YENEPOYA
Deemed to be University

Recognized under Sec 3(A) of the UGC Act 1956 Accredited by NAAC with 'A+' Grade

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

## ADMISSION TO MBBS/ BDS (2026-27)

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 2026 ranking, seeking admission to MBBS/ BDS courses during 2026-27 under Management, Muslim Minority or NRI categories are required to register on www.mcc.nic.in and follow the admission procedure mentioned therein.

1) **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 | 10th Standard Marks Card |
| 5 | 12th Standard Marks Card |
| 6 | Transfer Certificate |
| 7 | Conduct Certificate |
| 8 | Migration Certificate |
| 9 | Caste and Income Certificate (wherever applicable) |
| 10 | Domicile Certificate |
| 11 | 4 Passport size and 4 stamp size photos |
| 12 | Copy of Aadhar Card |
| 13 | UNDERTAKING( as per format furnished) to be on a stamp paper of Rs.200/- and to be notarized |
| 14 | 2 sets of self-Attested copies of Sl.No.4 to 8 are to be produced with the originals |

| Sl. No | NRI DOCUMENTS AS PER MCC GUIDELINES |
|---|---|
| 1 | Admit card issued by National Testing agency |
| 2 | Score card issued by National Testing agency |
| 3 | Online allotment letter of MCC |
| 4 | 10th Standard Marks Card |
| 5 | 12th Standard Marks Card |
| 6 | Transfer Certificate |
| 7 | Conduct Certificate |
| 8 | Migration Certificate |
| 9 | Caste and Income Certificate (wherever applicable) |
| 10 | Domicile Certificate |
| 11 | 4 Passport size and 4 stamp size photos |
| 12 | Copy of Aadhar Card |
| 13 | Copy of Passport & Visa of the parent /Sponsor and student |
| 14 | NRI Certificate issued by the Competent Authority (Embassy / Indian Consulate) |
| 15 | Affidavit (Notarized) by the NRI parent/ Real Brother/ Real Sister stating that they will sponsor the entire course fee and living expenses of the candidate (son/daughter) during the period of study supported by NRE Bank Account Passbook. |
| 16 | An affidavit (notarized) by the legal guardian that he/she will sponsor the entire course fee and living expenses of the candidate during the period of study duly supported by NRE (Non-Resident External) Bank Account Pass Book. |
| 17 | Evidence of Bonafide Guardianship Stating relationship between the NRI legal guardian and the candidate. |
| 18 | OCI/PIO card of the candidate (if applicable) |
| 19 | Relationship to be verified by competent revenue authority officer (Tehsildar/ Government Officer) & Family Tree. |
| 20 | UNDERTAKING( as per format furnished) to be on a stamp paper of Rs.200/- and to be notarized |
| 21 | 2 sets of self-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)**

**MODE OF PAYMENT**:

The candidates are advised to make necessary payments through Net Banking / RTGS / Demand Draft in favour of YENEPOYA(Deemed to be University) payable at Mangalore.
The amount can be transferred to the following bank (in advance) accounts and proof of remittance produced along with the documents.

| **FOR MBBS:** | **FOR BDS:** |
|---|---|
| **Account Name**: YENEPOYA DEEMED TO BE UNIVERSITY<br>**Account Number**: YMC624U<All India Rank><br>**IFSC Code**: HDFC0004012<br>**Branch:** DERALKATTE MANGALORE - MANGALORE, KARNATAKA<br>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. | **Account Name**: YENEPOYA DEEMED TO BE UNIVERSITY<br>**Account Number**: YDC724U<All India Rank><br>**IFSC Code**: HDFC0004012<br>**Branch:** DERALKATTE MANGALORE - MANGALORE, KARNATAKA<br>Please note that the account number is a virtual account number that is generated by joiningyour **All India Rank** to the prefix YDC724U. For example, if your **All India Rank** is 1234567, then your account number will be YDC724U1234567. |
| **NRI**<br>**Account Name**: YENEPOYA DEEMED TO BE UNIVERSITY<br>**Account Number**: 50200090985117<br>**(Type of Account: Current Account – EEFC – USD)**<br>**IFSC Code**: HDFC0001269<br>**Branch:** MG ROAD, MANGALORE<br>**BRANCH Code:** 001269<br>**MICR Code:** 575240003<br>**SWIFT Code:** HDFCINBB<br>**Please Note: Only Amount in USD is acceptedto this account** | **NRI**<br>**Account Name**: YENEPOYA DEEMED TO BE UNIVERSITY<br>**Account Number**: 50200090985117<br>**(Type of Account: Current Account – EEFC – USD)**<br>**IFSC Code**: HDFC0001269 **Branch:** MGROAD, MANGALORE**BRANCH Code:** 001269<br>**MICR Code:** 575240003<br>**SWIFT Code:** HDFCINBB<br>**Please Note: Only Amount in USD is accepted tothis account** |

**MBBS / BDS COURSE REFUND RULES**

| | **MGT / Muslim Minority Category** | **NRI Category** |
|---|---|---|
| | **(In Rs.)** | **USD ($)** |
| The amount of Fee to be deducted on re-allocation of seat to the candidatesin 2nd round of UG Counseling | 10000 | 10000 (INR) |
| The Amount of Fees to be deducted in case Candidate resigns after 2nd roundof Counseling period | 10000 * | 10000 (INR)* |
| Specify Penalty, if any, in case candidate resigns after final round ofCounseling | Entire Course fee | Entire Course fee |
| Time Period of reimbursement | 30 days ** | |

* In addition you are also liable to pay penalty (entire course fee) if DGHS does not permit us to fill the vacant seat (due to your withdrawal) in the subsequent rounds.
**From the date fund is transferred / received fully by the University & refund procedure is completed.

**Contact Details:**
For further clarification –

- Document verifications contact #8494935203(MBBS)
- Document verifications contact #6364328464(BDS)
- Payment related queries contact # 8792518364 / 7736388238 (MBBS)
- Payment related queries contact # 8147170473 (BDS)
- E-mail ID: ugconfirm@yenepoya.edu.in

| MBBS FEE STRUCTURE 2026-27 | | | | | | |
|---|---|---|---|---|---|---|
| | I Installment | II Installment | III Installment | IV Installment | V Installment | **TOTAL IN RUPEES** |
| Date of payment | At the time of Admission | 01.08.2027 | 01.08.2028 | 01.08.2029 | 01.08.2030 | |
| Amount in Rupees | | | | | | |
| | | | | | | |
| **Course Fee** | 2300000 | 2300000 | 2300000 | 2300000 | 1300000 | **10500000** |
| | | | | | | |

**Note:**

1) The Duration of the course is 4.5 years, plus one year internship.
2) Accommodation and food is included.
3) Air Conditioning Charges are extra for Hostel Rooms.
4) Hostel is mandatory for all students.
5) 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 2026-27 (NRI)** | | | | | | |
| | I Installment | II Installment | III Installment | IV Installment | V Installment | **Total** |
| Date of payment | At the time of Admission | 01.08.2027 | 01.08.2028 | 01.08.2029 | 01.08.2030 | |
| **Course Fee (USD)** | 50000 | 36000 | 36000 | 36000 | 36000 | **194000** |
| | | | | | | |

**Note:**

1) The Duration of the course is 4.5 years, plus one year internship.
2) Accommodation, food and Air-conditioning Charges 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.

| YENEPOYA DENTAL COLLEGE | | | | | | |
|---|---|---|---|---|---|---|
| **BDS (General) – FEE STRUCTURE 2026-27** | | | | | | |
| | I Installment | II Installment | III Installment | IV Installment | Internship | **TOTAL IN RUPEES** |
| Date of payment | At the time of Admission | 01.08.2027 | 01.08.2028 | 01.08.2029 | | |
| | **Amount in Rupees** | | | | | |
| Tuition Fee | 5,28,000 | 5,02,000 | 5,02,000 | 5,02,000 | - | **20,34,000** |
| | | | | | | |

**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 2026-27** | | | | | | |
| | I Installment | II Installment | III Installment | IV Installment | Internship | **TOTAL** |
| Date of payment | At the time of Admission | 01.08.2027 | 01.08.2028 | 01.08.2029 | | |
| | **Amount in Rupees/ Dollars** | | | | | |
| Tuition Fee | Rs.6,28,000 | Rs.6,02,000 | Rs.6,02,000 | Rs.6,02,000 | - | **Rs.24,34,000** |
| | $6,975 | $6,670 | $6,670 | $6,670 | | **$26,985** |

**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 | | | | |
|---|---|---|---|---|
| | **I YEAR** | **II YEAR** | **III YEAR** | **IV YEAR** |
| **3 SHARING** | 120000 | 126000 | 132300 | 138900 |
| Food & Establishment charges | 60000 | 63000 | 66150 | 69450 |
| **TOTAL** | **180000** | **189000** | **198450** | **208350** |
| Air conditioning charges are extra Rs. 1400 per head per month. | | | | |

| | **I YEAR** | **II YEAR** | **III YEAR** | **IV YEAR** |
|---|---|---|---|---|
| **4 SHARING** | 90000 | 94500 | 99225 | 104100 |
| Food & Establishment charges | 60000 | 63000 | 66150 | 69450 |
| **TOTAL** | **150000** | **157500** | **165375** | **173550** |
| Air conditioning charges are extra Rs. 1000 per head per month. | | | | |

| | **I YEAR** | **II YEAR** | **III YEAR** | **IV YEAR** |
|---|---|---|---|---|
| **6 SHARING (without AC)** | 60000 | 63000 | 66150 | 69450 |
| Food & Establishment charges | 60000 | 63000 | 66150 | 69450 |
| **TOTAL** | **120000** | **126000** | **132300** | **138900** |

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

**FOR MBBS MANAGEMENT SEATS/MUSLIM MINORITY SEATS**

**1st Party – Student & 2nd Party - Principal Yenepoya Medical College**

**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** | **II YEAR** | **III YEAR** |
|---|---|---|
| Date of payment: (at the time of admission) | **Date:** | **Date:** |
| Rs.2300000 | Rs.2300000 | Rs.2300000 |
| **IV YEAR** | **V YEAR** | |
| **Date:** | **Date:** | |
| Rs.2300000 | Rs.1300000 | |

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., 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.15,000/- during the internship period.

The student shall have no right to demand or claim any additional stipend or allowance beyond the fixed amount.

If any additional stipend is prescribed by the NMC/Government or claimed by the student, the same shall be borne by the Parent / Guardian as additional fees payable to the College.

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 …… 2026 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**

**1st Party - Student & 2nd Party - Principal Yenepoya Medical College**

**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 | II YEAR | III YEAR |
|---|---|---|
| Date of payment: (at the time of admission) | **Date:** | **Date :** |
| USD 50000 | USD 36000 | USD 36000 |
| **IV YEAR** | **V YEAR** | |
| **Date:** | **Date:** | |
| USD 36000 | USD 36000 | |

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 USD..... 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.15,000/- during the internship period

The student shall have no right to demand or claim any additional stipend or allowance beyond the fixed amount.

If any additional stipend is prescribed by the NMC/Government or claimed by the student, the same shall be borne by the Parent / Guardian as additional fees payable to the College.

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 …… 2026 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**

**1st Party – Student & 2nd Party - Principal Yenepoya Dental College**

## 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) | Date: | Date : | Date : |
| Rs. 528000 | Rs. 502000 | Rs. 502000 | Rs. 502000 |

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.

The student shall have no right to demand or claim any additional stipend or allowance beyond the fixed amount.

If any additional stipend is prescribed by the NMC/Government or claimed by the student, the same shall be borne by the Parent / Guardian as additional fees payable to the College.

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 …… 2026 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**

**1st Party - Student & 2nd Party - Principal Yenepoya Dental College**

**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 below in Rs. / Dollars (Kindly tick).

| I YEAR | II YEAR | III YEAR | IV YEAR |
|---|---|---|---|
| Date of payment: (at the time of admission) | Date: | Date : | Date : |
| Rs.628000 | Rs.602000 | Rs.602000 | Rs.602000 |
| $ 6975 | $ 6670 | $ 6670 | $ 6670 |

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.....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.

The student shall have no right to demand or claim any additional stipend or allowance beyond the fixed amount.

If any additional stipend is prescribed by the NMC/Government or claimed by the student, the shall borne by the parent / Guardian as additional fees payable to the college.

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 …… 2026 at Mangaluru, Karnataka.

**Signature of the Candidate** **Signature of the Parent/Guardian**

# General guidelines of the Medical / Dental College

**Attendance Policy:**

1) The Student shall maintain discipline, follow the Academic Calendar, and comply with all rules of the College and University.
2) The Student shall attend theory classes, clinical postings, and practicals regularly, and appear for all internal examinations (theory and practical).
3) The Parent/Guardian agrees that failure to secure the minimum prescribed attendance or internal assessment eligibility shall disqualify the Student from appearing in University Examinations, and no exemption shall be sought in this regard.
4) The Student shall not indulge in ragging, Substance abuse, misbehavior, misconduct, or any unlawful/anti-institutional activity.

**Payment Policy :**

1) All payments shall be made on or before the notified dates, only to the designated University account.
2) Delay in fee payment shall attract a penalty as prescribed by the College.
3) Non-payment shall lead to denial of permission to attend theory classes, practicals, postings, and examinations or continuation of the course.
4) The fee fixed at the time of admission shall remain unchanged for the entire program duration.
5) In the event of discontinuation/withdrawal from the course at any stage, for any reason whatsoever, the Student and Parent/Guardian shall be jointly and severally liable to pay the balance course fee for the remaining years of study without demur.
6) No claim for refund of fees or charges already paid shall be entertained under any circumstances.

**Vehicle Policy :**

1) Undergraduate students, including interns, are prohibited from bringing, parking, or using personal/borrowed vehicles inside the University campus.

**Parental Responsibilities:**

1) The Parent/Guardian shall ensure the Student’s regular attendance and academic compliance.
2) They shall attend all Parent-Teacher meetings convened by the College.
3) They undertake to abide by all College/University rules for the entire duration of the program.

**Acknowledgment:**

We, the Student and Parent/Guardian, hereby acknowledge that we have read and understood the terms and conditions of this Undertaking and agree to be legally bound by them.