



## TATA-CAM Scholarship Scheme for MBBS (2019 - 2020)

### Eligibility:

1. A Student who has secured admission at Pramukhswami Medical College, Karamsad (KMED) through central admission process.
2. The student's family should not own movable and immovable property valuing more than Rs. 40 lakhs (Market value).
3. Student should not be getting any scholarship or assistance, from any other source.

### Category & Conditions:

Particulars	A	B
No. of Scholarships	8 (Eight)	12 (Twelve)
Annual Family Income Limit	Rs. 9.0 lakhs	Rs. 12.0 lakhs
Scholarship amount	75 % of Tuition Fee	50 % of Tuition Fee
Service Bond	3 (Three) years	2 (Two) years
Eligibility	Admitted to KMED, Government Quota seats through ACPUGMEC	

### Other Conditions:

1. The candidate will have to pay the tuition fee of first term as per the rules of central admission committee and secure the admission.
2. The candidates who have availed scholarship will have to pay the differential tuition fee at the beginning of the term on the dates notified from time to time.
3. The hostel fee and other fee payable to the University will have to be paid by the students.
4. **Pramukhswami Medical College, Karamsad, does not admit students. Entire admission process is carried out by ACPUGMEC, Government of Gujarat, Gandhinagar.**
5. The Charutar Arogya Mandal or The Admission Committee for Professional Medical Educational Courses (ACPUGMEC) does not guarantee scholarship under the scheme.
6. Application for scholarship does not guarantee the scholarship; the decision of the scholarship committee of the CAM will be final in granting the scholarship, after verification of the documents and facts.
7. **Interested students having Gujarat Merit No. below 3000** as per UG NEET score and fulfilling the income criteria can apply.
8. Those candidates who wish to apply for scholarship can contact college office.

### Pramukhswami Medical College

Gokal Nagar, Karamsad - 388 325  
(02692) 228452, 228460.

Email: [aao@charutarhealth.org](mailto:aao@charutarhealth.org), Website: [www.charutarhealth.org](http://www.charutarhealth.org)



H M Patel  
Centre for  
Medical Care  
& Education



5. (a) Residential Address: (Attach address proof)

Residing since: \_\_\_\_ years.

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Pin Code								Phone No									
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5 (b) Are you residing at the above address for last THREE years ? : Yes / Nos.

IF NO, give details of last Three year residential status with proof. (Attach)

6. Month & Year of passing 12<sup>th</sup> Standard : 7. Marks Obtained in 12<sup>th</sup> Standard and NEET 2019 : ( Attach copy )

Subject	12 <sup>th</sup> Standard Theory Marks	
	Obtained	Out of
Chemistry		
Physics		
Biology		
Total (P+C+B)		
English		

8. NEET State Merit No:  Merit Marks 

9. Why you should be considered for Scholarship?

**10. Number of dependents in the family, including yourself :****11. Annual Income of Family Members:**

S.No	Name	Relationship	Gross Annual Income(Rs)	Occupation
1		Father		
2		Mother		
3				
4				
5				

**12. If you or any of your family members own any of the following, please provide details:**

Investments/	Amount	Details	Remarks
Property			
Investments			
Gold / Silver	Rs.	Weight:	
Shares			
Fixed Deposit			
Mutual Fund			
Govt. Securities			
Other			
Vehicles	Amount	Model	
1.			
2.			
3.			
Building (Residential)	Amount	Address	Built-up area
1.			
2.			
3.			
Land (Attach proof)	Amount	Address	Area
1.			
2.			
3.			
4.			

**Note: The above mentioned details will be verified at the time of personal inspection.**

**13. Name, Address and Phone No.s of Employer of Father & Mother (Guardian):**

(Attach last salary slip and Form16 of FY 2017 – 2018, 2018 – 2019)

**14. Status of unmarried brothers & sisters if any: Studying/Employed/Self Employed :**

S.No	Name	Relationship	Age	Occupation	Gross Annual Income

**15. Attach Ration card for proof of family members**

**16. Membership in Co-operative milk society :Society Code Number :**

**Membership No :**

**17. Are you already a recipient of any other scholarship? Yes / No**

**( if YES, details of source and amount )**

**18. Have you applied for NRI quota seat at any College ? Yes / No**

**19. Please give below the names, addresses, and phone nos. of two referees; who are not related to you :**

1.

2.

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**Declaration**

I have read the form, agreement and the declaration and have understood the condition of scholarship. I hereby certify that all information provided in this application including accompaniments is true. If anything is found to be incorrect or false or misguiding at any time, **I understand that my scholarship shall be cancel led and I would refund the total scholarship** amount along with interest @ 12% per annum and an additional liquidated damages of Rupees 3.5 Lakhs.

Date \_\_\_\_\_

Signature of the Applicant\_\_\_\_\_

Place \_\_\_\_\_

Signature of Parent/Guardian\_\_\_\_\_

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Copies of the following certificates duly attested, should be enclosed with this form.

CHECKLIST (Please tick  $\checkmark$ )

No.	Particulars	$\checkmark$
1	Consent form duly signed to abide by the conditions of the scholarship, including the commitment to serve the Charutar Arogya Mandal. (Format – 1 or Format - 2)	
2	S.S.C. Marksheet & Attempt Certificate	
3	H.S.C. Marksheet & Attempt Certificate	
4	NEET Marksheet	
5	Birth Certificate / School Leaving certificate	
6	Last two years Income Tax return: 2017 -18/ 2018-19, latest Form-16 & salary slip of all earning members. IF NO Income Certificate from T.D.O / Mamlatdar for the year 2018-19	
7	Bank Statement: 2018 – 19 ( Last 12 months ) of all earning members in the family.	
8	Ration Card copy and Residential Address Proof.	
9	Residential Status of Last THREE years	
10	Statement / Certificate of Land owned by you in your village by Panchayat or Mamaltadar	
11	Domicile Certificate	
12	Adhar Card Copy of Student	

Date :

Signature of Applicant

Place :

CONSENT FORM TO SERVE THE CHARUTAR AROGYA MANDAL, KARAMSAD – 388 325

To,

Chief Executive Officer  
Charutar Arogya Mandal  
Karamsad – 388 325

Dear Sir,

I have applied for scholarship in MBBS course 2019 – 2020 under the TATA - Charutar Arogya Mandal Scholarship Programme under the aegis of HM Patel Programme for Academic Excellence scholarship. I understand that if am granted the scholarship the following conditions will apply:

1. I would be required to execute a formal agreement and Bond to serve the Charutar Arogya Mandal as a Medical Officer or in any other equivalent position for a duration not exceeding three years as may be decided by the Mandal on completion of my M.B.B.S. course.
2. Any failure on my part to serve the Mandal would make me liable to repay the total scholarship availed by me along with annual interest of 12% on it and an additional liquidated damages amounting to Rupees 3.50 lakhs/-.
3. That the Scholarship amount is equivalent to the tuition fee applicable to the general category students admitted in the Pramukhswami Medical College, as per the scholarship category applied.
4. That the scholarship given for the entire course require that I pass all exams in the first attempt and failure to do so would result in the extension of my service bond period as may be decided by the Mandal.
5. That on acceptance of the above conditions, I am required to execute an affidavit / agreement as per the format, failure to do so will result in cancellation of the scholarship.
6. That if any information / documents that I have furnished in support of my application is found to be in-correct / false / misleading at any time my scholarship will be cancelled and the scholarship amount recovered.

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Name & signature of the applicant

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Name & signature of the Parent/Guardian

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

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

## DECLARATION FORM

(To be executed before notary – advocate on a NON-JUDICIAL stamp paper of Rs. 100/-)

I.....residing at.....solemnly and declare as follows :

1. My / Son / Daughter Named Mr. / Ms.....is applying for TATA Charutar Arogya Mandal Scholarship Scheme under H.M.Patel programme for Academic Excellence for MBBS programme for the academic year 2019-2020.
2. I declare that My Total Family income from all sources as on 31st March 2019(details as given below) is Rs...../-
3. I also declare that Market value of all moveable and immovable properties is Rs..... A list of all the property including movable & immovable is attached.
4. I take the responsibility, that any part of the declaration or information or document submitted by me is found to be false my application will be cancel led without intimation to me or if found later date i.e., after granting scholarship, then scholarship of My Son's / Daughter's will be forfeited and I have to pay all the scholarship amount in One installment with 12% interest With the penalty amount decided by the authority.

**A. Details of Land ( Proof / Ownership) :**

1. Area
2. Village / Taluka
3. Survey No.
4. Land "Mehsul" Paid
5. Income from Land

**B. Details of Property (House Shop) :**

1. House : OWNED / RENT
2. House No.
3. Locality
4. Village / Town
5. Buildup Area
6. Income from Rent if Any
7. Property Tax Paid (Gar Vera)
8. Shop No & Address
9. Type of Business
10. Excise duty paid / Income tax paid (Amount)
11. License No.



### **C. Income from Salary**

1. Name (parent / Guardian)
2. Place of Work (Name / Person / Company)
3. Address
4. Gross Pay (Including All Deductions)
5. Income from Other Sources : Like other side Business / Income from part time Business /  
Animal Husbandry :
6. Any other income which is not specified above :

A. Cash on Hand

B. Cash on Bank

C. Amount of Gold (in any form)

D. Investment in Equity :

1. Mutual Fund :
2. Bank FD :
3. Other which is not specified above

Place :

Date :

Parent / Guardian Signature  
Or Right / Left Thumb Impression  
Name :  
Address