GOVERNMENT OF BIHAR

BIHAR COMBINED ENTRANCE COMPETITIVE EXAMINATION BOARD

I. A. S. Association Building, Near Patna Airport, Patna – 14

POST GRADUATE MEDICAL COUNSELLING (PGMAC) – 2026

FOR MD (HOMOEOPATH) COURSE

CHECK-SLIP

(To be filled in by the candidate in his / her own clear handwriting)

Course Applied for PG (Homoeopath)

A. 1. Name .....

2. PGMAC (*Homoeopath*)-2026
   (i) ID .....
   (ii) AIAPGET-2026 Rank .....
   (iii) Category .....
   (iv) State UR Rank for Bihar .....
   (v) State Category Rank of Bihar .....

3. (a) Marks obtained in BHMS (Part–II) :.....

   (b) In case of Grade, the Marks after conversion using conversion factor : .....

5. Father's Name : .....

6. Permanent Address : .....

7. Registration No. of Central Council of Indian Medicine : .....

8. Registration No. of Bihar State Council of Homeopath / Homoeopath /Unani Medicine :.....

9. Phone No. .....

10. Mobile No. .....

11. e_mail address .....

Date ..... .

.....

Full Signature of the Candidate

B. **FOR THE USE OF COUNSELLING**

1. Original copies of the following documents as required are to be enclosed with the completed Application Form.

i. Six photographs identical to one used for preparing the Admit card of AIAPGET-2026.
ii. Admit Card of AIAPGET-2026.
iii. Original Matric Certificate.
iv. BHMS Passing Certificate
v. Mark sheets of BHMS (I, II & III Parts).
vi. College leaving certificate.
vii. Rotatory Internship Completion Certificate
viii. Homoeopath Registration Certificate.
ix. Residential Certificate.
x. Certificate from the Head of the Institution where the candidate studied last mentioning permanent residence as per the admission register of BHMS Course.
xi. Caste Certificate.
xii. Certificate for Economically Weaker Section (EWS).
xiii. No objection certificate from employer.
xiv. Any other certificates in support of eligibility as required and mentioned in the prospectus of PGMAC (Homoeopath)-2026 (available on website).

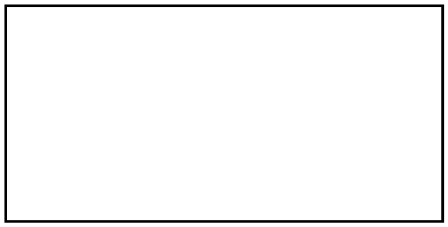
Date .....

.....

Signature of Verifying Officer

2. CHECK POINTS :

Sl. No.	*Checking Details*	*Remarks and Signature of Verifying Officer*
1.	**Age :** The candidate's date of birth ..... as mentioned in his / her AIAPGET-2026 Admit Card is verified / Not Verified against his / her Date of Birth as mentioned in his / her original certificate / Marks Sheet of Matriculation / Equivalent Examination.	
2.	**Educational Qualification :** The candidate submitted the following in original (i) Passed BHMS from Govt. Homoeopathic College of Bihar. (ii) Cetificate / Marks sheet of BHMS Part–I & Final. (iii) Certificate for completing the Rotatory Internship dated ..... from ..... to ..... (iv) Certificate / Proof of Permanent Registration from Central Council of Indian Medicine / Bihar State Council of Homoeopath / Ayurveda/ Unani Medicine. On verification of the above certificates / documents, the candidate satisfies/ does not satisfy the educational eligibility requirement for PGMAC (Homoeopath)-2026.	
3.	**Residential Qualification :** (i) The residential certificate issued by the competent authority has been submitted / not submitted by the candidate. (ii) Certificate from the Head of the Institution where the candidate studied last mentioning permanent residence as per the admission register (for candidates passing final BHMS from outside the state of Bihar) has been submitted / not submitted. Accordingly he / she fulfils / does not fulfil the residential requirements for PGMAC (Homoeopath)-2026. (iii) In case, the candidates claims to fulfill the requirement of permanent residence on the basis of the Residence Certificate of his / her spouse, the marriage certificate duly issued by the competent authority is **submitted / not submitted.**	

Sl. No.	*Checking Details*	*Remarks and Signature of Verifying Officer*
4.	**Identity Verification :** (i) Left thumb impression of the candidate  (ii) Mark of Identification ..... (iii) Candidate's full signature before the verifying officer In English ..... In Hindi ..... After tallying the above signature, mark of identification and the candidates face with the signature, mark of identification and photograph of the candidates on admit card and his / her original application form, the candidate's identity is established / not established.	
5.	**Eligibility for Reserved Seats :** (i) The original certificate for caste and reservation category issued from competent authority has been submitted / not been submitted by the candidate. (ii) Certificate from the Head of the Institution where the candidate studied last regarding Examination, Tuition Fees / Exam. Fee / Scholarship available (for SC / ST candidates only) has been submitted / not submitted. On the basis of these certificates, the candidate is found / not found eligible for reserved seats of .... Category. (iii) In case, the candidate claims the benefits of SC / ST Category reservation on the basis of the Caste Certificate of his / her mother, the marriage certificate of his / her mother duly issued by the competent authority is **submitted / not submitted.** (v) The original Certificate for EWS category issued by concerned DM / SDO / CO in the Prescribed Performa has been submitted / not submitted by the candidated. (vi) The original Certificate for DQ issued by concerned authority is submitted / not submitted by the candidated. During verification he is found fit / unfit for DQ seat.	
6.	**No Objection Certificate :** The candidate is in employment of .... and submitted / not submitted the "No Objection" Certificate to the effect that if selected he / she will be granted study leave to pursue the PG Course. As such he / she satisfies / does not satisfy the criteria of "No Objection".	

7.	**Eligibility as per Section 5 of the Prospectus of PGMAC (Homoeopath) –2026 :** The candidate has already been admitted / not admitted in ..... PG Course. As such the candidate satisfies / does not satisfy the criteria as per Section 5 of the Prospectus of PGMAC (Homoeopath) – 2026.	

C. CHOICE OF PG COURSE AND INSTITUTION :

1. I ..... PGMAC (Homoeopath) -2026 ID. ..... UR Rank..... Cat. Rank ..... son / daughter of Sri .... hereby declare that I have chosen the following PG Course and Institution according to my own free will and liking after full consideration from amongst the seats in Courses and Institution available at my UR / Cat. Rank ..... / after UR / Cat. Rank ..... due to my late arrival / presence.

PG (Homoeopath) Degree / Diploma Course	Institution
.....	.....

I further declare that the above option has been given at my own risk knowing fully well that the course / institution is recognised / not recognised by Central Council of Indian Medicine. I will not hold the authorities concerned responsible for any adverse consequence thereof.

Date ....

Full Signature of the Candidate

2. PG (Homoeopath) Course & Institution for Allotment :

(i) Open / reserved seat of the category .....

(ii) PG (Homoeopath) Courses (Degree / Diploma) .....

(iii) Institution .....

Date ....

Signature of Verifying Officer

PGMAC - 2026 for MD (*Homoeopath*)

Biometric Identification Report

PGMAC-ID _____ ***Date :*** _____

CANDIDATE'S NAME : _____

AIAPGET-2026 Rank . : _____

PGMAC-2026 RANK : UR RANK _____ **CAT. RANK** _____

AADHAR NO.. : _____

PHONE / MOBILE NO. : _____

The biometric data comprising of the thumb impression and photo of the above mentioned candidate appearing for the counselling of PGMAC-2026 for MD (***Homoeopath***) was collected before the undersigned on dated ..... for establishing his / her identity.

L.T.I./ R.T.I. of the Candidate

Signature of the Candidate

Remark if any

Representative of
Systomat Solutions Pvt. Ltd.

Signature of Officer Incharge
PGMAC- 2026

POST GRADUATE MEDICAL COUNSELLING (PGMAC) – 2026

FOR MD (HOMOEOPATH) COURSE

ABSENTEE SLIP

Date : .....

CANDIDATE'S FULL NAME : .....

PGMAC (HOMOEOPATH)-2026 ID : .....

AIAPGET-2026 RANK : .....

CATEGORY : .....

STATE UR RANK FOR BIHAR : .....

STATE CATEGORY RANK OF BIHAR : .....