

Embassy Certificate of OCI/ Sponsoring OCI

(For admission of his/her relative in Government Medical College of Assam
under NRI/NRI sponsored Quota in MBBS Course)

(ON LETTER HEAD OF THE CONCERNED INDIAN DIPLOMATIC MISSION)

F. No. :

TO WHOM IT MAY CONCERN

This is to certify that Mr. / Mrs. / Ms. _____, S/o /
W/o / D/o _____ is the holder of Overseas Citizen of India
(OCI) Card No. _____, which is valid upto _____, presently residing
at _____. He/She may be extended all courtesies and
facilities in parity with the Non-Resident Indians (NRIs), subject to conditions limited to OCIs.

This certificate is issued for himself/herself / his/her son/daughter / his/her real
brother/sister / his/her real nephew/niece / his/her grandson/granddaughter / his/her first degree
cousin, _____ for seeking admission in India under NRI/NRI sponsored
Quota.

The validity of this Certificate is for six months only.

PLACE:

SIGNATURE :

DATE:

NAME :

DESIGNATION :

SEAL ;

(OF THE ISSUING AUTHORITY)



GOVERNMENT OF
OFFICE OF THE DISTRICT COMMISSIONER, DISTRICT

RELATIONSHIP CERTIFICATE

(To be submitted by candidates applying for admission into MBBS Course in Government Medical Colleges of Assam under NRI/NRI sponsored quota where the sponsor is an OCI)

Name of Candidate :
Name of Father :
Name of Mother :
Residential Address : Village
P.O.
P.S.
District
PIN

Certified that the above named candidate/person is the son/daughter / real brother/sister / real nephew/niece / grandson/granddaughter / first degree cousin (*strike off whichever are not applicable*) of Mr. / Mrs. / Ms. _____, S/o / D/o _____, who is the holder of OCI Card No. _____.

This certificate is issued to the candidate after making proper enquiry of his/her relationship with the abovementioned person. This certificate may be used for the purpose of applying for admission in to MBBS course under NRI/NRI sponsored quota in the State of Assam.

Date:
Place:



Signature of the District Commissioner
Name of District :

**Format of Affidavit from Notary of the concerned country Undertaking
that the sponsor OCI shall sponsor the candidate for the entire course**

I, _____, S/o / D/o _____, presently residing at _____,
am the Father/Mother / Real Brother/Sister / Real Brother/Sister of father / Real Brother/Sister of
mother / Paternal grandfather/grandmother / Maternal grandfather/grandmother / First degree
paternal/maternal cousin of _____ resident of _____
who is seeking admission into MBBS course under NRI/NRI sponsored quota in Government
Medical College of Assam declare and inform that:

I shall be responsible for timely payment of prescribed tuition fees (payable annually) and
all other dues and charges in full (and not in part/instalments) to the Government of Assam
immediately after the admission is granted to the above candidate as also during the subsequent
years of studies.

The tuition fee shall be paid by me in the form of bank Draft in U.S. Dollars payable to the
Government of Assam along with a bank certificate for encashment of foreign currency of the like
amount or any other mode of payment as specified by government of Assam from time to time.

In addition to tuition fee, I shall also pay all other dues and charges to the Government of
Assam as payable by other students of the same class belonging to the same category in the foreign
currency as per Medical Admission Rules and Regulations.

I understand that in case of failure to pay Fees and dues on time, the admission will
automatically stand cancelled and fee already paid will not be refundable. Neither I nor the candidate
_____ shall have any claim against the Government on any account whatsoever.

**I am attaching copy of my OCI Card, residence proof, working proof (job _____
_____).**

Signature of the Overseas Citizen of India (OCI)
(DEPONENT)

I, the above named deponent do hereby verify that the facts stated in the above affidavit are true and
correct to the best of my knowledge and belief. No part of it is false and no material has been
concealed there from.

Verified at on the date

Signature of the Overseas Citizen of India (OCI)
(DEPONENT)

Witness 1

Signature:

Address : _____

Witness 2

Signature:

Address: _____

Passport Number _____

Country _____

Passport Number _____

Country _____

Solemnly affirmed and signed before me by the deponent on at my office.

Notary Public

UNDERTAKING

I, _____, S/o / D/o _____ undertake and affirm that I am an Overseas Citizen of India (OCI) and living in _____. My address in _____ is _____ . I am guardian of Mr. /Miss _____. The affidavit, as desired, is enclosed herewith for his/her admission in _____ under NRI/NRI sponsored quota. I undertake to pay his/her tuition fees (payable annually) and all other dues and charges in foreign currency to the Government of Assam after his/her admission and during subsequent years.

This affidavit is prepared in India because at present I am residing in India. [*Mention, if applicable*]

Date: _____

(Signature of the OCI)

Place: _____

Countersigned (Candidate seeking admission)

**Format of Affidavit from Notary of the concerned country
regarding relationship of the candidate with the OCI**

I, _____, S/o / D/o _____, presently residing at _____
, declare and inform that:

I am the Father/Mother / Real Brother/Sister / Real Brother/Sister of father / Real Brother/Sister of mother / Paternal grandfather/grandmother / Maternal grandfather/grandmother / First degree paternal/maternal cousin of _____ resident of _____ who is seeking admission into MBBS course under NRI/NRI sponsored quota in Government Medical College of Assam

Signature of the Overseas Citizen of India (OCI)
(DEPONENT)

I, the above named deponent do hereby verify that the facts stated in the above affidavit are true and correct to the best of my knowledge and belief. No part of it is false and no material has been concealed there from.

Verified at on the date

Signature of the Overseas Citizen of India (OCI)
(DEPONENT)

Witness 1

Signature: _____

Address : _____

Passport Number _____

Country _____

Witness 2

Signature: _____

Address: _____

Passport Number _____

Country _____

Solemnly affirmed and signed before me by the deponent on at my office.

Notary Public