

NORTH BENGAL DENTAL COLLEGE AND HOSPITAL

Sushrutanagar, Darjeeling – 734012

YEAR GAP CERTIFICATE

FOR ADMISSION TO BDS COURSE THROUGH NEET-UG

TO WHOMSOEVER IT MAY CONCERN

I, _____, son/daughter of
_____, residing at

_____, do hereby
solemnly declare and certify that I have passed my Class XII / Higher Secondary / equivalent qualifying
examination in the year _____ from _____.

Thereafter, I had a gap of _____ year(s) from _____ to _____, during which I was:

☐ Not admitted/enrolled in any educational institution

OR

☐ Admitted/enrolled in an educational institution, as detailed below:

Particulars	Details
Name of Institution/College	
Course/Programme	
Academic Session	
Date of Admission	
Date of Discontinuation/Withdrawal	
Reason for Discontinuation/Withdrawal	
Whether any examination was appeared for	
Whether the course was completed	Yes / No

I further declare that, during the above-mentioned period, I was primarily engaged in preparation for NEET-UG /
other competitive examinations / personal reasons / other: _____.

I certify that all the details regarding my educational admission/enrolment during the gap period have been fully
disclosed above and that there is no concealment of any previous admission or academic engagement.

I further declare that:

1. The information furnished in this certificate is true and correct to the best of my knowledge and belief.
2. I have disclosed all educational institutions in which I was admitted/enrolled during the stated gap period.
3. I have not concealed any material fact regarding my previous admission, enrolment, discontinuation, or withdrawal.
4. I further declare that during the aforesaid gap period, I was not involved in, associated with, or convicted of any criminal activity or offence, and no criminal case/proceeding was pending against me during the said period, to the best of my knowledge and belief.
5. I am submitting this Gap Certificate specifically for the purpose of admission to the BDS course at North Bengal Dental College and Hospital, Sushrutanagar, Darjeeling – 734012, through NEET-UG.
6. I understand that if any information furnished herein is found to be false, incomplete, or misleading, the College / University / competent authority may take appropriate action as per the applicable rules.

This certificate is issued specifically for submission to North Bengal Dental College and Hospital, Sushrutanagar, Darjeeling – 734012, for the purpose of admission to the BDS course.

Place:		Date:	/ /
Signature of Student:			

Name of Student:	_____
NEET Application/Registration No.:	_____
NEET Roll No.:	_____
Mobile No.:	_____

PARENT/GUARDIAN DECLARATION

I, _____, parent/guardian of the above-named student, hereby confirm the facts stated in this Gap Certificate and declare that the information furnished regarding the student's educational history and any admission/enrolment during the gap period is true and correct to the best of my knowledge.

Name of Parent/Guardian:	
Relationship:	
Signature:	
Mobile No.:	

ATTESTATION

Notary Public / First Class Magistrate / Competent Authority	
Signature & Seal:	
Date: / /	Place: