



Important Information

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|---|--------------------------------|
| 1. Course fees | 4. Document Checklist |
| 2. Mode of Payment | 5. Course Discontinuation Bond |
| 3. Hostel Fee Structure | |
| For more information visit www.santosh.ac.in | |

1. General Category

| PG Courses 2021-22 | Schedule Of Annual Course Fee Payable Quarterly (INR) | | | | Fee per annum (A+B+C+D) | Course Duration |
|--------------------------------|---|---------------------------------------|---------------------------------------|---------------------------------------|----------------------------|--------------------|
| | 1 st Qtr Instalment (A) | 2 nd Qtr Instalment (B) | 3 rd Qtr Instalment (C) | 4 th Qtr Instalment (D) | | |
| MDS-Oral Pathology* | 62,500 | 62,500 | 62,500 | 62,500 | 2,50,000 | 3 Years |
| MDS-Orhthodontics* | 2,00,000 | 2,00,000 | 2,00,000 | 2,00,000 | 8,00,000 | 3 Years |
| MDS-Pedodontics* | 1,50,000 | 1,50,000 | 1,50,000 | 1,50,000 | 6,00,000 | 3 Years |
| MDS-Peridontics* | 1,25,000 | 1,25,000 | 1,25,000 | 1,25,000 | 5,00,000 | 3 Years |
| MDS-Prosthodontics* | 1,75,000 | 1,75,000 | 1,75,000 | 1,75,000 | 7,00,000 | 3 Years |
| MDS-Oral Surgery* | 2,00,000 | 2,00,000 | 2,00,000 | 2,00,000 | 8,00,000 | 3 Years |
| MDS-Conservative Dentistry* | 2,00,000 | 2,00,000 | 2,00,000 | 2,00,000 | 8,00,000 | 3 Years |

Disclaimer Note - Fees can be revised as per guidelines issued by Regulatory Authorities

*T&C Apply

2. Mode of Payment: Quarter mode as shown in above Fee structure in (INR)

| NEFT / RTGS / IMPS / Online Transfer | |
|---|--|
| Beneficiary Name | SANTOSH TRUST |
| Beneficiary Bank Details | ICICI Bank, Chaoudhary More Branch, Ghaziabad |
| Current Account No. | 125601001229 |
| RTGS / NEFT / IFS Code | ICIC0001256 |
| Remittance details to be mailed at | accounts@santosh.ac.in and enquiry@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. Hostel fee structure

| | Type of Accommodation | Total Amount Per Year (INR) |
|-------|-------------------------------------|-----------------------------|
| BOYS | Twin Sharing Accommodation (Non AC) | 2,00,000 |
| | Single Accommodation (Non AC) | 3,00,000 |
| | Twin Sharing Accommodation (AC) | 3,00,000 |
| | Single Accommodation (AC) | 4,00,000 |
| GIRLS | Twin Sharing Accommodation (Non AC) | 2,00,000 |
| | Single Accommodation (Non AC) | 3,00,000 |
| | Twin Sharing Accommodation (AC) | 3,00,000 |
| | Single Accommodation (AC) | 4,00,000 |

For more details refer to Institution's Hostel policy.



Santosh Deemed to be University
1, Santosh Nagar, Ghaziabad (NCR Delhi)
www.santosh.ac.in | enquiry@santosh.ac.in
+91 120 4933350 / 60 / 70

4. Document checklist for candidates

| No. | Document Name |
|-----|--|
| 1 | DGHS Allotment Letter |
| 2 | NEET 2021 Hall Ticket / Admit Card issued by NBE |
| 3 | NEET 2021 Result / Rank Letter issued by NBE |
| 4 | BDS Mark sheets (1 st , 2 nd & 3 rd Professional Examinations) |
| 5 | BDS Degree Certificate |
| 6 | Migration Certificate (Undergraduate) |
| 7 | BDS Internship Completion Certificate (Date of Completion should be on before 31 st March 2020) |
| 8 | Post Graduate Diploma Certificate (if any) |
| 9 | Permanent BDS Registration Certificates from Any State Dental Council / Dental Council of India |
| 10 | Permanent BDS Registration Certificate from UP Dental Council |
| 11 | Conduct / Character certificate from Head of Dental College from where you have graduated |
| 12 | High School / Higher Secondary Certificate / Birth Certificate as proof of date of birth |
| 13 | Fee Remittance Details (Refer Table 1B for Payment Mode) |
| 14 | Pan Card Copy (Parent & Candidate) |
| 15 | Aadhar Card Copy (Candidate) |
| 16 | 1 set of self-attested Photocopies, of all of the above documents |
| 17 | 4 recent Identical Passport sized photographs |
| 18 | Post Dated Cheques for whole course fees to be submitted at the time of admission |
| 19 | Undertaking on 100 Rupees stamp for cheque presentation, Clearance and Fee schedule |

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



COURSE DISCONTINUATION BOND

(Undertaking / Bond for UG & PG Medical and Dental 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
O _____ (Name of the Parents),
resident of _____ (permanent / present
address of Parent) do hereby swear on oath as follows:

I, have been selected to the 1 st year _____ [MBBS/BDS/MD/MS/
MDS Course] at Santosh Medical College & Hospital / Santosh Dental College & Hospital, Ghaziabad, NCR 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), Government of
India (GOI), New Delhi through NEET Rank No. _____ (All India Rank).

I, say that on my own will and along with my parents/guardian, took admission to the [MBBS/BDS/MD/MS/MDS Course]
at Santosh Medical College & Hospital / Santosh Dental College & Hospital, Ghaziabad, NCR Delhi as per the DGHS
allotment with NEET Roll No. _____ Dated _____

I, say in consideration of admission to 1 st 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 undertake to pay the balance tuition fees and other fees to Santosh Deemed to be University,
Ghaziabad, NCR Delhi payable for the entire Course without any demur / objection. I also understand that the full &
final clearance / NOC will be given to me only after payment of all outstanding / balance fee.

What is stated above is true and correct. I along with my parent/guardian do hereby undertake to act accordingly. This,
the day of ____ / ____ / 2021 at, Uttar Pradesh state.

Signature of the Candidate

Name:

Mobile No.:

Email Id :

Witness Signature

Name:

Mobile No.:

Email Id :

Signature of the Parent / Guardian

Name:

Mobile No.:

Email Id :

Witness Signature

Name:

Mobile No.:

Email Id :

[To be notarized]