

DR. BOROOAH CANCER INSTITUTE

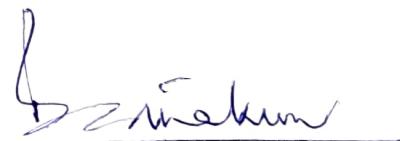
A Grant-In-Aid Institute of Department of Atomic Energy, Govt. of India
And A Unit of Tata Memorial Centre (Mumbai)
Gopinath Nagar, Guwahati-781016
Assam, India

No. BBCI-TMC/Aca/Pt-III/ 2783/ 2023

Date: 13/09/2023

EXTENSION NOTICE

The last date for submission of applications for **Two Year Post Graduate Diploma Programme in Radiotherapy Technology** affiliated to Gauhati University conducted at Dr. B. Borooah Cancer Institute has been extended till **27/09/2023 (Wednesday)**. The applicant may submit their application along with self-attested copies of necessary documents and payment receipt by **post/courier or physically to the Office of the Deputy Director (Academics), Dr. B Borooah Cancer Institute, OPD Building, 2nd Floor, BBCI Library, A. K Azad Road, Gopinath Nagar, Dist- Kamrup (Metro), Guwahati-781016**. The date of Publication of merit list of candidates and Date of Counseling and admission will be published in the BBCI Website. Please visit the website of Dr. B Borooah Cancer Institute at **<http://www.bbcionline.org/admission-notice.php>** for more information.



Director
Dr. B Borooah Cancer Institute
Guwahati-16



DR. BHUBANESWAR BOROORAH CANCER INSTITUTE
TATA MEMORIAL CENTRE
A GRANT-IN-AID INSTITUTE OF DEPARTMENT OF ATOMIC ENERGY, GOVT. OF INDIA
GOPINATH NAGAR, GUWAHATI- 781016
ASSAM, INDIA

No. BBCI-TMC/Aca-Pt-III/ 2726 /2023

Date: 16/8/2023

ADMISSION NOTIFICATION

Applications are invited from Indian Citizens for the following PG Diploma paramedical course at Dr. B Borooah Cancer Institute, Guwahati-16

Sl. No.	Course	Seats	Eligibility	Affiliated to	Admission Fee
1	Two Year Post Graduate Diploma Programme in Radiotherapy Technology	10	B. Sc with Physics Major with minimum 50% marks	Gauhati University, Guwahati	Rs. 12000/- (Admission Fee) + Rs. 1200/- Per Month Tution Fee

- Candidate will be shortlisted as per the marks obtained in Graduation.
- Students have to be in the age limit of 17-25 years. Upper age is relaxable by 3 years for OBC/ MOBC, SC, ST (P) and ST(H) candidates. Age relaxation is applicable for the DIBYANG candidates as per existing norms of the Government of Assam.
- Please visit www.bbcionline.org → Bulletin → Admission for full details. Form available for download and guidelines to fill up same available on website.
- Seats will be distributed as per category.
- **Since number of seats is very less, the reservation will be in rotation in the following years.**
- **If no candidates from reserved categories are found eligible, the seats will be open to general category.**
- **Reservation of seats for the session 2023-2024 will be as follows-**

	SC	ST(P)	ST (H)	OBC	EWS	PwD	UR
Two Year PG Diploma Programme in Radiotherapy Technology (10 seats)	1	1	1	1	1	1	4

PTO:-



DR. BHUBANESWAR BOROOAH CANCER INSTITUTE
A GRANT-IN-AID INSTITUTE OF DEPARTMENT OF ATOMIC ENERGY, GOVT. OF INDIA
AND A UNIT OF TATA MEMORIAL CENTRE (MUMBAI)
GOPINATH NAGAR, GUWAHATI- 781016
ASSAM, INDIA

IMPORTANT DATES:

- Date of issue of forms (Online): From **16.08.2023 (Wednesday)**
- Last date of submission of duly filled in Application Form: **(31.08.2023) (Thursday)**
- Date of Publication of merit list candidates : **11.09.2023 (Monday)**
(Notice Board/ BBCI Website)
- Counseling and admission: **15.09.2023 (Friday)**
- 2nd Round Counseling and admission if necessary: **will be informed**
- Commencement of classes: **will be informed**

Interested candidates may submit duly filled form physically or by post/courier with self-attested required documents to the Office of the Deputy Director (Academics), Dr. B Borooah Cancer Institute, OPD Building, 2nd Floor, BBCI Library, A. K Azad Road, Gopinath Nagar, Dist-Kamrup (Metro), Guwahati-781016. Please visit www.bbcionline.org → Bulletin → admission, to download form, guidelines to fill form and checklist.

The institute is not responsible for the forms not received within the stipulated time. Late submission/ incomplete applications will be rejected and **no** correspondence will be entertained in this regard.

No separate call letter will be issued to the applicants in this regard. **No TA/DA** will be paid for appearing in the Counseling and admission. Candidates from the North Eastern States will be given preference.

Dy. Director (Academics)
Dr. B Borooah Cancer Institute
Guwahati-16

GUIDELINES FOR FILLING FORM

1. Candidates are to download 'APPLICATION FORM' from BBCI website www.bbcionline.org.
2. Duly filled form may submit to the **Office of the Deputy Director (Academics), Dr. B. Borooah Cancer Institute, OPD Building, 2nd Floor (Library), A. K. Azad Road, Gopinath Nagar, Dist - Kamrup (M), Guwahati - 781016, Assam, India.**
3. Candidate must superscribe in the envelope as "Application for the PG Paramedical Course at Dr. B. Borooah Cancer Institute".
4. The Institute is not responsible for forms not received within the stipulated time. Late receipt of forms will be automatically not considered.
5. Please fill the form in BLOCK LETTER LEGIBILITY IN BLUE/BLACK BALLPOINT PEN
6. Affix recent colour photograph in space provided, don't staple.
7. A fee of Rs. 500/- is to be paid online.
8. Fee has to be paid online, details are provided in the form. Transaction number should be mentioned in the space provided.
9. Candidate will be shortlisted on the basis of BSc Marks.
10. Counseling will immediately be followed by verification of original documents and admission.
11. No refund of fees possible after admission taken.

Correspondence

O/o The Deputy Director (Academics)

Dr. B. Borooah Cancer Institute

OPD Building 2nd Floor (Library)

A. K. Azad Road, Gopinath Nagar

Dist - Kamrup (M), Guwahati-781016

Assam, India



Application Form No. : _____

Dr Bhubaneswar Borooah Cancer Institute

A Grant-in-Aid Institute of Dept. of Atomic Energy, Govt. of India
and a Unit of Tata Memorial Centre (Mumbai)
Guwahati-781016, Assam, India

Application Form for Admission into the PG Paramedical Courses:

A. Two Year Post Graduate Diploma Programme in Radiotherapy Technology

1. Marks obtained in BSc./ BSc. (Physics)

Total Marks : _____ Percentage : _____

Alfix your recent
passport size photograph
here with your
signature across

2. a) Title Preferred (Tick and one in the appropriate box)

Mr. Mrs. Ms.

b) First Name (Block Letters)

c) Middle Name (Block Letters)

d) Last Name (Block Letters)

3. Date of Birth : Sex : Male Female
(DD/MM/YYYY)

4. Permanent Address : _____ Nationality : _____

Father/Guardian's Name : _____

Village/TownArea : _____ P.O. _____

District _____ P.S. _____

Pin _____, State _____, Phone No. _____

5. Present Address : Father/Guardian's Name : _____

Village/TownArea : _____ P.O. _____

District _____ P.S. _____

Pin _____, State _____, Mobile No. _____

Phone No. _____, e-mail : _____

6. Academic Qualification

Name of Examination	Subject	University	College	Year	Division / Class	% Marks	Agg. Marks in Gen. Course
BSc.							

7.

Category			
<input type="checkbox"/> General	<input type="checkbox"/> OBC / MOBC	<input type="checkbox"/> SC	<input type="checkbox"/> ST/P
<input type="checkbox"/> ST/H	<input type="checkbox"/> EWS	<input type="checkbox"/> PWD	<input type="checkbox"/> Employee quota*

* Only the children of BBCI regular staff can apply.

8. BANK DETAILS FOR PAYMENT :

A/c No. **18380100000551**

Type of Account - Savings Account
Name - M/S DR. BBCI TEACHING & TRAINING

Branch - Gopinath Nagar

IFS Code - **IOBA 0001838**

Transaction Number : _____

Amount Paid : _____

Rupees in word : _____

11. CHECKLIST OF DOCUMENTS ATTACHED

- a) FILLED APPLICATION FORM
- b) PASSPORT SIZE PHOTO
- c) ADDRESS PROOF
- d) AGE VERIFICATION CERTIFICATE
- e) MARK-SHEET OF QUALIFYING EXAM
- f) PROOF OF PAYMENT
- g) CERTIFICATE IN SUPPORT OF QUOTA APPLIED FOR.

12. Declaration by Applicant :

I declare that the information given above is correct and complete to the best of my knowledge. If any of the above information is found to be incorrect, my admission will be liable to be cancelled and I shall be liable to disciplinary action as may be decided upon the Institute.

Signature of the Applicant

Date : _____

Signature of the Parent/ Guardian

Date : _____