Mahatma Gandhi Mission's Dental College & Hospital, Kamothe, Navi Mumbai.

Website: www.mgmdchnavimumbai.edu.in E-Mail: mgmdch@mgmmumbai.ac.in Contact: Mob. 8369165763, 022-27437807

Details of Fees for I BDS Admission for the A. Y. 2025-26 For CAP Round Students Only.

				15% Quota						
S.N	Particulars	Open	SC/ST	VJNT/ SBC	OBC/ SEBC BOYS	OBC/ SEBC GIRLS	EBC/ EWS BOYS	EBC/ EWS GIRLS	Institutional/ Management/ Against NRI	NRI
		Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.
Α	Compulsory Fees									
A	(Demand Draft No. 1 - In the name of D	EAN, MGN	DENTA	L COLLE	GE & HOS	PITAL, NA	VI MUMBA	Al.) ~		
1	Tution Fees finalized by Fees Regulating Authority, MS for the A. Y. 2025-26	3,63,478/-	0/-	0/-	1,81,739/-	0/-	1,81,739/-	0/-	10,90,434/-	18,17,390/-
2	Development Fees finalized by Fees Regulating Authority, MS for the A. Y. 2025-26	54,522/-	0/-	54,522/-	54,522/-	54,522/-	54,522/-	54,522/-	1,63,566/-	2,72,610/-
	Total		0/-	54,522/-	2,36,261/-	54,522/-	2,36,261/-	54,522/-	12,54,000/-	20,90,000/-
В	Only one time for the University & Insu	irance								
В	(Demand Draft No. 2 - In the name of D	EAN, MGN	DENTA	L COLLE	GE & HOS	PITAL, NA	AVI MUMBA	AI.)		
3	MUHS Eligibility Fees	9,750/-	3,200/-	3,200/-	3,200/-	3,200/-	9,750/-	9,750/-	54,550/-	90,850/-
4	MUHS Sports Fee and Student Welfare Fund	530/-	530/-	530/-	530/-	530/-	530/-	530/-	530/-	530/-
5	MUHS – University Development Fund	100/-	100/-	100/-	100/-	100/-	100/-	100/-	100/-	100/-
6	Amartya Siksha Yojana Insurance Policy Fees	2,125/-	2,125/-	2,125/-	2125/-	2125/-	2,125/-	2,125/-	2,125/-	2,125/-
	Total	12,505/-	5,955/-	5,955/-	5,955/-	5,955/-	12,505/-	12,505/-	57,305/-	93,605/-

Please make separate two Demand Drafts as mentioned above. Fees in cash or cheque will not be accepted

Applicants from SC/ST/OBC/SBC/VJNT/SEBC/EWS who have secured and confirmed their final admission can avail the benefit under State Government various Scholarship / Freeship schemes etc. by applying online through State Government https://mahadbt.maharashtra.gov.in/portal

Candidates who are eligible for the Economically Backward Class (EBC) are hereby instructed to submit their Parents Annual Income Certificate in original issued by Tehasildar Office at the time of Admission, failing which they have to pay the full Tution Fees of the Open Category.

Annual family income limit is Rs. 8,00,000/- for EBC for State Govt. MAHADBT schemes

For availing the prescribed benefit of Scholarship / Freeship schemes etc. the candidate must fulfill the scheme eligibility and submit online application through MahaDBT portal within one month from the date of securing final admission in the college / institution.

S-Srivally.

महात्मा गांधी मिशनचे दंत महाविद्यालय आणि रुग्णालय, कामोठे, नवी मुंबई — ४१०२०९.

website: www.mgmdchnavimubai.edu.in E-Mail: mgmdch@mgmmumbai.ac.in Contat: Mob. 8369165763, 022-27437807

प्रथम वर्ष पदवी दंत अभ्यासकम शै.व.२०२५—२६ करीता महाविद्यालयाचे शुल्क केवळ राज्य सामाईक प्रवेश गुणवत्ता यादीतुन प्रवेशीत होणाऱ्या उमेदवारांकरीता

				۷4% ع	गुणवत्ता यादी कोटया	करीता	* = *		१५%	6 कोटा
अ. क	तपशील	खुला	अ.जा., अ.ज.	वि.जा., म.ज. वि.मा.व.	इ.मा.व / सामाजिक व आर्थिकदृष्टया दुर्बल षटक मुले	इ.मा.व / सामाजिक व आर्थिकदृष्टया दुर्बल घटक मुली	आर्थिकदृष्टया दुर्बल घटक / आर्थिक मागास वर्ग मुले	आर्थिकदृष्टया दुर्बल घटक / आर्थिक मागास वर्ग मुली	संस्थात्मक	अनिवासी भारतीय (NRI)
		₹.	₹.	₹.	₹.	極.	極.	極.	₹.	極.
अ	अनिवार्य शुल्क शै.व.२०२५—२६ कर्र	ोता धनाकर्ष क.१ च	त्र्या नावे. DEA	N, MGM DENT	AL COLLEGE	& HOSPITAL	, NAVI MUMBA	Al		
१	प्रवेश शुल्क (शुल्क नियामक प्राधिकरण, म.रा. यांनी शै.व.२०२५—२६ करीता निर्धारीत केलेले.)	3,83,80८/—	0/-	0/-	१,८१,७३९/—	0/-	-\?\$0,\$\$	0/-	१०,९०,४३४/—	१८,१७,३९०/—
2	विकास शुल्क (शुल्क नियामक प्राधिकरण, म.रा. यांनी शै.व.२०२५—२६ करीता निर्धारीत केलेले.)	48,422/—	0/—	48,422/—	48,427/—	48,422/—	48,427/—	48,422/-	१,६३,५६६/—	२,७२,६१०/—
	एकुण	8,86,000/-	0/-	48,422/-	२,३६,२६१/—	48,427/-	२,३६,२६१/—	48,422/-	१२,५४,०००/—	२०,९०,०००/—
ब	विद्यापीठ आणि विमा शुल्क (प्रवेशावेव	ठी एकदाच भरावया	चे शुल्क) धनाव	हर्ष क .१ च्या नावे	. DEAN, MGM	DENTAL CO		PITAL, NAVI	MUMBAI	
3	विद्यापीठ पात्रता शुल्क	9,940/-	3,200/-	3,200/-	3,200/—	3,200/-	9,640/-	9,640/-	48,440/-	90,240/-
8	विद्यापीठ क्रीडा महोत्सव शुल्क आणि विद्यार्थी कल्याण निधी	430/-	430/-	430/-	430/-	430/-	430/-	430/-	430/-	430/-
4	विद्यापीठ विकास निधी	१००/—	१००/—	१००/—	१००/—	१००/—	१००/—	१००/-	800/-	200/—
६	अमार्त्या शिक्षा योजना विमा शुल्क	२,१२५/—	२,१२५/—	२,१२५/—	२,१२५/—	२,१२५/—	२,१२५/—	२,१२५/—	२,१२५/—	२,१२५/—
	एकुण	१२,५०५/—	4,844/-	4,844/-	4,844/-	4,844/-	१२,५०५/-	१२,५०५/—	46,304/-	९३,६०५/—

- कृपया वर नमूद केल्याप्रमाणे स्वतंत्र दोन डिमांड ड्राफ्ट तयार करा. शुल्क रोख किंवा धनादेशाने स्वीकारले जाणार नाही
- SC/ST/OBC/SBC/VJNT/SEBC/EBC/EWS मधील अर्जदार ज्यांनी आपला अंतिम प्रवेश निश्चित केला आहे ते राज्य सरकारच्या https://mahadbt.maharashtra.gov.in/portal द्वारे ऑनलाइन अर्ज करून राज्य सरकारच्या विविध शिष्यवृत्ती/फ्रीशिप योजना इत्यादी अंतर्गत लाभ घेऊ शकतात.
- आर्थिकदृष्ट्या मागास प्रवर्गासाठी (EBC) पात्र असलेल्या उमेदवारांना प्रवेशाच्या वेळी तहसीलदार कार्यालयाने जारी केलेले त्यांच्या पालकांचे मूळ वार्षिक उत्पन्न प्रमाणपत्र सादर करण्याचे निर्देश देण्यात येत आहेत, अन्यथा त्यांना खुल्या प्रवर्गाचे संपूर्ण शिक्षण शुल्क भरावे लागेल. राज्य सरकारच्या महाडीबीटी EBC योजनेसाठी वार्षिक कौटुंबिक उत्पन्न मर्यादा रु. ८,००,०००/- आहे.

• शिष्यवृत्ती/फ्रीशिप योजना इत्यादींचा विहित लाभ मिळवण्यासाठी उमेदवाराने योजनेची पात्रता पूर्ण करणे आवश्यक आहे आणि महाविद्यालय/संस्थेत अंतिम प्रवेश मिळाल्यापासून एक महिन्याच्या आत महाडीबीटी पोर्टलद्वारे ऑनलाइन अर्ज सादर करणे आवश्यक आहे.

S-Smrally अधिष्ठात्री

Mahatma Gandhi Mission's Dental College & Hospital, Kamothe, Navi Mumbai. Details of Fees for I BDS Admission for the A. Y. 2025-26

Hostel & Mess Fees – Optional

	Optional Fees	Rs.
1	Hostel Fees	90,000/-
2	Mess Fees	90,000/-
3	Hostel Deposit (Refundable)	20,000/-
4	Mess Deposit (Refundable)	20,000/-
	Total Amount for Demand Draft	2,20,000/-

Note:

Payment of the above fees be made through Demand Draft in favor of: DEAN, MGM DENTAL COLLEGE & HOSPITAL, NAVI MUMBAI. Fees in cash or cheque will not be accepted.



Sismually

MAHATMA GANDHI MISSION'S DENTAL COLLEGE & HOSPITAL NOTICE BOARD & WEBSITE

BDS Admission 2025-26

Candidates are required to submit original certificates With self attested photocopies separately as per the order given below.

Sr. No.	Certificates	Т	o be submitted	
1	Selection letter of State CET Cell	Original	2 self attested copies	
2	Indian Nationality Certificate / Copy of Valid Indian Passport/ Birth Certificate endorsed with Nationality as 'Indian' on it.	Original	2 self attested copies	
3	Domicile Certificate	Original	2 self attested copies	
4	SSC / Equivalent Passing Certificate.	Original	2 self attested copies	
5	HSC / Equivalent Examination Mark sheet	Original 2 self attested co		
6	NEET – UG 2025 Mark Sheet	Original	2 self attested copies	
7	Caste Certificate.	Original	2 self attested copies	
8	Caste Validity Certificate.	Original	2 self attested copies	
9	Non-Creamy Layer Certificate valid up to 31/03/2026. (For VJ/NT, OBC, SBC,SEBC) Not for SC and ST	Original	2 self attested copies	
10	School Leaving Certificate / Transfer Certificate of HSC/12 th Std.	Original	2 self attested copies	
11	Medical Fitness Certificate (Annexure – H)	Original	2 self attested copies	
12	Gap Certificate (If Applicable)	Original	2 self attested copies	
13	Migration Certificate (If Applicable)	Original	2 self attested copies	
14	Heamogram Blood Test Report	Original	2 self attested copies	
15	Admit Card of NEET UG 2025	Original	2 self attested copies	
16	Copy of Online Application form (latest) filled on www.mahacet.org with copy of receipt of online application fee payment.	Original	2 self attested copies	
17	Recent Eligibility Certificate for EWS Category issued by Appropriate Authority for the Year 2025-26 as per State Govt. Format of GR Dt. 31.05.21 (Annexure-T)	Original	2 self attested copies	
18	Affidavit about anti ragging on plain paper	Original		
19	Hepatitis – B Vaccination certificate from Doctor on prescription.	Original		
20	Copy of Aadhar Card		3 self attested copies	
21	Copy of Voting Card		3 self attested copies	
22	Copy of Students Bank Account Pass Book or Cancel Cheque		3 self attested copies	
23	Income Certificate issued from Tehasildar for financial year 2024-25. (For EBC Students)		3 self attested copies	
24	5 Passport size photographs		==	

Note: Once the candidate is admitted through counseling, as a policy the original documents are not returned for any other reason. Hence for your convenience don't forget to scan the original documents and preserve it.

Candidate's Original certificates / documents to be bought for verification for additional Claim under category: D1/D2/D3, MKB, HA and Minority

Sr. No.	Certificates
1	D1/D2/D3: Ex-servicemen Certificate /actual service certificate
2	D1/D2: Domicile of Maharashtra Certificate of Defence person
3	D3: Transfer certificate and Domicile of other than Maharashtra certificate of parents.
4	MKB: Disputed area certificate, Mother tongue certificate, SSC/HSC from MKB area
5	HA: Parent Domicile certificate, SSC/HSC of candidate from hilly area
6	For Minority Candidates – Refer rule 5.11, 5.12 & 5.13 NEET UG 2025 State CET Cell Information Brochure.

	Annexure - A	
	Self-Declaration	Applicant's Photo
1		
		Daughter of
ofage	edoccupation	resident
	ith UID No.	are:
Hereby declare that, I have	passed	00000- 5
	College	course from
and I here	by state that, I have not taken admis	during the year
period of gap from	by state triat, I have not taken admis	ssion during the
my education.	to period, hence, th	ne gap arises in
	N/8 TA 1272 1	
knowledge, information and belief	ve is true and correct to the best of	of my personal
information of the information is foun	fully understand the consequences	of giving false
Dunishment under Indian Bond Code	nd to be false, I shall be liable for p	prosecution and
Familian Code :	and / or any other law applicable theret	O.,
Place ;	Applicant's Signature	seriosanos.
Date :	Applicant's Name :	

Format-Gap Certificate, an 100/- stomp paper- Notary.

in ju	पदवी,	पदव्यु	त्तर पदर्व	ो प्रथम वर्ष अ	भ्यासकमा	स प्रवेश	ा घेणाऱ्य	ग सर्व	मुला / मुल	ींकडु न	प्रवेशा	च्या वेत	ळीच
मतदार	यादीमध	ये नाव	नोंदणी व	करण्याच्या अनु	षंगाने घ्याव	ायाचे प्र	माणपत्र/	<u>हमीप</u> त्र	नमुना.				
			CH KU										
	मी	******				• • • • • • • • •		з	मध्यासक	मः प्रथम	वर्ष	दंत पद	वी
महाविद्	ग्रालयाचे	नाव:	एम.जी.ए	म. दंत महाविष्	ग्रालय आर्	वे रूग	ालय, व	नमोठे, न	ावी मुंबई	या मह	विद्या	_{ठयात}	प्रथम
वर्षात	प्रवेश घे	तला ः	असुन मी	दिनांक: ०१/	०१/		रोजी १	८ वर्षाच	ा/वर्षाची	झालो/	'झाले	आहे वि	केंवा
होणार	आहे.	१८	वर्ष पूर्ण	झाल्याबरोबर	मी माझे	नाव	मतदार	यादीत	नोंदवुन	घेणार	आहे	अशी	मी
प्रतिज्ञा	करतो/	करते.							,				
							स्वाक्षरी	·					
							नाव						

ANNEXURE - H MEDICAL FITNESS

A candidate must be medically fit to undergo the professional course applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed proforma, as given below on a **Letterhead**or on this format with original seal and signature.

CERTIFICATE OF M	EDICAL FITNESS				
This is to certify that I have	conducted clinical examination of Mr./Ms				
	who is desirous of admission to Health				
Science Courses.					
He/she has not given any personal history o	f any disease incapacitating him/her to undergo				
the professional course. Also, on clinical examination	on it has been found that he/she is medically fit				
to undergo the professional course.					
Certified that he/she fulfills the following criteria.					
 (1) Absence of any incapacitating and /or progressive systemic disease/disorder/condition, (2) Absence of any disability of upper limb/s. (3) Absence of any major visual/ auditory disability. (4) Absence of psychosis/neurosis/mental retardation, (5) Ability to maintain erect posture, (6) Reasonable manual dexterity. Though, following deviations have been revealed, in my opinion, these are not impediments to 					
pursue a career as a Medical / Dental / Ayurved /	Homeopathy / Unani / Occupational Therapy /				
Physiotherapy / Audiology & Speech, Language Pa	athology / Prosthetics & Orthotics / Naturopathy				
and Yogic Sciences / BSc Nursing. (Strike, which i	s not applicable):				
1	*				
2					
3					
Address of the Registered Medical Practitioner	Signature				
	Name				
	Registration No.				
Date:	Seal of Registered Medical Practitioner				

ANNEXURE I AFFIDAVIT BY THE STUDENT

			s/o, d/o,
Mr./Mrs./Ms.			having been
admitted to MGM Den	tal college & Ho	ospital, Kamothe, Navi I	Mumbai, have received a copy of the UGC
Regulations on Curbing	g the Menace of	Ragging in Higher Educ	ational Institutions, 2009, (hereinafter called
the "Regulations") care	fully read and fu	lly understood the provis	ions contained in the said Regulations.
2) I have in particular, p	perused clause 3	3 of the Regulations and	am aware as to that constitutes ragging.
penal and administrative	e action that is	ause 7 and clause 9.1 cliable to be taken agains part of a conspiracy to pr	f the Regulations and am fully aware of the t me in case I am found guilty of or abetting comote ragging.
4) I hereby solemnly av	ver and undertak	e that	
			ated as ragging under clause 3 of the
b) I will not participat	e in or abet or p	ropagate through any ac	t of commission or omission that may be
constituted as rag	ging under claus	e 3 of the Regulations.	
5) I hereby affirm that, Regulations, without pr law or any law for the ti	ejudice to any c	ther criminal action that	punishment according to clause 9.1 of the may be taken against me under any penal
6) I hereby declare the	at I have not be	en evolained or debarr	ed from admission in any institution in the
country on account of b	peing found guilt	y of abetting or being pa	art of a conspiracy to promote, ragging; and am aware that my admission is liable to be
Declared this	day of	month of	year.
			Signature of Deponent
			Name:

ANNEXURE II AFFIDAVIT BY THE PARENT/GUARDIAN

l Mr./Mrs./Ms(full
name of parent/guardian) father/mother/guardian of(full
name of student) having been admitted to MGM Dental college & Hospital, Kamothe, Navi Mumbai, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.
2) I have in particular, perused clause 3 of the Regulations and am aware as to that constitutes ragging.
3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
 4) I hereby solemnly aver and undertake that a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations. b) I will not participate in or abet or propagate through any act of commission or omission that may be
constituted as ragging under clause 3 of the Regulations.
5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
6) I hereby declare that I have not been explained or debarred from admission in any institution in the country on account of being found guilty of abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.
Declared this day of month of year.
Signature of Deponent