



UNIVERSITY ROAD, DERALAKATTE, MANGALORE 575 018
Phone: 0824-2204676 Fax : 0824- 2204667
Email: ugconfirm@yenepoya.edu.in

ADMISSION TO MBBS/ BDS (2024-25)

Yenepoya (Deemed to be University) u/s 3 (A) of the UGC Act, 1956, offers MBBS/ BDS programs at its constituent colleges, Yenepoya Medical College & Yenepoya Dental College Mangaluru.

As per the orders of the Ministry of Health & Family Welfare, Government of India, in Deemed to be Universities, counselling for MBBS/ BDS seats shall be conducted by the Directorate General of Health Services (DGHS). Accordingly the Ministry has constituted a Medical Counselling Committee (MCC) for conducting centralised online counseling and allotment of seats.

Eligible candidates with NEET UG 2024 ranking, seeking admission to MBBS/ BDS courses during 2024-25 under Management, Muslim Minority or NRI categories are required to register on www.mcc.nic.in and follow the admission procedure mentioned therein.

I) DOCUMENTS: Candidates are required to be in possession of the following original documents along with attested copies.

Sl. No.	GENERAL CATEGORY / MUSLIM MINORITY CATEGORY
1	Admit card issued by National Testing agency
2	Score card issued by National Testing agency
3	Online allotment letter of MCC
4	10 th Standard Marks Card
5	12 th Standard Marks Card
6	Transfer Certificate
7	Conduct Certificate
8	Migration Certificate
9	Caste and Income Certificate (wherever applicable)
10	Domicile Certificate
11	Physical fitness certificate
12	4 Passport size and 4 stamp size photos
13	Copy of Aadhar Card
14	UNDERTAKING(as per format furnished) to be on a stamp paper of Rs.200/- and to be notarized
15	3 sets of Attested copies of Sl.No.4 to 8 are to be produced with the originals

Sl. No.	NRI CATEGORY
1	Admit card issued by National Testing agency
2	Score card issued by National Testing agency
3	Online allotment letter of MCC
4	10 th Standard Marks Card
5	12 th Standard Marks Card
6	Transfer Certificate
7	Conduct Certificate
8	Migration Certificate
9	Caste and Income Certificate (wherever applicable)
10	Domicile Certificate
11	Physical fitness certificate
12	4 Passport size and 4 stamp size photos
13	Copy of Aadhar Card
14	Copy of Passport & Visa of the parent and student
15	Copy of the Passport & Visa of sponsor (For NRI Sponsor candidate)
16	Sponsorship Affidavit (stating that sponsor is ready to bear the expenses for the whole duration of study) - For NRI Sponsor candidate
17	Relationship certificate (Relation of candidate with the sponsor) - For NRI Sponsor candidate
18	Embassy certificate of the sponsor - For NRI Sponsor candidate
19	Family Tree notarized by Tehsildar
20	UNDERTAKING(as per format furnished) to be on a stamp paper of Rs.200/- and to be notarized
21	3 sets of Attested copies of Sl.No.4 to 8 are to be produced with the originals

UNDERTAKING: In the event of discontinuation of the course, the student's consent to pay the balance course fee needs to be submitted. **(Format attached)**

FEE: The candidates allotted seats at Yenepoya Medical College & Yenepoya Dental College are advised to make necessary payments (Tuition fee, Hostel fee etc.) through Net Banking or RTGS to the below mentioned bank account:

<p>FOR MBBS:</p> <p>Account Name: YENEOYA DEEMED TO BE UNIVERSITY</p> <p>Account Number: YMC624U<All India Rank></p> <p>IFSC Code: HDFC0004012</p> <p>Branch: DERALKATTE, MANGALORE - MANGALORE, KARNATAKA</p> <p>Please note that the account number is a virtual account number that is generated by joining your All India Rank to the prefix YMC624U. For example, if your All India Rank is 1234567, then your account number will be YMC624U1234567.</p>	<p>FOR BDS:</p> <p>Account Name: YENEOYA DEEMED TO BE UNIVERSITY</p> <p>Account Number: YDC724U<All India Rank></p> <p>IFSC Code: HDFC0004012</p> <p>Branch: DERALKATTE MANGALORE - MANGALORE, KARNATAKA</p> <p>Please note that the account number is a virtual account number that is generated by joining your All India Rank to the prefix YDC724U. For example, if your All India Rank is 1234567, then your account number will be YDC724U1234567</p>
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<p>Contact Details:</p> <p>For further clarification –</p> <ul style="list-style-type: none">• Document verifications contact #8494935203(MBBS)• Document verifications contact #6364328464(BDS)• Payment related queries contact #9746644238• E-mail ID: ugconfirm@yenepoya.edu.in

MBBS FEE STRUCTURE 2024-25						
	I Installment	II Installment	III Installment	IV Installment	V Installment	TOTAL IN RUPEES
Date of payment	At the time of Admission	01.08.2025	01.08.2026	01.08.2027	01.08.2028	
Amount in Rupees						
Course Fee	2200000	2200000	2200000	2200000	1200000	10000000
Note:						
1) The Duration of the course is 4.5 years, plus one year internship.						
2) Accommodation is included.						
3) Hostel is mandatory for all students.						
4) Every candidate shall pay the remaining course fee in the event he/she discontinues the course before its completion.						

YENEPOYA MEDICAL COLLEGE

**MBBS FEE STRUCTURE 2024-25
(NRI)**

	I Installment	II Installment	III Installment	IV Installment	V Installment	Total
Date of payment	At the time of Admission	01.08.2025	01.08.2026	01.08.2027	01.08.2028	
Course Fee (INR)	45,00,000	26,25,000	26,25,000	26,25,000	26,25,000	1,50,00,000

1) The Duration of the course is 4.5 years, plus one year internship.

2) Accommodation is included.

3 sharing accommodation is available at an additional fee.

3) Hostel is mandatory for all students.

4) Every candidate shall pay the remaining course fee in the event he/she discontinues the Course before its completion.

5) The Fee should be paid as per the schedule.

6) NRI students shall pay the fee in equivalent US Dollars.

YENEPOYA DENTAL COLLEGE

BDS (General) - FEE STRUCTURE 2024-25

	I Installment	II Installment	III Installment	IV Installment	Internship	TOTAL IN RUPEES
Date of payment	At the time of Admission	01.08.2025	01.08.2026	01.08.2027		
	Amount in Rupees					
Tuition Fee	5,76,000	4,90,000	4,80,000	4,80,000	0	20,26,000

Note:

- 1) Duration of the course is 4 years plus one year internship.
- 2) Hostel is as per annexure.
- 3) Hostel is compulsory for all students.
- 4) Every candidate shall pay the remaining course fee in the event he/she leaving the course before its completion.

YENEPOYA DENTAL COLLEGE

BDS (NRI) - FEE STRUCTURE 2024-25

	I Installment	II Installment	III Installment	IV Installment	Internship	TOTAL IN RUPEES
Date of payment	At the time of Admission	01.08.2025	01.08.2026	01.08.2027		
	Amount in Rupees					
Tuition Fee	6,51,000	6,25,000	6,25,000	6,25,000	0	25,26,000

Note:

- 1) Duration of the course is 4 years plus one year internship.
- 2) Hostel is as per annexure.
- 3) Hostel is compulsory for all students.
- 4) Every candidate shall pay the remaining course fee in the event he/she leaving the course before its completion.

BDS Hostel Fees

	1 YEAR	II YEAR	III YEAR	IV YEAR
3 SHARING	120000	120000	120000	120000
Food & Establishment charges	60000	60000	60000	60000
TOTAL	180000	180000	180000	180000
Air conditioning charges are extra Rs. 1400 per head per month.				

	1 YEAR	II YEAR	III YEAR	IV YEAR
4 SHARING	90000	90000	90000	90000
Food & Establishment charges	60000	60000	60000	60000
TOTAL	150000	150000	150000	150000
Air conditioning charges are extra Rs. 1000 per head per month.				

	I YEAR	II YEAR	III YEAR	IV YEAR
6 SHARING	60000	60000	60000	60000
Food & Establishment charges	60000	60000	60000	60000
TOTAL	120000	120000	120000	120000

(TO BE SUBMITTED ON Rs.200/- STAMP PAPER DULY SIGNED BY NOTARY)

FOR MBBS MANAGEMENT SEATS/MUSLIM MINORITY SEATS

UNDERTAKING

I, Mr/Ms (Name of the Candidate), aged aboutyears,
S/D/o(Name of the Parent) resident
of (permanent/present address of Parent) do hereby swear an oath as follows:

I have been selected to the MBBS course at Yenepoya Medical College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank.....(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the MBBS course at Yenepoya Medical College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the MBBS course and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

I YEAR	II YEAR	III YEAR
Date of payment: (at the time of admission)	(01.08.2025)	(01.08.2026)
Rs.2200000	Rs.2200000	Rs.2200000
IV YEAR	V YEAR	
(01.08.2027)	(01.08.2028)	
Rs.2200000	Rs.1200000	

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course.

In the event of my discontinuation from MBBS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Medical College, Mangaluru i.e., Rswithout any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.12,000/- during Internship period.

I agree to the above stipend to be received during the time of internship and I will not claim any additional amount.

The content mentioned above is true and correct to my knowledge. I hereby, along with my parent/guardian undertake to act accordingly. This, the day of 2024 at Mangaluru, Karnataka.

Signature of the Candidate

Signature of the Parent/Guardian

(TO BE SUBMITTED ON Rs.200/- STAMP PAPER DULY SIGNED BY NOTARY)

FOR MBBS NRI SEATS
UNDERTAKING

I, Mr/Ms (Name of the Candidate), aged about..... years,
S/D/o(Name of the Parent) resident of
(permanent/present address of Parent) do hereby swear an oath as follows:

I have been selected to the MBBS course at Yenepoya Medical College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank.....(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the MBBS course at Yenepoya Medical College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the MBBS course, and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

I YEAR Date of payment: (at the time of admission) INR 4500000	II YEAR (01.08.2025) INR 2625000	III YEAR (01.08.2026) INR 2625000
IV YEAR (01.08.2027) INR 2625000	V YEAR (01.08.2028) INR 2625000	

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course.

In the event of my discontinuation from MBBS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Medical College, Mangaluru i.e., a sum of INR without any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.12,000/- during Internship period.

I agree to the above stipend to be received during the time of internship and I will not claim any additional amount.

The content mentioned above is true and correct to my knowledge. I hereby, along with my parent/guardian undertake to act accordingly. This, the day of 2024 at Mangaluru, Karnataka.

Signature of the Candidate

Signature of the Parent/Guardian

(TO BE SUBMITTED ON Rs.200/- STAMP PAPER DULY SIGNED BY NOTARY)

FOR BDS MANAGEMENT SEATS/MUSLIM MINORITY SEATS

UNDERTAKING

I, Mr/Ms (Name of the Candidate), aged about years,
S/D/o(Name of the Parent) resident of.....
(permanent/present address of Parent) do hereby swear an oath as follows :

I have been selected to the BDS course at Yenepoya Dental College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank.....(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the BDS course at Yenepoya Dental College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the BDS course and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

I YEAR	II YEAR	III YEAR	IV YEAR
Date of payment: (at the time of admission)	(01.08.2025)	(01.08.2026)	(01.08.2027)
Rs. 576000	Rs. 490000	Rs. 480000	Rs. 480000

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course.

In the event of my discontinuation from BDS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Dental College, Mangaluru i.e., Rs..... without any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.5,500/- during Internship period.

I agree to the above stipend to be received during the time of internship and I will not claim any additional amount.

The content mentioned above is true and correct to my knowledge. I hereby, along with my parent/guardian undertake to act accordingly. This, the day of 2023 at Mangaluru, Karnataka.

Signature of the Candidate

Signature of the Parent/Guardian

(TO BE SUBMITTED ON Rs.200/- STAMP PAPER DULY SIGNED BY NOTARY)

FOR BDS NRI SEATS

UNDERTAKING

I, Mr/Ms (Name of the Candidate), aged about years, S/D/o.....(Name of the Parent) resident of.....(permanent/present address of Parent) do hereby swear an oath as follows :

I have been selected to the BDS course at Yenepoya Dental College, Mangaluru, constituent college of Yenepoya (Deemed-to-be-University) [under Section 3 of the UGC Act 1956] through the Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank.....(All India Rank).

I say that on my own will and with the permission of my parents/guardian took admission to the BDS course at Yenepoya Dental College, Mangaluru as per the MCC/DGHS Allotment Order dated

I hereby agree to complete the BDS course and accordingly undertake to pay all the tuition and other fees as per the given fee structure.

I YEAR	II YEAR	III YEAR	IV YEAR
Date of payment: (at the time of admission)	(01.08.2025)	(01.08.2026)	(01.08.2027)
INR. 651000	INR. 625000	INR. 625000	INR. 625000

I further agree that, if I fail to pay the above mentioned fee, I will not be allowed to attend my course.

In the event of my discontinuation from BDS course due to any reason; I along with my parent/guardian hereby undertake to pay balance tuition and other fees for the remaining years of study to Yenepoya Dental College, Mangaluru i.e., a sum of INR..... without any demur.

I shall have no claim for refund of fee or other charges already paid or whatsoever against the Yenepoya (Deemed to be University).

I understand that the College is paying a stipend at the rate of Rs.5,500/- during Internship period.

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Signature of the Candidate

Signature of the Parent/Guardian