SANTOSH
Deemed to be University
(Established u/s 3 of the UGC Act, 1956)

Santosh Deemed to be University
1, Santosh Nagar, Ghaziabad (Delhi NCR)
www.santosh.ac.in | enquiry@santosh.ac.in
+91 120 4933350 / 60 / 70

Important Information		
1. Fees & Mode of Payment	3. Hostel Fees Structure	5. Course Discontinuation Bond Format
2. Stipend	4. Document Checklist	
For more information visit www.santosh.ac.in		

1. GENERAL/MANAGEMENT CATEGORY

Sr. No.	PG Courses 2026-27	Course Fee		EPAs, Credentialing & Global Competency Certification
		General/Management Category-(INR)	NRI Category- (USD)	
		Annual Mode		Annual Mode
1.	MD- Anaesthesiology	23,00,000		2,00,000
2.	MD- Dermatology	68,00,000	$ 1,00,000	2,00,000
3.	MD- General Medicine	50,00,000	$ 1,00,000	2,00,000
4.	MD- Paediatrics	48,00,000	$ 1,00,000	2,00,000
5.	MD- Psychiatry	28,00,000	$ 1,00,000	2,00,000
6.	MD- Respiratory Medicine	42,00,000	$ 1,00,000	2,00,000
7.	MS- ENT	28,00,000		2,00,000
8.	MS- General Surgery	38,00,000	$ 1,00,000	2,00,000
9.	MS- Obstetrics & Gynaecology*	50,00,000	$ 1,00,000	2,00,000
10.	MS- Ophthalmology	30,00,000	$ 1,00,000	2,00,000
11.	MS- Orthopaedics	39,00,000	$ 1,00,000	2,00,000
12.	MD- Emergency Medicine	30,00,000		2,00,000
13.	MD- Radio-Diagnosis*	76,00,000	$ 1,00,000	2,00,000
14.	MD- Immuno-Haematology & Blood Transfusion	9,50,000		50,000
15.	MD- Anatomy	1,50,000		
16.	MD- Biochemistry	1,50,000		
17.	MD- Community Medicine	1,50,000		
18.	MD- Microbiology	1,50,000		
19.	MD- Pathology	11,00,000		
20.	MD- Pharmacology	1,50,000		
21.	MD- Physiology	1,50,000		
22.	Diploma in Public Health**	1,50,000		

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Note-

a. A one time fee of Rs. 45,000 towards Registration fee (Rs. 20,000 /-), SIS Process Automation (Rs. 5,000 /-) and E-Portfolio (Rs. 20,000 /-) will be charged across all specialties.

b. Annual fee of Rs. 20,000/- towards Academic Training Programs including Simulation Lab Charges will be charged (only for clinical branches).

c. (* | **) Candidates are advised to communicate with the college/institute for admission for the total amount /fees to be paid at the time of admission. This may vary according to the subject/speciality opted.

Disclaimer Note- Fees may be revised as per guidelines issued by the Statutory Body.

MODE OF PAYMENT: ANNUAL

Via: RTGS/ NEFT/ IMPS/ Demand Draft (DD)

2. STIPEND

All the students are eligible for a monthly stipend as below

Year	Year 1	Year 2	Year 3
Amount (INR)	**56,010 per month**	**56,010 per month**	**56,010 per month**
3 years for MD/MS programs			

3. HOSTEL FEE STRUCTURE Student Hostel Fee Structure (Annual) including mess

Type of Accommodation	(INR)
Single Accomodation (AC)	2,00,000

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4. DOCUMENTS CHECKLIST FOR CANDIDATES

No.	Document Name
1.	DGHS Allotment Letter
2.	NEET 2026 Hall Ticket / Admit Card issued by NBE
3.	NEET 2026 Result / Rank Letter issued by NBE
4.	MBBS Marks Sheet (1st , 2nd & 3rd Professional Examinations)
5.	MBBS Degree Certificate / Provisional Degree Certificate
6.	Migration Certificate
7.	MBBS Internship Completion Certificate (Date of completion should be on or before 15th August 2026)
8.	Post Graduate Diploma Certificate (if any)
9.	Permanent MBBS Registration Certificates from Any State Medical Council / Medical Council of India
10.	Conduct / Character certificate from Head of Medical College from where you have graduated
11.	10th Marksheet and Passing Certificate
12.	12th Marksheet and Passing Certificate
13.	Pan Card Copy (Parent & Candidate)
14.	Aadhaar Card Copy (Candidate)
15.	1 set of self-attested Photocopies of all of the above documents
16.	8 recent Identical Passport sized coloured photographs
17.	Post Dated Cheques for whole course fees to be submitted at the time of admission
18.	Rs. 200/- Stamp Paper for Course Discontinuation Bond

The allotted candidates must report to Admissions Venue latest by 5 PM, on or before the last date mentioned in the DGHS allotment letter, along with the above documents and fee paid details.

Venue details is Admission Cell, 4th Floor, Santosh Deemed to be University, No. 1, Santosh Nagar, Gate No. 3, Pratap Vihar, Ghaziabad (Delhi NCR)-201009 For more details visit www.santosh.ac.in

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5. COURSE DISCOUNTIUNATION BOND FORMAT

COURSE DISCONTINUATION BOND

(Undertaking / Bond for UG and PG Medical and Dental Seats)
(To be submitted on a Rs. 200 stamp paper purchased in Uttar Pradesh)

I, Dr / Mr / Ms . _____(Name of the Candidate), aged about_____ Years, So / Do of_____(Name of the Parents), resident of_____(permanent/present address of Parent) do hereby swear on oath as follows:

I, have been selected to the 1st year_____ [MBBS/BDS/MD/MS/MDS Course] at Santosh Medical College & Hospital / Santosh Dental College & Hospital, Ghaziabad, Delhi NCR, a constituent unit of Santosh Deemed to be University, Ghaziabad, Delhi NCR through Common Counselling conducted by the Directorate General of Health Services (DGHS), Government of India through NEET Rank No. _____ (All India Rank).

I, say that I am taking admission to the _____[MBBS/BDS/MD/MS/MDS Course] at Santosh Medical College & Hospital / Santosh Dental College & Hospital, Ghaziabad, Delhi NCR as per the DGHS allotment letter dated _____having NEET Roll No._____strictly as per my own will and that of my parents and without any pressure, threat or coercion from anyone.

I, say that in consideration of admission to 1st year _____, [MBBS/BDS/MD/MS/MDS] Course, I shall complete the _____ [MBBS/BDS/MD/MS/ MDS] Course and accordingly undertake to pay all the tuition and other fees as prescribed by Santosh Deemed to be University, Ghaziabad, Delhi NCR. In the event of my discontinuation of (MBBS/BDS/MD/MS/MDS) course due to any reason at any point of time, I along with my parent / guardian hereby undertake to pay the full tuition and allied fees for the entire duration of the course as prescribed by the University at the time of admission, without any protest or demur. I also understand that the original documents submitted to the Institute at the time of admission shall be returned only after settlement of all dues.

I have read and understood the contents of this bond. What is stated above is true and correct. I along with my parent/guardian do hereby undertake to act accordingly.

This, the day of _____20___ at Ghaziabad, Uttar Pradesh state.

Signature of the Candidate

Name:_____
Mobile No.:_____
Email ID:_____

Signature of the Parent / Guardian

Name:_____
Mobile No.:_____
Email ID:_____

(1) Witness Signature

Name:_____
Mobile No.:_____
Email ID:_____

(2) Witness Signature

Name:_____
Mobile No.:_____
Email ID:_____