

თას <mark>დ</mark>ბ3000 ტ30ლდებნეს სბმედეცენტ უნევერსეტეტე DAVID TVILDIANI MEDICAL UNIVERSITY LTD

No. 01-1155

18 05 2023

ADMISSION LETTER

The authorities of the University confirm eligibility of BABU HRIDYA MERINE, citizen of India, date of birth, 22/11/2003, Passport #W1776029 for admission to the basic course of MD (equivalent to MBBS) program of the Faculty of Medicine at the AlETI Medical School, DAVID TVILDIANI MEDICAL UNIVERSITY (Rustavi Campus) for qualification of General Physician with a total duration of 6 years (360 credits) from Fall semester 2023. Admission procedure shall commence after the tuition fee for 2022-2023 academic year is transferred to the bank account indicated hereinafter. Tuition fee for the first academic year in basic course of MD program is \$ 6000 (six thousand) USD. For every consecutive year, the fee shall remain 8000 (eight thousand) USD

Conditions for refund of tuition fee:

If the applicant is denied a study permission by the Ministry of Education and Science of Georgia

Applicant, having properly filed an application,* was denied a visa from the Consulate of Georgia

Applicant is denied entry into the country by Georgian border police

In any of the aforementioned cases the tuition fee is refunded excluding administrative charges in amount of 1000 USD

NOTE: By transferring the fees applicant confirms, that He/She has read and agrees to the terms and conditions described above.

Please note that the students are responsible for abiding by MCI (NEET) regulations and the university will not be liable for any violation thereof.

Total amount of \$ 6000 USD should be transferred to the account indicated below:

 $Important: Admission\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ com\underline{mence\ unless\ applicant's\ full\ name\ and\ passport\ number\ is\ indicated\ in\ the\ description\ procedure\ \underline{will\ not\ not\ number\ n$ of the transfer.

For additional inquiries please use the contact details below.

BENEFICIARY'S BANK:

JSC TBC BANK TBILISI, GEORGIA SWIFT: TBCBGE22

BENEFICIARY'S Account: GE04TB1956736180100003

NAME OF BENEFICIARY: DAVID TVILDIANI MEDICAL UNIVERSITY LTD

*To view the list of documents required to apply for the Georgian visa and information on the filing procedure please visit: https://geoconsul.gov.ge/en/visalnformation

Rector,

Levan Tvildiani

0660 do

A:276 Yubjana St, Tbilisi 0159, Georgia / T: +995 322 51-68-98 / F: +995 322 52-71-96 / E: info@dtmu.edu.ge