OCEMED TO BE UNIVERSITY

Bharatí Vidyapeeth

(DEEMED TO BE UNIVERSITY)
PUNE, INDIA

DENTAL COLLEGE AND HOSPITAL

SECTOR -7, C.B.D., BELAPUR, NAVI MUMBAI – 400614.

"Accredited with 'A++' Grade (2024) by NAAC 'A' Grade University Status by MHRD, Govt. of India

Accredited (2004) & Reaccredited (2011) with 'A' Grade & (2017) with A+ Grade by NAAC

Principal: Dr. V. Sreenivasan, MDS BVDU/DCH/NM/ /2025-26

| | <u>Check List</u> | |
|-----|---|-------|
| Nam | e: | |
| NEF | T Roll No: AIR: Date of Birth: | |
| | I the Originals & 2 sets of self-attested photo copies to be arranged in the following | order |
| Sr. | Certificate | Yes / |
| No | | No |
| 1. | NEET Rank Letter | |
| 2. | NEET Admit card | |
| 3. | Provisional Allotment Letter | |
| 4. | Proof of Date of Birth (Birth Certificate/ 10th Passing Certificate) | |
| 5. | Nationality certificate/valid passport (Three photocopies) or School Leaving Certificate of | |
| | SSC/12th Std. indicating the nationality of the candidate as "Indian" | |
| 6. | Conduct and character certificate | |
| 7. | Transfer Certificate/Leaving Certificate | |
| 8. | Migration Certificate | |
| 9. | Statement of marks of 10th examination and passing certificate | |
| 10. | Statement of marks of 12th examination and passing certificate | |
| 11. | First B.D.S. Statement of Marks | |
| 12. | Second B.D.S. Statement of Marks | |
| 13. | Third B.D.S. Statement of Marks | |
| 14. | Final B.D.S - SemI, Statement of Marks, SemII, Statement of Marks. | |
| 15. | B.D.S. Degree Certificate/Provisional Certificate | |
| 16. | Attempt Certificate | |
| 17. | Internship completion certificate/ certificate from the Head of Institution or college that the | |
| | candidate shall complete the Internship by 30 th June of the year of admission. | |
| 18. | Passing Certificate | |
| 19. | DCI Registration Certificate/ Provisional certificate | |
| 20. | Certificate from Head of the Institute showing that the Dental College/Institute from which the | |
| | candidate has passed final BDS examination is recognized by Dental Council of India. | |
| 21. | Medical Fitness Certificate | |
| 22. | Caste Certificate (If applicable) | |
| 23. | Caste Validity Certificate (If applicable) | |
| 24. | Non Creamy Layer Certificate (If applicable) | |
| 25. | Affidavit stating that the candidate is not undergoing any Post graduate course in any other | |
| | Institution. | |
| 26. | Domicile Certificate | |
| 27. | Gap Certificate (If applicable) | |
| 28 | PH Certificate (If Applicable) | |

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D.D. or UTR receipts (A security cheque of the same amount in case of online payment)

DD Withdrawn in the favour of Principal, BVDU Dental College and Hospital, Navi Mumbai

ID proof (PAN card/Driving license/Passport/) photocopy (3 Photocopies)
Current Passport size photographs-8 copies (at the time of reporting)

PDF scan copy's of above mentioned certificate in a Pendrive

Aadhar Card photocopy (Three Photocopies)