



Santosh Deemed to be University

1, Santosh Nagar, Ghaziabad (Delhi NCR) www.admission.santosh.ac.in +91 120 4933350 / 60 / 70

and Artificial
Document Checklist
Course Discontinuation Bond

1. Course Fees

BDS Course 2024-25	Schedule of Annual Course Fee Payable Quarterly (INR)			Fee per Annum	Course	
	1st Qtr Installment (A)	1st Qtr Installment (A)	1st Qtr installment (A)	1st Qtr Installment (A)	(A+B+C+D)	Duration
1st Year Fee	65,000	65,000	65,000	65,000	2,60,000	
2nd Year Fee	65,000	65,000	65,000	65,000	2,60,000	4 Years and
3rd Year Fee	65,000	65,000	65,000	65,000	2,60,000	Internship
4th Year Fee	65,000	65,000	65,000	65,000	2,60,000	

2. MODE OF PAYMENT: QUARTER MODE AS SHOWN IN ABOVE FEE STRUCTURE IN (INR)

Remittance details to be mailed at	accounts@santosh.ac.in and admissioncell@santosh.ac.in	
	NEET Roll No:	
	Name of the Candidate:	
	NEET All India Rank:	
	Program allotted:	
	Remitter Name	
	Bank Name:	
	UTR / Transaction Reference details:	
	Date of Transaction:	
	Amount in (INR)	

3. STUDENTS HOSTEL FEE STRUCTURE (ANNUAL) INCLUDING MESS - SANTOSH DENTAL COLLEGE & HOSPITAL, GHAZIABAD (INR)

Indian Nationality

	Type of Accommodation	General (INR)
BOYS	Twin Sharing Accommodation (NON AC)	75,000
	Twin Sharing Accommodation (AC)	1,75,000





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	Type of Accommodation	General (INR)
SIS	Twin Sharing Accommodation (NON AC)	75,000
GR	Twin Sharing Accommodation (AC)	1,75,000

For More details refer to Institution's Hostel policy.

4. DOCUMENT CHECKLIST FOR CANDIDATES

No.	Document Name
1	DGHS Allotment Letter
2	NEET 2024 Hall Ticket / Admit Card issued by NTA (National Testing Agency) NEET 2024
3	Result / Rank Letter issued by NTA (National Testing Agency)
4	10th Standard Marks Card / Date of Birth Certicate for proof of DOB (if 10th certicate does not bear the same)
5	Marks Card of 10+2 of India or equivalent examination (A Levels, IB, HSC, Year 12, etc.) 10+2
6	Certicate (for students who have followed the 10+2 of India)
7	Caste Certicate SC/ST/OBC (if applicable) Transfer
8	Migration Certicate [Undergraduate]
9	Conduct / Character certicate from last School/Institute
10	Self -Attested copy of Pan Card (Parent & Candidate) for Indian Citizens
11	Self -Attested copy of Aadhar Card of Candidate (compulsory for Indian residents) Fee
12	Remittance Details (Refer Table 1B for Payment Mode)
13	1 set of self-attested Photocopies, of all of the above documents 8
14	Recent Identical Passport sized photographs
15	Post Dated Cheques for whole course fees to be submitted at the time of admission
16	EWS Certicate is mandatory if admission allotment is under EWS category

The allotted candidates must report to Admissions Venue by 5 PM, on or before the last date mentioned in the DGHS allotment letter, along with the above documents and fee paid details. Venue details: Administrative Block, 4th Floor, Santosh Deemed to be University, No. 1, Santosh Nagar, Gate No. 3, Pratap Vihar, Ghaziabad (NCR- Delhi)-201009, For more details visit www.santosh.ac.in





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5. COURSE DISCONTINUATION BOND FORMAT

COURSE DISCONTINUATION BOND

(Undertaking / Bond for General / Management Seats)
(To be submitted on a Rs. 200 stamp paper purchased in Uttar Pradesh)

I, Dr / Mr / Ms	(Name of the Candidate),
aged about Years, S / D of	(Name of the Parents), resident
of	(permanent/present address
of Parent) do hereby swear on oath as follows:	
I, have been selected to the 1st year[MBBS/BDS/	/MD/MS/MDS Course] at Santosh Medical College &
Hospital / Santosh Dental College & Hospital, Ghaziabad, NCR D	Delhi, A constituent unit of Santosh Deemed to be
University, Ghaziabad, NCR Delhi under Section 3 of the UGC Act	1956, through the Common Counselling conducted
by the Directorate General of Health Services (DGHS), Governmen	t of India (GOI), New Delhi through NEET Rank No.
(All India Rank).	
I, arm and state that on my own will and concurrence of my paren	ts/guardian, took admission to the [MBBS/BDS/M-
D/MS/MDS Course] at Santosh Medical College & Hospital / Santos	h Dental College & Hospital, Ghaziabad, NCR Delhi as
per the DGHS allotment with NEET Roll No	Dated
I, arm and state in consideration of admission to 1st year	[MBBS/BDS/MD/MS/MDS]
Course, I shall complete the[MBBS/BDS/MD/MS/	MDS] Course and accordingly undertake to pay all
the tuition and other fees as demanded by Santosh Deemed to be	University, Ghaziabad, NCR Delhi.
In the event of my discontinuation of	(MBBS/BDS/MD/MS/MDS) course
due to any reason; I along with my parent / guardian hereby under	take to pay balance tuition and other fees to Santosh
Medical College, Ghaziabad payable for the entire course without	any demur. I also understand that the original docu-
ments submitted to the Institute at the time of admission, will be	e returned to me only after the payment of balance
tuition and other fee.	
What is stated above is true and correct. I along with my parent/g	uardian do hereby undertake to act accordingly. This,
the day of2024 at Ghaziaba	d, Uttar Pradesh state.
Signature of the Candidate	Signature of the Parent / Husband / Guardian
Name:	Name:
Mobile No.:	Mobile No.:
Email ID:	Email ID:
Cildi ID.	Citali ID.
(1) Witness Signature	(2) Witness Signature
Name:	Name:
Mobile No.:	Mobile No.:
Email ID:	Email ID: