

**NATIONAL BOARD OF EXAMINATIONS**  
**NEW DELHI**

Dated: 05-02-2020

**Notice**

**Sub: AFFIDAVIT IN SUPPORT OF GOVERNMENT NOMINATION -  
Regarding**

**Kind Attn: All Applicants for NEET PG 2020 from Jammu & Kashmir**

1. Government of Jammu and Kashmir has decided that Jammu and Kashmir will continue with existing scheme regarding admissions to NEET PG courses and not to contribute to scheme of All India Quota for the academic year 2020-21
2. Candidates who have studied/ passed MBBS from Jammu & Kashmir are accordingly not eligible for 50% All India Quota seats.
3. However, the candidates who were nominated by the Government of India (under central pool seats) to do MBBS from Medical Colleges in Jammu & Kashmir shall be eligible to apply for admission on 50% All India Quota seats.
4. Such candidates must submit a duly signed affidavit declaring that he/she was nominated by the Government of India (under central pool seats) to do MBBS from Medical Colleges in Jammu & Kashmir to the following address along with the print out of the acknowledgement of submission of online application for NEET-PG 2020 **latest by 10th February 2020**. A Scanned copy of the duly signed affidavit also needs to be furnished through email at **neetpg@nbe.edu.in**

Joint Director (Medical)  
Department of Examinations - Conduct  
National Board of Examinations  
Medical Enclave, Ansari Nagar,  
Mahatma Gandhi Marg, New Delhi  
110 029

5. Format of the affidavit is detailed below.

**NBE.**

**FORMAT OF AFFIDAVIT FOR JAMMU & KASHMIR CANDIDATES**

**To be submitted only by candidates claiming seats under All India Quota**

(To be completed on Non-Judicial Stamp Paper of Rs. 10/-)

**AFFIDAVIT**

I,..... Son/Daughter of.....

R/o.....do hereby solemnly affirm and state

as follows:

1. That I am not eligible to apply for the MD/MS/PG Medical Diploma seats in state of Jammu & Kashmir and hence not eligible to seek admission in Medical Colleges of Jammu & Kashmir.

AND

2. That I am not domiciled in Jammu & Kashmir.

**DEPONENT**

**VERIFICATION:**

I, the above-named deponent does hereby verify that the facts stated in paragraph 1 and 2 of the affidavit are true to my personal knowledge. Verified at.....on this.....day of.....

**DEPONENT**