC/12 <sup>th</sup> Standard)			/			%
	English			/100			%
24	Physics			/100			%
	Chemistry			/100			%
	Biology			/100			%
	Total in PCB			/300			%
25	UG NEET Roll No.						
26	UG NEET Score			/720			
27	UG NEET Percentage			%			
28	UG NEET Percentile						
29	All India UG NEET Rank						
30	KEA/State UG NEET Rank						
31	AIQ/KEA Admission Order No.& Date						
32	Reservation Quota Claimed						
33	Reservation Quota Allotted						
34	Hyderabad Karnataka Quota		Yes / No				
35	Physical Handicap Quota		Yes / No				
36	Date of joining the UG course						

Place: HAVERI

Date:

Signature of Candidate

Signature of Parent/Guardian



# HAVERI INSTITUTE OF MEDICAL SCIENCES HAVERI

(Autonomous Institution, Government of Karnataka)

# 1, District Hospital Campus, Kaginele Road, Haveri - 581110,

Telephone : 08375-200015 website: <https://himshaveri.karnataka.gov.in> E-Mail [medicalcollegehaveri@gmail.com](mailto:medicalcollegehaveri@gmail.com)

No:HIMS/Admissions/UG/2023-24

Date:04-07-2023

## UNDER GRADUATES 1<sup>st</sup>Yr MBBS FEES STRUCTURE 2023-24

Sl.No	Particulars	1 <sup>st</sup> Year Admission AIQ	1 <sup>st</sup> Year Admission SC/ST (State Quota)	General & Other Category-1 <sup>st</sup> Year	
				Paid to KEA + To be paid at college	
1.	Tuition Fee		50000		
2.	Helinet		4500		
3.	Registration		3000		
4.	Admission		500		
5.	SWF University(4½yrs)		450		
6.	Sports (4½yrs)		900		
7.	ID card		250		
8.	Student Association.		500		
9.	Sports fee		1200		
10.	Library	Includes tuition fess Rs 50000/-, RGUHS fees Rs	1500	Includes tuition fees Rs 50000/-, RGUHS fees	<b>Students shall pay reporting amount of Rs 14750/- at college after paying tuition and RGUHS fees to KEA</b>
11.	Magazine fee	9350/-	1500	Rs 9350/-	
12.	Laboratory fee	And college other fee Rs 14750/-	2500	And college other fee Rs	
13.	Medical Examination fee		300	14750/-	
14.	Caution Deposit		1000		
15.	Alumni association fee (life time)		1000		
16.	Kannada Sangh		1000		
17.	Cultural activities		1700		
18.	Literary activities		500		
19.	SWF (college)		300		
20.	20 NSS activates		100		
21.	Skill lab fee		1000		
22.	Others		400		
	<b>TOTAL</b>	<b>74,100</b>	<b>74100</b>	<b>74,100</b>	

**HOSTEL FEE TO BE PAID SEPERATELY**

TO BE FILLED IN CAPITAL LETTERS ONLY

**DECLARATION**

To  
The Director,  
Haveri Institute of Medical Sciences,  
Haveri-581110

Sir/Madam,

I \_\_\_\_\_ S/o./D/o. \_\_\_\_\_  
UG NEET Roll No \_\_\_\_\_ AIQ Rank No. \_\_\_\_\_ KEA Rank No. \_\_\_\_\_  
AIQ/KEA admission order No. \_\_\_\_\_ Dated \_\_\_\_\_  
Category Claimed \_\_\_\_\_ Category Allotted \_\_\_\_\_ have joined the I MBBS  
Course at Haveri Institute of Medical Sciences, Haveri at my own risk.

I agree that I will submit the

1. Migration Certificate
2. Transfer Certificate from the previous College which I have studied within one month from the date of my admission.

Further I have claimed the seat under reservation category \_\_\_\_\_ and I  
will be submitting the Validity Certificate and Caste Certificate within one week from the date of my  
admission.

Place: Haveri

Date:

Signature of Candidate

Signature of Parent/Guardian



**FORMAT FOR OBTAINING TRANSFER CERTIFICATE**

SL.NO.	PARTICULARS	TO BE FILLED IN CAPITAL LETTERS ONLY
1	Name of the Candidate	
2	Gender	
3	Date of Birth with Age	
4	Father's Name	
5	Nationality	
6	Religion	
7	Caste	
8	Sub-caste	
9	Category	
10	Institution last studied	
11	Highest examination passed	II PUC/12 <sup>th</sup> Standard
12	Registration No.( II PUC/12 <sup>th</sup> Standard)	
13	Month & Year Of Passing	
14	Date of joining to Haveri Institute of Medical Sciences, Haveri -580001 Karnataka	

Place: Haveri

Date:

Signature of Candidate

Signature of Parent/Guardian

**OFFICE NOTE**  
**(For office use only)**

The above candidate has been admitted to Ist MBBS Course at Haveri Institute of Medical Sciences, Haveri on\_\_\_\_\_.The Transfer certificate of the candidate to be sent to the Principal, HIMS, Haveri, Karnataka

Director  
Haveri Institute of Medical Sciences  
Haveri -581110 Karnataka

To,

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ANNEXURE - 9**

EXECUTION OF BOND BY CANDIDATE WHO SELECTS MBBS SEAT IN MEDICAL COLLEGES OF KARNATAKA (To be deposited after allotment of seats along with other originals)

(On Rs.100/- e-Stamp Paper)

I, Mr / Kum .....S/o/ D/o.....

a candidate with UGNEET 2023 Admission Ticket No.....  
residing at.....

..... have on my own volition allotted a MBBS seat on..... in

.....vide admission  
order number .....dated .....and  
do hereby undertake as follows.

In accordance with the Amendment to Rule 11 of the Karnataka Selection of Candidates for Admission to MBBS seats in Professional Educational Institution Rules,2006, vide Government Notification -1 No. HFW 79 RGU 2011 dated 17-07-2017 and Amendment act 2017 dated 6-07-2017 I am prepared on completion of the course to serve in any Primary Health Center or Primary Health unit situated in Rural Areas in the state of Karnataka for a minimum period of ONE year and I will abide to rules and regulation of Government of Karnataka.

What is stated above is true and correct and I and my parent / Guardian hereby undertake to act accordingly.

Signature of the Candidate.

Signature of the Parent

Date:.....

(Father / Mother)

Place.....

Witness:

1.

2.

**Rs. 100/- - E-Stamp Papers to be purchased in the name of :-**

First party :- Student's Name

Second party- Director of Medical Education Bengaluru.

**ANNEXURE - 1**  
**GENERAL AFFIDAVIT**

( To be submitted on Rs 20/- Bond paper (To be deposited after allotment of seats along with other originals))

I, ..... son /daughter of .....  
residing at ..... have appeared for UG NEET 2023  
conducted by CBSE, New Delhi with Roll Number \_\_\_\_\_ and Register Number ..... and  
have secured ..... Score in the said test.

I hereby solemnly declare that during 2023, I have not taken MBBS / BDS admission in any college  
Allotted by other exam conducting bodies. I have not surrendered any seat in past UG exams/other  
UG entrance exams conducted by central / state Government and various other authorities.

I shall immediately notify the Karnataka Examinations Authority, Bangalore if I am getting admission  
in any college through other exam conducting bodies.

I shall also not surrender any seat after the admission at institute level through any seat allotting  
bodies, if I need to surrender I shall do so at Karnataka Examinations Authority, Bangalore.

I shall produce all required original documents for verification and submit the same after allotment  
of seat to concerned college.

I shall not produce/submit fake/concocted documents for verification or admission.

I will forfeit the seat allotted to me and also I am liable for criminal proceedings if any one of the  
above information/documents produced by me is found to be false / incorrect.

Date:

PLACE:

Deponent

Signature of the Candidate

Sworn Before Me

**Rs. 20/- - E-Stamp Papers to be purchased in the name of :-**

First party :- Student's Name

Second party- Director of Medical Education Bengaluru.

**ANNEXURE I**  
**FORMAT OF UNDERTAKING BY THE STUDENT**

1. I, \_\_\_\_\_  
(Full Name in Block Letters)

Admitted to the course of \_\_\_\_\_ with admission No. \_\_\_\_\_  
(Name of Course)

at \_\_\_\_\_  
(Name of College / Institution)

Affiliated to \_\_\_\_\_  
(Name of University)

have received a copy of the REGULATIONS FOR PREVENTION AND PROHIBITION OF RAGGING IN MEDICAL COLLEGES / INSTITUTIONS, 2021 of the National Medical Commission (NMC).

2. I have carefully read and fully understood the provisions in these regulations.
3. I have particularly perused CHAPTER-II SECTION-3 and have fully understood what constitutes "Ragging".
4. I have also in particular perused Chapter IV and read and understood the Administrative and Penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging actively or passively, or being part of a conspiracy to promote ragging.
5. I hereby under take that -
  - (i) I will not indulge in any behavior or act that may come under the definition of ragging as may be constituted under Section 3 of these regulations.
  - (ii) I will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under Section 3 of these regulations.
  - (iii) I will not hurt anyone physically or psychologically or cause any other harm.
6. I hereby agree that if I found guilty of any aspect of ragging, I may be punished as per the provisions of the NMC Regulations mentioned above and/or as per the law in force.
7. I also declare that I have never been found to be guilty of raging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declaration is incorrect or false, my admission is liable to be cancelled / withdrawn.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year

Student's Signature	Signature of Witness 1	Signature of Witness 2
Name :	Name :	Name :
Address :	Address :	Address :
Tel/Mobile No:	Tel/Mobile No.	Tel/Mobile No :

**Rs. 100/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Student's Name

**Second party** :- Director HIMS Haveri.

**ANNEXURE II**

**FORMAT OF UNDERTAKING BY PARENT / GUARDIAN OF THE CANDIDATE / STUDENT**

1. I, \_\_\_\_\_  
(Full Name in Block Letters)  
Father / Mother / Guardian of Mr./Mrs.Ms. \_\_\_\_\_  
Admitted to the course of \_\_\_\_\_ with admission No. \_\_\_\_\_  
(Name of Course)  
at \_\_\_\_\_  
(Name of College / Institution)  
Affiliated to \_\_\_\_\_  
(Name of University)

hereby declare that I have received a copy of the REGULATIONS FOR PREVENTION AND PROHIBITION OF RAGGING IN MEDICAL COLLEGES / INSTITUTIONS, 2021 of the National Medical Commission (NMC).

2. I have carefully read and fully understood the provisions in these regulations.
3. I have particularly perused CHAPTER-II SECTION-3 and have fully understood what constitutes "Ragging".
4. I have also in particular prsued Chapter IV and read and understood the Administrative and Penal actions that may be taken against my son / daughter / ward in case he / she is found guilty of ragging or abetting ragging actively or passively, or being part of a conspiracy to promote ragging.
5. I hereby undertake that my son / daughter / ward –
  - (iv) Will not indulge in any behavior or act that may come under the definition of ragging as may be constituted under Section 3 of these regulations.
  - (v) Will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under Section 3 of these regulations.
  - (vi) Will not hurt anyone physically or psychologically or cause any other harm.
6. I hereby agree that if my son / daughter / ward is found guilty of any aspect of ragging, he / she may be punished as per the provisions of the NMC Regulations mentioned above and/or as per the law in force.
7. I also declare that I have never been found to be guilty of raging or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if this declarations is incorrect or false, my admission is liable to be cancelled / withdrawn.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year

Parent/Guardian of the Candidate / Student's Signature	Signature of Witness 1	Signature of Witness 2
Name :	Name :	Name :
Address :	Address :	Address :
Tel/Mobile No:	Tel/Mobile No.	Tel/Mobile No :

**Rs. 100/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Father / Mother / Guardian's Name

**Second party** :- Director, HIMS, Haveri.

**TO BE FILLED IN CAPITAL LETTERS ONLY**

**NOTARISED BOND TO BE EXECUTED ON A STAMP PAPER OF RS.50/-**

I \_\_\_\_\_ S/o./D/o. \_\_\_\_\_  
(hereinafter called the Natural Guardian of the Student) UG NEET Roll No \_\_\_\_\_ AIQ  
Rank No. \_\_\_\_\_ KEA Rank No. \_\_\_\_\_ AIQ/KEA admission order No.  
\_\_\_\_\_, dated \_\_\_\_\_ Category Claimed \_\_\_\_\_ Category Allotted \_\_\_\_\_  
\_\_\_\_\_ Resident of \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ hereby give an undertaking that on admission to I MBBS at Haveri Institute of Medical Sciences, Haveri during the Academic year 2023-24, have understood the Rule No.11 of the Ordinance Governing M.B.B.S Degree Course of Rajiv Gandhi University of Health Sciences, Karnataka, Bengaluru vide Notification No. ACA/BOS-27/97-98 Dated: 24-03-1998 and I shall abide by the ordinance.

That no student shall be permitted to join Phase-II (Para Clinical & Clinical) Group of subjects until he/she passes in the Phase-I (Pre-Clinical) Subject for which he/she will be permitted not more than four chances (Actual Examination) provided four chances are completed within three years from the date enrolment.

I shall abide by the Rules of Conduct and Discipline of the institution and abstain from practicing ragging in any form.

Place: Haveri

Date:

Signature of Candidate

Signature of Parent/Guardian

Witness (Signature with Address)

1)

2)

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**Rs. 50/- - E-Stamp Papers to be purchased in the name of :-**

First party :- Student Name

Second party- Director, HIMS Haveri.

No: HIMS:UGS: :2023-24

Office of the Director,  
Haveri Institute of Medical Sciences,  
Haveri. Date : - -2023

**OFFICIAL MEMORANDUM**

Sub : MBBS Phase-I admission through NEET AIQ-2023 reg.  
Ref : All India Quota NEET-2023 Medical Counseling, New Delhi  
Online generated provisional seat allotment letter Dt. - -2023  
\*\*\*\*\*

Mr./Miss \_\_\_\_\_ Category \_\_\_\_\_

Seat Allotted Category \_\_\_\_\_ Merit/Rank No. \_\_\_\_\_ Roll No. \_\_\_\_\_

who has been allotted MBBS seat during First/Second round NEET 2023 counseling under AIQ (15%) counseling to Haveri Institute of Medical Sciences, Haveri has been reported and provisionally admitted to MBBS Phase-I on \_\_\_\_\_, subject to the approval of concerned authorities. He/She has submitted all relevant originals certificates and testimonials to this college.

Director,  
Haveri Institute of Medical Sciences,  
Haveri-581110.

To, The Above Candidate.

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No: HIMS:UGS: :2023-24

Office of the Director,  
Haveri Institute of Medical Sciences,  
Haveri . Date : - -2023

**OFFICIAL MEMORANDUM**

Sub : MBBS Phase-I admission through NEET AIQ-2023 reg.  
Ref : All India Quota NEET-2023 Medical Counseling, New Delhi  
Online generated provisional seat allotment letter Dt. - -2023  
\*\*\*\*\*

Mr./Miss \_\_\_\_\_ Category \_\_\_\_\_

Seat Allotted Category \_\_\_\_\_ Merit/Rank No. \_\_\_\_\_ Roll No. \_\_\_\_\_

who has been allotted MBBS seat during First/Second round NEET 2023 counseling under AIQ (15%) counseling to Haveri Institute of Medical Sciences, Haveri has been reported and provisionally admitted to MBBS Phase-I on \_\_\_\_\_, subject to the approval of concerned authorities. He/She has submitted all relevant originals certificates and testimonials to this college.

Director,  
Haveri Institute of Medical Sciences,  
Haveri-581110

To, The Above Candidate.

[1] **SUBMITTED.**

Mr./Miss \_\_\_\_\_ Merit No. \_\_\_\_\_

Roll No. \_\_\_\_\_ has been selected for the MBBS course under NEET AIQ (15% )

Under graduate Medical Counselling-2023 [NEET AIQ Quota] through First/Second round counseling for the academic year 2023-24 has requested this office to admit him / her for the MBBS Course.

He/She has submitted online generated selection order- through AIQ Quota Under graduate Medical Counselling-2023 [ NEET AIQ Quota] New Delhi and Original and Xerox copies of all marks card and other documents etc.

He/She has given a letter/undertaking that his / her admission to this college is provisional and at his / her own risk. (Subject to issue of final eligibility from RGUHS Bangalore).

Hence, Provisionally approve his / her admission.

Therefore for kind orders and guidance.

1. Scrutiny Officer :
2. C/W :
3. Office Superintendent :
4. AAO :
5. Nodal Officer :
6. Director :



No: HIMS:UGS: :2023-24

Office of the Director,  
Haveri Institute of Medical Sciences,  
Haveri . Date : - -2023

**OFFICIAL MEMORANDUM**

Sub : MBBS Phase-I admission through State Quota-2023 reg.

Ref : Online generated provisional seat allotment letter Dt. - -2023

\*\*\*\*\*

Mr./Miss \_\_\_\_\_ Category \_\_\_\_\_

Seat Allotted Category \_\_\_\_\_ Merit/Rank No. \_\_\_\_\_ CET No. \_\_\_\_\_

who has been allotted MBBS seat during First/Second round NEET 2023 counseling under State Quota (85% ) to Haveri Institute of Medical Sciences, Haveri has been reported and provisionally admitted to MBBS Phase-I on \_\_\_\_\_, subject to the approval of concerned authorities. He/She has submitted all relevant originals certificates and testimonials to this college.

Director,  
Haveri Institute of Medical Sciences  
Haveri

To, The Above Candidate.

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No: HIMS:UGS: :2023-24

Office of the Director,  
Haveri Institute of Medical Sciences,  
Haveri. Date : - -2023

**OFFICIAL MEMORANDUM**

Sub : MBBS Phase-I admission through State Quota-2023 reg.

Ref : Online generated provisional seat allotment letter Dt. - -2023

\*\*\*\*\*

Mr./Miss \_\_\_\_\_ Category \_\_\_\_\_

Seat Allotted Category \_\_\_\_\_ Merit/Rank No. \_\_\_\_\_ CET No. \_\_\_\_\_

who has been allotted MBBS seat during First/Second round NEET 2023 counseling under State Quota (85% ) to Haveri Institute of Medical Sciences, Haveri has been reported and provisionally admitted to MBBS Phase-I on \_\_\_\_\_, subject to the approval of concerned authorities. He/She has submitted all relevant originals certificates and testimonials to this college.

Director,  
Haveri Institute of Medical Sciences  
Haveri

To, The Above Candidate.

[1] **SUBMITTED**

Mr./Miss \_\_\_\_\_ Merit/Rank No. \_\_\_\_\_

CET No. \_\_\_\_\_ Category \_\_\_\_\_ Seat Allotted Category \_\_\_\_\_ Allotment

Dated \_\_\_\_\_ has been selected for the MBBS course under NEET State Quota 85% Under graduate Medical Counselling-2023 through First/Second round counseling for the academic year 2023-24 has requested this office to admit him / her for the MBBS Course.

He/She has submitted online generated selection order- through State Quota Under graduate Medical Counselling-2023 and Original and Xerox copies of all marks card and other documents etc.

His/Her admission to this college is provisional and at his / her own risk. (Subject to issue of final eligibility from RGUHS Bangalore).

Hence, Provisionally approve his / her admission.

Therefore for kind orders and guidance.

1)Scrutiny Officer :

2) C/W :

3) Office Superintendent :

4) AAO :

5) Nodal officer :

6) Director :

Please Download The Proforma from [www. https://himshaveri.karnataka.gov.in](https://himshaveri.karnataka.gov.in)

And Submit the filled information Along with Original  
Documents & THREE SETS Of Self Attested  
Xerox Copies To HIMS Office During  
Admission To First Year MBBS  
Course.

### **MBBS ADMISSION FEES DETAILS 2023-24**

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Required: Original fees challan 'office copy' submit to the Account Section, HIMS Haveri and their  
2 sets xerox copies submit at UG Section.