

**GOVERNMENT OF MEGHALAYA  
DIRECTORATE OF HEALTH SERVICES  
MEGHALAYA : SHILLONG**

**ADVERTISEMENT FOR (1) B.H.M.S.(2) B.A.M.S. (3) B.Sc Nursing (4) B.Pharm (5)  
D.Pharm (6) BMLT (7) B.Sc Radio Imaging & Cardiac Instrumentation (8) B.Sc  
Ophthalmic Technology AGAINST STATE QUOTA SEATS**

Applications in prescribed form for Medical / Para-Medical Studies i.e. (1) B.H.M.S.(2) B.A.M.S. (3) B.Sc Nursing (4) B.Pharm (5) D.Pharm (6) BMLT (7) B.Sc Radio Imaging & Cardiac Instrumentation (8) B.Sc Ophthalmic Technology against State Quota of seats in various Medical/Allied courses commencing during 2013-2014 are hereby invited and will be received in the office of the Director of Health Services (MI), Meghalaya, Shillong and District Medical & Health Officer, West Garo Hills District, Tura till **3:00 P.M. on 26<sup>th</sup> June, 2013.**

Candidates should indicate clearly the order of their preference for different courses under Medical/ Allied courses. Preference not indicated against any course will be treated as not opted and preference once indicated cannot be changed.

1. Only candidates who are indigenous inhabitants of the State and have passed 10+2 level examination from a recognized University, Board of Authority with Physics, Chemistry, Biology and English are eligible to apply (Persons applying for B. Pharm & D.Pharm seat should also have Mathematics as a subject at the 10+2 level examination). They should complete the age of 17 years on or before the 31<sup>st</sup> December of the year on which they proceed for the Course.
2. Selection of candidates, who are otherwise medically fit and eligible, will be made purely on the basis of merit, determined by the aggregate percentage of marks obtained in Physics, Chemistry and Biology (PCB) at the qualifying examination and subject to reservation policy of the State Government applicable in this regard. Where the aggregate marks secured by any two or more candidates in PCB, are identical their order to merit will be considered by taking into account marks secured in English at the qualifying examination. In the event of their order of merit remaining tied even after taking into account marks secured in English, the order of merit of such candidates will be determined by the age of the applicants whoever is older.
3. Only such persons who have secured a minimum of 40% aggregated marks in Physics, Chemistry and Biology (PCB) subjects at the qualifying examination are eligible to apply for seat for Allied courses.

4. Application Form may be obtained from the office of the Director of Health Services (MI), Meghalaya, Shillong or the District Medical & Health Officer of West Garo Hills District, Tura on submission of a crossed Indian Postal Order for Rs.5.00 (Rupees five) only payable to the Director of Health Services (MI), Meghalaya, Shillong. Persons desirous of obtaining forms by post should also submit a self-addressed Envelope of Minimum size 22.5 cms x 10.0 cms.

COMPLETED APPLICATION FORMS WILL ONLY BE ACCEPTED IN THE OFFICE OF THE DIRECTOR OF HEALTH SERVICES (MI) AT SHILLONG AND THE DISTRICT MEDICAL & HEALTH OFFICER, WEST GARO HILLS DISTRICT, TURA.

5. Application Form received late i.e. after 3.00 P.M. on 26<sup>th</sup> June 2013 will not be considered under any circumstances including postal delay etc.
6. APPLICANTS ARE REQUIRED TO APPEAR BEFORE A SCREENING COMMITTEE FOR VERIFICATION OF ORIGINAL COPIES OF 10 AND 10+2 LEVEL ADMIT CARDS, MARK SHEETS, ST CERTIFICATE, CHARACTER CERTIFICATE FROM INSTITUTION LAST ATTENDED AND CERTIFICATE OF HAVING PASSED THE QUALIFYING EXAMINATION IN SCIENCE STREAM AT THE TIME OF APPEARING THE INTERVIEW OF SCREENING. ALL THE ORIGINAL CERTIFICATES MENTIONED SHOULD BE MADE AVAILABLE. THE APPLICANTS WILL ALSO HAVE TO APPEAR BEFORE THE STANDING MEDICAL BOARD AT THE SAME TIME AND PLACE FOR MEDICAL FITNESS EXAMINATION. THE MEDICAL FITNESS EXAMINATION CONDUCTED BY THE STANDING MEDICAL BOARD WILL BE FINAL. THE SCHEDULE FOR THEIR APPEARANCE AS ABOVE WILL BE AS FOLLOWS :-

THOSE APPLICANTS WHO SUBMITTED THEIR APPLICATION IN THE OFFICE OF THE DIRECTOR OF HEALTH SERVICES (MI), SHILLONG ARE REQUIRED TO REPORT FOR SCREENING AT THE CIVIL HOSPITAL, SHILLONG AT **9.00 A.M. ON THE 19<sup>th</sup> July 2013** AND NOT TO LEAVE TILL PERMITTED BY THE AUTHORITY. WHILE THOSE APPLICANTS WHO SUBMITTED THEIR APPLICATIONS IN THE OFFICE OF THE DISTRICT MEDICAL & HEALTH OFFICER, WEST GARO HILLS DISTRICT, TURA ARE REQUIRED TO REPORT FOR SCREENING AT THE CIVIL HOSPITAL, TURA AT **9.00 A.M. ON THE 19<sup>th</sup> July, 2013** AND NOT TO LEAVE TILL PERMITTED BY THE AUTHORITY. HOWEVER, TO MINIMISE DELAY & HARDSHIP TO THE APPLICANTS SCREENING WILL BE DONE IN PHASES. IN THE 1<sup>st</sup> PHASE, THE NUMBER OF APPLICANTS (which will be arranged in order of merit) WILL BE APPROXIMATELY TWO-THREE TIMES THE NUMBER OF SEATS AVAILABLE.

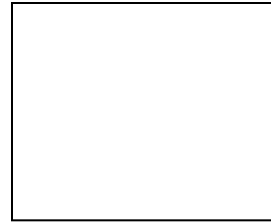
THE NAMES OF SUCH CANDIDATES WILL BE DULY PUBLISHED IN PROMINENT NEWSPAPERS WELL IN ADVANCE OF THE SCREENING DATE INDICATED AND NO INDIVIDUAL INTIMATION WILL BE SERVED. THE 2<sup>nd</sup> LIST OF CANDIDATES WILL BE PUBLISHED ONLY IN CASE OF NON AVAILABILITY OF SUFFICIENT CANDIDATES FROM THE 1<sup>st</sup> LIST.

7. The list of Applicants selected for nomination along with waitlisted candidates will be published in the Notice Board of the Health & Family Welfare Department in the Additional Secretariat Building as well as in the Notice Board of the Directorate of Health Services (MI). It will also be published in the local dailies published from Shillong and Tura. All applicants are required to ascertain the nominations from the above sources. NO INDIVIDUAL INTIMATION WILL BE SERVED ON ANY APPLICANT SELECTED FOR NOMINATION.
8. Applicants whose names are included in the list selected for the nomination and published as above are required to report to the Under Secretary to the Govt. of Meghalaya, Health & Family Welfare Department, Room **No. 506**, Additional Secretariat Building within the date and time to be indicated while publishing the list of selected candidates and to personally submit their letter of acceptance and to execute the bond and to collect their letter of nominations for further instructions, as the case may be. ANY SELECTED APPLICANT, WHO FAILS TO REPORT ACCORDING TO THE FIXED DATE AS SPECIFIED ABOVE, WILL AUTOMATICALLY LOSE HIS OR HER RIGHT TO NOMINATION AND THE NEXT ELIGIBLE CANDIDATE FROM THE WAITING LIST WILL BE NOMINATED.

9. The lists selected for various courses will also be available in the Meghalaya government Website, i.e., [www. Meghalaya.nic.in](http://www.Meghalaya.nic.in).
10. Canvassing directly or indirectly will disqualify consideration of candidature.
11. Terms and conditions for admission and all other requirements including recurring fees of the concerned Medical/Allied Institution to which the applicant is nominated will have to be abided and paid by the applicant concerned in time and the responsibility on this count shall rest with the candidate.
12. Depending on the availability of post, the Government shall not guarantee job on completion of their studies.

Director of Health Services (MI),  
Meghalaya, Shillong.

**APPLICATION FORM FOR B.H.M.S., B.A.M.S., B.SC NURSING, B.PHARM, D.PHARM, BMLT, B.SC RADIO IMAGING & CARDIAC INSTRUMENTATION, B.SC OPHTHALMIC TECHNOLOGY FOR THE SESSION 2013-2014**



To,

The Director of Health Services (MI),  
Meghalaya, Shillong

Sir,

I request/nomination for admission into the First Year ..... Course in one of the colleges/concerned institutions.

Indicate order of preference of Medical Science Courses  
(Delete course not opted for)

Indicate in order of preference		
	Name of Course	Order of preference (indicate preference No.1, 2)
1	BHMS	
2	BAMS	
3	B.Sc (N)	
4	B. Pharm	
5	D. Pharm	
6	BMLT	
7	B.Sc (RICI)	
8	B.Sc (Ophth)	

The requisite particulars are furnished below:

1	Name of Candidate in full			
(In block letters)				
2	Age as on 31st Dec. 2013	Day	Month	Year
	(a)	Date of Birth :		
	(b)	Nationality :	Religion :	
	(c)	Caste :		

OR

	(d)	Permanent Home address along with contact Nos.	
		Village/Town:	
		Mouza/Circle/Taluka:	
		P.O. and T.O.:	
		Subdivision:	
		District:	State:
	(e)	Present address for correspondence along with contact Nos.	
		Village/Town:	
		Mouza/Circle/Taluka:	
		P.O. and T.O.:	
District:		State:	
3	(a)	Name of Father/Mother/Legal Guardian and place of working:	
	(b)	(i) Occupation of Father/Mother/Legal Guardian and office and place of working:	
	(c)	Annual income of Father/Mother/Legal Guardian:	
4		(i)Matric/ HSLC	(ii)Higher Secondary Course/ HSSLC exam/ 10+2 (Science) and other qualifying Examination
	Name of University/ Board		
	Year of joining the Course		
	Year of passing Examination		

Whether passed in first attempt indicate Yes or No. If Yes, please produce Certificate to such effect from the Principal concerned		
Subjects taken		
Division / Class		

Qualifying Examination	PHYSICS		CHEMISTRY		BIOLOGY		ENGLISH	
	Theory	Practical	Theory	Practical	Theory	Practical	Theory	Total
Full Marks								
Pass Marks								
Marks Obtained								
Grace Marks, if any								
Percentage of Marks obtained in Science Subject:								
Percentage of Marks obtained in English plus Sciences subject:								
If the applicant has passed the 10+2 level examination more than two academic years after passing the Class X level examination please state clearly the reasons due to which the applicant could not take /pass the 10+2 level examination within two academic year of having passed the class X level examination.								

N.B: - Certificates from the competent authority must be enclosed.

5. N.B.- The True copies of the following documents, duly attested by a Gazetted Government Officer or a Magistrate, must be attached with the application for Admission, otherwise the application may not be considered.

- i. Evidence of age (attested copies of the Birth Certificate/ Admit Card of Matriculation / High School Leaving Certificate/Higher Secondary Leaving Certificate and other qualifying examinations).
- ii. Character Certificate from the Head of the Institution in which the candidate last studied.
- iii. Admit Cards/ Mark Sheets of HSLC / ICSE/ HSSLC /CBSE and other qualifying examinations.
- iv. Certificate of nativity or permanent residence and Caste / Schedule Tribe Certificate from Deputy Commissioner or Sub-Divisional Officer (Civil) or a Certificate from Gazetted Officer countersigned by the Deputy Commissioner or Sub-Divisional Officer (Civil) with office seal in the form given below at A.
- v. Employment Certificate in respect of Father / Mother / Guardian enclosed from the Controlling Officers Concerned / Employer giving details of designation, pay scale, location of Office etc.

I hereby certify that the above Statement of particulars is true in all respects and that I shall be liable to legal action if they are found to be false.

Name of Attestor	
Office	
Designation	
Signature of the Attestor	Signature of Candidate
Date	Date
<b>UNDERTAKINGS</b>	
<p>I undertake to see that my son/daughter / ward abides by the rules of the College and Hostel attached to it in case, he / she is admitted and pay all fees, deposits and other dues as laid down in the College Rules or may become due under Rules. I also undertake to withdraw him / her from the College or Hostel should the Principal decide that such withdrawal is necessary in the interest of the Institution.</p>	<p>I agreed to abide by the Rules of the College and Hostels attached to it in case I am admitted.</p>

Signature of the Father / Mother  
Legal Guardian

Signature of Candidate



(A) CERTIFICATE IN CASE OF CANDIDATES BELONGING TO SCHEDULE TRIBES.

Certified that Mr./Miss.....

Son/daughter/wife/legal ward of Mr.....belongs to Schedule Tribe

(Particular Tribe).....

Signature of Gazetted  
Government officer  
(Date & Seal)

Signature or countersignature  
with date seal of the  
Dy. Commissioner of .....

District/Sub-Divisional Officer

.....Sub Division

---