



OFFICE OF THE PRINCIPAL



Government of Jammu & Kashmir
Health & Medical Education Department
OFFICE OF THE PRINCIPAL
GOVERNMENT MEDICAL COLLEGE, ANANTNAG
(REGISTRAR ACADEMICS)



e mail: principal-gmca@jk.gov.in


ragmca22@gmail.com

Subject: Permission for One Year Compulsory Rotatory Medical Internship to FMGs.

Notice

The Foreign Medical Graduate (FMG) candidates who have been allotted by the Jammu and Kashmir Medical Council vide Notice No. **MRC/J/FMG/CRMI/2025/9926 Dated 07.11.2025**, for undergoing the Compulsory Rotatory Medical Internship for a period of One Year in Govt. Medical College Anantnag and its Associated Hospitals are hereby directed to submit the following documents **in original** (and 01 set of photostat copies) in the office of Registrar Academics, (Main Campus, Dialgam) GMC Anantnag.

1. Joining Report.
2. Student Form
3. Date of Birth Certificate.
4. Domicile Certificate.
5. 12th Class Marks Card.
6. All MBBS Marks Sheets.
7. MBBS Provisional Degree Certificate.
8. FMG Score Card
9. Screening Test Pass certificate
10. Provisional Registration Certificate issued J&K Medical Council/ submitted application receipt.
11. NOC from Parent University/ College for internship
12. Undertaking/Affidavit duly attested by 1st class magistrate as per format.
13. 4 Passport size Photograph.


Principal/ Dean
Government Medical College,
Anantnag.
Date: 17.12.2025

No: GMCA/PD/RA/Int/2025/4249-53

Copy to the:

1. Secretary to Govt. H&ME, Civil Secretariat, J&K, Jammu/ Srinagar for information.
2. Registrar and Secretary J&K Medical Council for information
3. Chairman IT Cell, GMC Anantnag for uploading on Official Website of College.
4. Notice Board for information of candidates.
5. Office Record file



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UNDERTAKING FOR INTERNSHIP
DULY SIGNED BY 1ST CLASS MAGISTRATE

I.....S/o,D/o,W/o.....R/o.....
..... do hereby declare that:

1. I have been selected for internship for session 2025-26 in Government Medical College Anantnag vide No.dated.....
2. That during my period of stay in the GMC Anantnag, I shall abide by the rules and regulations prescribed by the college (issued from time to time).
3. That I shall remain disciplined and shall not involve in any kind of strike, court cases, acts of ragging or in any other disciplinary act.
4. That I am not on rolls in any institution for any course and in case something adverse is found against me, I shall forfeit my claim to internship without any notice.
5. That I shall complete my internship within the stipulated time and if for any reason I have to leave the course mid way, I will not claim certificate of completion. Also repetition is only allowed on valid medical grounds with the medical proof (Medical Certificate).
6. That if at any stage it is found that I have secured admission by fraud, concealment of facts, or misstatement, my admission shall be cancelled ab-initio without any notice and I shall be liable for criminal proceedings.
7. That I shall abide by all the decisions of the Government of J&K with regard to Foreign Medical Interns in Govt. Medical College Anantnag and the same shall be accepted by me.
8. That I shall not claim any stipend from the college till sanction/ order/ directions from Administrative Department (H&ME) are received in this regard.

Deponent

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Student Intern ID:

State Medical Council Prov. Registration :

Fill in capital letters

1. Name of the student: _____
2. Father/Guardian: _____
3. Date of birth: _____
In words _____
4. Gender: _____
5. Religion/Community: (Muslim/Hindu/Sikh/Bodh/Jain/Christan)
6. Address
Permanent: _____

Photo

Pin _____
Present: _____
Pin _____

7. Contact No: Personal:

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Father/Guardian:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email address: _____@_____

8. 12th Examination Details:

Roll No	Max. Marks	Marks obtained	Name of Board CBSE / JKBOSE- SGR / JKBOSE- JMU / OTHERS	Year of passing	Session	Board Registration No

9. MBBS Examination Details:

- A. Name of College: _____
- B. Country: _____
- C. Name of University : _____
- D. University registration number: _____
- E. Date of Admission (MBBS) : _____
- F. Date of Completion (MBBS): _____

Academic career in M.B.B.S, attempts, if any			
MBBS-I	MBBS- II	MBBS Pre Final	MBBS Final
Marks obtained in (MBBS-I, MBBS-II, MBBS Pre Final, MBBS Final)			
Max. Marks	Marks obtained	%age	

Signature of the Candidate

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Documents to be attached with the application form.

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13. Undertaking/Affidavit duly attested by 1st class magistrate as per format.

Signature of the Individual

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Signature of the Official

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