



**Shri Vasantrao Banduji Patil Trust's
Vasantdada Patil Ayurvedic Medical College & Institute of Yoga,
Sangli.**

Ayurvedic Medical College Square, In Front Of Income Tax Office, Sangli - Miraj Road,
South Shivajinagar, Sangli 416416. Ph. (0233) 2323746, Fax (0233) 23861646.
(Email-1981ayu0146@gmail.com/vdpacollege@gmail.com.)



Ref No. -

Date:

IMPORTANT NOTE

Those Candidates who have secure their admission seat in this college for BAMS- UG course for Academic Year 2025-26 through CAP round conducted by State CET Cell, Mumbai, Maharashtra for State Quota seat as well as AACCC for AIQ Quota are hereby instructed to **take print out of following College Admission form, duly fill it & submit it at the time of admission along with all necessary documents.**

ROUND NO & DATE: -----

Admission Date	Quota Type State / Central	AIR No	NEET Marks	12th PCB Marks	Student Category	Admitted category	Retention Y/N

Fee Details	Amount	Bank Name	DD No. & Date

APPLICATION FORM FOR ADMISSION TO I-BAMS COURSE
ACADEMIC YEAR 2025-26

Paste here
Recent
passport photo

**To,
The Principal,
VPAMC, Sangli.**

Sir,

I, submit herewith this application form for admission to I- BAMS course in Vasantdada Patil Ayurvedic Medical College & Institute of Yoga, Sangli, for the academic year 2025-26. My name is included in the selection list published by Competent Authority State CET Cell Mumbai, Maharashtra state/AACCC New Delhi. I also fully aware and agree that, if any information or documents submitted by me is false or fabricated, my admission will be cancelled at any stage.

I am fully aware and agree that, if I cancel my **admission seat after the cut-off date** I am liable to pay the appropriate penalty, fees to the college as per Maharashtra State CET rules & regulations 2025-26.

Thanking you.

Signature of Student

1. (A) Students Full Name: _____
(As per 12th Mark sheet)
- (B) Students Full Name in Marathi _____
2. Father's Full Name in Marathi. _____
3. Mother's Name in Marathi: _____
4. Date of Birth: ____/____/____ Place of Birth: _____
5. Religion: _____ Caste (specify): _____ 6. Category: _____
7. **Contact Details:** (Address for Correspondence) _____

Permanent: - _____

Students Mob No: _____ Parents Mob No: _____

Students E- mail ID: _____ Parents E-mail ID : _____

8. Educational Details

HSC Passing Month & Year:		NEET UG 2025 Marks	
Name of HSC Board Exam:	HSC / CBSE / ICSE	NEET Percentile %	
HSC Total Marks obtained	_____ out of _____	NEET Roll No	
12th PCB Marks & PCB Percentile	_____ %	NEET Application No	
	Physics: _____	All India Rank	
	Chemistry: _____	Quota State / Central	
	Biology: _____	STATE	
English: _____			
Voter ID:- Yes / No	Voter ID Number:- _____		
Willingness about organ donation	Yes / No _____		

FOR OFFICE USE ONLY

Date: ____ / ____ / 20____

1) Admitted in: Open / SC / ST / OBC / SBC/ NT1/ NT2/ NT3/ VJ / PH / DEF-1/ DEF-2/EWS/SEBC

2) Student is of _____ category but admitted in **Open** Category

Name & Sign of Admission Committee Members:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

I/C Clerk

**I/C Principal
VPAMC, Sangli.**

List of Documents to be attached

Mr / Miss _____ admitted in I-BAMS course on _____ for the academic year **2025-26** as per State CET CELL /AACCC New Delhi round dated _____. His / Her following original certificates are received for M.U.H.S Eligibility purpose.

Sr.No	Name of Certificates	Original Certificates	Xerox copy(2 Sets)
1	State CET Cell / AACCC New Delhi Allotment letter	Yes / No	
2	Online Application form of State CET Cell / AACCC	Yes / No	
3	NEET-UG 2024 Mark sheet	Yes / No	
4	Admit card of NEET (UG) 2025	Yes / No	
5	S.S.C Passing Certificate	Yes / No	
6	H.S.C Mark sheet	Yes / No	
7	College Leaving Certificate	Yes / No	
8	Migration Certificate	Yes / No	<u>Original</u> to be attached with one set of <u>Xerox set</u>
9	Self-Education Gap Certificate	Yes / No	<u>Original</u> to be attached with one set of <u>Xerox set</u>
10	Medical Fitness Certificate	Yes / No	<u>Original</u> to be attached with one set of <u>Xerox set</u>
11	Nationality certificate	Yes / No	
12	Domicile certificate	Yes / No	
13	Caste Certificate	Yes / No	
14	Caste-Validity certificate	Yes / No	
15	Non -creamy layer Certificate	Yes / No	
16	EWS Certificate (issued for year 2025-26)	Yes / No	
17	Defence Certificate	Yes / No	
18	Hilly Area, MKB	Yes / No	
19	Domicile of Parent (For Defence & Hilly Area)	Yes / No	
20	Aadhar Card	Xerox	Xerox
21	Voter ID	Yes / No	Xerox
22	Physically Handicapped Certificate issued by Authorized Medical Board	Yes / No	
23	Other (All Original Scan Copy Submit at the time of Admission & 2 Photos)	Yes / No	

Note- It is mandatory to submit above documents in chronological order with one set of Original and two set of attested Photocopies. However, **original documents** specified at Sr. No. **14, 15 & 16** to be attached with one set of photocopies, which will be **retained** by the University.

I/C. Clerk

I/C.Principal
VPAMC, Sangli

Declaration by Candidate: I hereby confirm that, I have uploaded all the necessary/compulsory original documents as per the prescribed format/annexure while doing online registration on the Maha CET/ AACCC website and submitted all above original documents in college. I am fully aware and responsible for any disciplinary action in any manner taken by the appropriate authority for hold/cancel my admission after the cutoff date for wrongly uploaded documents by me.

Signature of candidate:-

Date:-