

GOA DENTAL COLLEGE & HOSPITAL  
BAMBOLIM-GOA  
APPLICATION FORM FOR ADMISSION TO M.D.S. DEGREE PROGRAM-2025

Date of inviting application	24, 25 & 26/06/2025
Last date of receipt of application	30/06/2025
Date of display of merit list (Goa Dental College Notice Board)	03/07/2025
Date of Counselling <b>Round I</b>	04/07/2025
Last date for joining the course after Round I	14/07/2025
Date of Counselling <b>Round II</b>	16/07/2025
Last date for joining the course after Round II	04/08/2025
Date of Counselling <b>Round III</b> (if required)	-
Commencement of Academic Session	25/07/2025

Number of MDS Seats Available for the year 2025-2026

Sr. No.	Subject	NEET		Total
		State Quota	All India Quota	
1.	Oral Medicine & Radiology	2	1	3
2.	Periodontics	1	2	3
3.	Prosthodontics and Crown & Bridge	1	2	3
4.	Pedodontics & Preventive Dentistry	2	1	3
5.	Oral & Maxillofacial Surgery	2	1	3
6.	Conservative Dentistry & Endodontics	1	2	3
7.	Orthodontics &Dento-Facial Orthopaedics	2	1	3
8.	Public Health Dentistry	1	1	2
9.	Oral & Maxillofacial Pathology	1	1	2
	<b>TOTAL</b>	<b>13</b>	<b>12</b>	<b>25</b>

- Note:-
- Application must be complete in all respects. Incomplete applications will not be considered.
  - Application reaching after due date due to postal or other delays will not be entertained.
  - Applicants must attach their Admit and Score Cards as proof of their NEET ranking.
  - Application must be accompanied by attested photocopies of all relevant documents.
  - Original certificates must be shown on the day of Counseling and submitted to the College on securing admission.
  - All students should submit the Bond along with the admission fees.
  - The State Quota seat matrix is subject to Reservation as per Govt. notification.

FOR OFFICE USE ONLY

Date of Receipt:\_\_\_\_\_

Name of the Candidate\_\_\_\_\_

1.	Aadhaar Card		6.	NEET Score Card	
2.	Proof of Residence		7.	NEET PG State Quota Rank	
3.	I - IV B.D.S. Mark sheets		8.	DCI Registration updated	
4.	BDS Degree/Passing Certificate		9.	Caste/PwD Certificate (as applicable)	
5.	Internship Completion Certificate		10.	Income Certificate (if applicable)	

Scrutinized by:-

Verified by:-

ACKNOWLEDGEMENT

Received APPLICATION FORM No.\_\_\_\_\_ FOR ADMISSION TO M.D.S. DEGREE PROGRAM-2025 from\_\_\_\_\_ on \_\_\_\_\_

Signature

**1. Name of the applicant (as recorded in the certificates)**

(Surname)	(Name)	(Middle Name)
2. Date of Birth_____ 3. Nationality_____		
4. Permanent Address:-_____		
5. Tel. No._____ 6. Mobile No._____		
7. e-mail _____		
8. Name of Parent/Guardian: _____		
9. Address for Communication:- _____		
Contact No._____ e-mail : _____		
10. Permanent Registration with State Dental Council :		
Name of the State Dental Council : _____		
No. of Registration : _____ Date : _____		

NEET PERCENTAGE OBTAINED		POSITION IN THE STATE QUOTA MERIT LIST	
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**CATEGORY ( Please tick mark the option )**

GENERAL		SC		ST		OBC		EWS		PwD(GEN)	
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**DECLARATION BY APPLICANT**

I, Dr. \_\_\_\_\_ do hereby solemnly declare that the particulars furnished above are true, complete and correct to the best of my knowledge and belief. If at any time in the future, the information so provided is found to be false or incorrect or inadmissible, appropriate action as deemed fit may be taken against me.

If admitted, I agree to execute and submit an Agreement of Bond with the Government of Goa, on their terms and conditions and abide by any rules that may be framed from time to time.

I further declare that I shall comply with the rules and regulations of the Goa Dental College & Hospital and of the Goa University, with reference to Anti-Ragging and other measures.

\_\_\_\_\_  
**Signature of Applicant**

Place \_\_\_\_\_  
Date \_\_\_\_\_

**List of attested copies of certificates to be submitted along with application:-**

1. Aadhaar Card
2. Certificate of Residence from a District Magistrate/Sub-Divisional Magistrate/Mamlatdar.
3. I – IV BDS Marksheets
4. BDS Degree/Passing Certificate.
5. Internship Completion Certificate.
6. NEET Admit and Score Card **in original**
7. NEET PG State Quota Rank
8. Certificate of Permanent Registration with State/Indian Dental Council
9. Caste/Disability/Income Certificate (as/if applicable)