1. NEET-SS 2017 for admission to DM/MCh super specialty courses shall be conducted on 10th & 11th June 2017.

2. The test for MD Tropical Medicine specialty shall be conducted on 11th June 2017 at Kolkata only. The exact venue for the test shall be indicated in the admit card. Timing of test will be remain same as mentioned in the information bulletin of NEET SS 2017 which is available on website www.nbe.edu.in

3. Candidates who are in possession of recognized post graduate medical degree in Tropical Medicine / Provisional Pass Certificate or likely to be in possession by 15th July 2017 in accordance with eligibility qualifications for super specialty courses as mentioned in Annexure B of the Information Bulletin can apply for NEET SS 2017.

4. The application form for NEET SS 2017 can be downloaded from www.nbe.edu.in. The duly filled application form is to be submitted on or before 25th May 2017 at:

   National Board of Examinations
   Medical Enclave, Mahatma Gandhi Marg (Ring Road),
   Ansari Nagar, New Delhi-110029

5. Candidates are requested to kindly superscribe the envelope with the subject matter of the correspondence for expeditious processing.

6. Fee for NEET SS 2017 (Rs. 3750/-) is to be deposited through Demand Draft. The Demand Daft should be drawn in favour of “National Board of Examinations” payable at Delhi.

7. Candidate has to send the following documents (Self attested) along with duly filled downloaded application form to NBE latest by 25th May 2017 at above mentioned address.

   ➢ Application form duly filled.
   ➢ Demand Draft in original.
   ➢ Photocopy of Permanent or Provisional SMC/MCI registration Certificate.
   ➢ Two recent passport size photographs.

8. Admit Card will not be issued to the candidates who fail to submit the above mentioned documents.

*****
1. Important: Your name must exactly match your name on your Passport/MBBS degree.
   Full Name (as per your MBBS Degree/Provisional Pass Certificate of MBBS)
   (*as per Passport/MBBS Degree for FMGE candidates)

2. Primary email address  (Admit Card will only be sent via email)

3. Father’s Full Name * Do not enter salutation such as Shri/SMT/Dr/Mr/Mrs etc.
   (Note: There should be a space between First name/middle name/surname. Eg. Rakesh Kumar Gupta)

4. Mother’s Full Name * Do not enter salutation such as Shri/SMT/Dr/Mr/Mrs etc.
   (Note: There should be a space between First name/middle name/surname. Eg. Priyanka Sharma)

Additional contact information
5. Primary Phone Number (Mobile)

6. Secondary Phone Number (Mobile)
   (Mobile phone recommended. Used for SMS notification)

7. Postal Address(address where you would like correspondence sent)
   Country

   Address line 1

   Address line 2

   Address line 3

   City

   States / Union Territories

PIN CODE
(For India - If you do not know your Pin Code look on the Indian Postal Services website – www.indiapost.gov.in)
8. Paste here (do not or staple) a recent passport size photograph.

9. Signature of the Candidate

10. The Broad specialty in which you shall take the test

TROPICAL MEDICINE

11. Nationality

- [ ] Indian
- [ ] OCI/PIO
- [ ] Other

12. Date of Birth

13. Gender

- [ ] Male
- [ ] Female

14. Category (As per the Central List)

- [ ] General
- [ ] SC
- [ ] ST
- [ ] OBC (Non-Creamy Layer)

15. Are you a Person with Disabilities (Physically Handicapped)? Please confirm your PWD status before proceeding with your Application

- [ ] Yes
- [ ] No

16. Write your Domicile/Native State/Union Territory

Aadhaar Card (Optional)

17. Have you been issued Aadhaar Card?

- [ ] Yes
- [ ] No

If Yes, Please Provide your Aadhaar Card Number. (12 digits limit)

In case, any candidate reports to the test center with e-Aadhaar card as proof of identity, the e-Aadhaar card should be a good quality colour print out with clearly visible photograph. The photograph should not have kinks, scratches and stains, and should definitely match with the candidate presenting the e-Aadhaar card. Decision of NBE in this regard shall be final.
19. Are you willing to take up Super Specialty courses in institute/hospital of Armed Forces Medical Services?

☐ Yes  ☐ No

Please select which one of the following category of professionals you belong to:

☐ Serving Armed Forces Medical Services Officer
☐ Paramilitary/GOI Sponsored Officers
☐ Ex-Short Service Commissioned Officer
☐ Civilian Doctor

20. Marks of Identification
   (I) Marks of Identification 1

   (II) Marks of Identification 2

   The Mark of Identification 2 field is required.

21. MCI/SMC Registration Detail
   (I) Your permanent/provisional MCI/SMC registration number

   (II) Name of your Medical Council

22. Type of Registration

   ☐ Provisional  ☐ Permanent

   Candidates are required to bring a photocopy of the permanent or provisional MCI/SMC registration (to be retained) and at least one original and valid (not expired) photo identification to the test centre. The name on your photo identification must match your name as entered in your registration. Acceptable forms of photo identification are limited to Driving license, Passport, PAN Card, Voter ID and Aadhaar Card (with Photograph). Photocopies of the original are not acceptable.

   Candidates who do not produce PHOTOCOPY of MCI/SMC registration certificate along with a valid Photo ID would not be allowed to test.

Apply for NEET-SS

23. Primary Medical Qualification Detail
   (I) Write your total aggregate marks obtained in 1 +2 +3 (+4 , if any) professional MBBS examination as percentage of the maximum total marks

   Bachelor of Medicine / Bachelor of Surgery (MBBS)

   Your total percentage marks %

   (II) State/Union Territory where your MBBS College/Institution is located

   (III) Write name of University from where you have completed your MBBS

   (If University name is not in the list, select “Other” option. Then type the name of University in the corresponding field.)
24. Post Graduate Qualifications - MD/MS/DNB

(I) State/Union Territory of University where you completed your MD/MS/DNB

(II) Write the Name of University where you completed your MD/MS/DNB
(Choose NBE if you have completed DNB Course) *
(If University name is not in the list, select “Other” option. Then type the name of University in corresponding field.)

(III) Write College/Institute name where you completed your MD/MS/DNB
(If college/Institute name is not in the list, select “Other” option. Then type the name of College/Institute in corresponding field.)

(IV) Date of Joining your MD/MS/DNB

(V) Date of Completion of your MD/MS/DNB

(VI) Month and Year of Passing MD/MS/DNB

25. Write your Post Graduate qualification specialty

TROPICAL MEDICINE

26. Additional Educational Qualification

(I) Additional Educational Qualification

(II) Year of Passing Additional Education

27. Additional Information

(I) Have you ever been deported / rusticated during a medical course?

☐ Yes  ☐ No

(II) Please provide details of deportation / rustication

(III) Have you ever been charged of use of Unfair Means by NBE or any other Examination Body?

☐ Yes  ☐ No
(IV) Please provide details of Unfair Means charge

(V) Have you ever appeared in any examination conducted by NBE?

Yes  No

(VI) Write your most recent previous exam in which you appeared in

(VII) Write Previous Roll Number or Testing ID of most recent exam

(VIII) Year of most recent Previous NBE Exam

28. Examination Fee Details

Demand Draft No.  Amount  Date

Name of the Bank & City

Declaration by Candidate

I certify that I fulfill the eligibility requirements for NEET SS 2017 and admission to DM/M.Ch Courses and have furnished complete and correct information. I understand that any instances of furnishing incorrect information detected at any stage of the selection process will automatically disqualify me from the selection process and I will not be allowed to appear for NEET SS or any such examination in future.

Similarly, if such instances go undetected during the current selection process but are detected in subsequent years, such disqualification will take place with retrospective effect. I also understand that provision of incomplete information will automatically disqualify me from the selection process. I have read the information bulletin and do hereby undertake that I will not indulge in any unfair means/practice for NEET SS 2017. I understand that decision of NBE shall be final and binding upon me.

Any dispute concerning NEET SS 2017 would be subject to Jurisdiction of the Competent Courts exclusively at Delhi/New Delhi only.

I will comply with Non-Disclosure Agreement as indicated in the Information Bulletin.

Indicate your agreement

I agree  I do not agree

Date:          /          /2017

Signature of the Candidate