



ODISHA UNIVERSITY OF HEALTH SCIENCES, BHUBANESWAR

Office: Sishu Bhawan Square, Bapuji Nagar, Bhubaneswar, Pin- 751009
Web Site: www.ouhs.ac.in E-mail: ouhs2022@gmail.com / ouhs@ouhs.ac.in Tel: 0674-2597266

OUHS-AFF-MISC-0177-2025 15287

Date 29/11/2025

NOTICE

This is for information of all Colleges imparting education in Health Sciences and Allied Courses under OUHS, Bhubaneswar that the Proposal Book for Affiliation (Form-2 and Form-4) will be available at the sales counter of OUHS, Bhubaneswar from 1st December 2025 to 28th February 2026 on working days in respect of CoA/Affiliation/NOC for the academic session 2026-27. New and old colleges are hereby informed to purchase the above form on payment of ₹10,000/- (Rupees Ten Thousand only) with GST @ 18%, i.e., ₹1800/- (Rupees One Thousand Eight Hundred only) in digital mode in favour of the Registrar, Odisha University of Health Sciences, Bhubaneswar. No bank draft/cash is acceptable.

The purchase and submission of the Proposal Book shall be subject to the conditions stipulated below:

1. The colleges/institutions who have obtained No Objection Certificates (NOCs)/ Letter of Permissions (LOPs) from the respective Regulatory Bodies for the Academic Session 2026–27 on or before 31st January 2026 are required to purchase and submit the duly filled-up form with signature on all pages along with all documents and requisite fees on or before 28th February 2026 without fail.
2. The colleges/institutions receiving their NOCs/LOPs on or after 1st February 2026 shall be allowed 30 (Thirty) days from the date of issue of the NOC/LOP for purchase and submission of the Proposal Book.
3. Non-compliance with the above timelines will attract a penalty of ₹1,000/- (Rupees One Thousand only) per day beyond the stipulated due date.
4. A copy of the checklist along with the formats of affidavit and undertaking is enclosed herewith.

By the orders of the Vice-Chancellor.

D Dayal 29/11/25
Registrar,
OUHS, Bhubaneswar

Memo No: 15288 /AFF

Date: 29/11/2025

Copy forwarded to Comptroller of Finance, OUHS, Bhubaneswar for information and necessary action/ Notice Board for information/ In-charge of IT Matter, OUHS for uploading the same on the website for information of all concerned.

D Nayak
29/11/25

Registrar,
OUHS, Bhubaneswar

Memo No: 15289 /AFF

Date: 29/11/2025

Copy submitted to PS to Vice Chancellor, OUHS for favour kind information of the Hon'ble Vice-Chancellor, OUHS.

D Nayak
29/11/25

Registrar,
OUHS, Bhubaneswar



CHECKLIST FOR CONSENT OF AFFILIATION

SL NO	List of Documents	Letter No and Date	Remarks Submitted/Not Submitted
1	Application Book duly filled in and signed (Principal/Director) on all pages		
2	Copy of Affiliation Certificate or letter from the University for the academic session 2025-26		
3	Affidavit sworn before the Executive Magistrate in the format given		
4	Letter of Permission from the Regulatory Body (PCI/ONMRC/RCI/DMET/NSISM/NCH/ State Govt./NMC/DCI/Ayush Commission etc as per the course) 2026-27		
5	NOC from DMET for the Academic Session 2026-27		
6	Undertaking as prescribed by OUHS		
7	Processing Fees with GST @ 18%		
8	Inspection Fees with GST @ 18%		

Signature with Seal

Before Sri _____

(Executive Magistrate)

Place: _____

AFFIDAVIT

(Format)

(To be submitted in Rs. 100/- Non-Judicial Stamp Paper under Executive Magistrate)

I Sri / Smt _____ S/D of _____

_____ aged about _____

years, presently residing at _____

Po _____ Dist. _____

and have my permanent address at _____

At present (Designation) _____ of School /College/Institution _____

At/Po _____

Dist. _____ imparting (name of course) _____

and state as follows:-

1. That Institutions has valid NOC for the course _____ with intake capacity _____ for the academic session 2026-27.
2. That Institution is a trust / a Society registered under the name _____.
3. That trust has a board with members, (specify names) _____.
4. That Institutions fulfils all the conditions/ norms as per prevailing guidelines of Govt. for the Course.
5. That the Institutions is having all the minimum requisites in respect of faculties, infrastructure, library, laboratory, permission for clinical/practical etc, and maintained at all times so as to run the course as per prevailing guidelines of Govt. and respective Council.

6. That after receipt of the Consent of Affiliation from the OUHS, it will be submitted to the Counselling Authorities in case of any deficiencies found in connection with the norms/guidelines by the inspecting authority at the time of inspection, the institutions will be liable for coercive action as would be deemed proper by the authorities concerned in such eventualities the Consent of Affiliation so issued shall be revoked.
7. Any legal dispute arising thereof, the institute shall bear the cost.

Signature of the deponent/s
SEAL

- That the above contents are true to the best of my knowledge and belief.

UNDERTAKING

I, _____

(Designation and Address) on behalf of the _____

(Institution Name) do here by undertake that I will abide by the provisions contained in the first proviso to sub-section (1) of Section 34 of the Odisha University of Health Sciences Act, 2021 (Odisha Act 22 of 2021) and Statute 47 of the 1st Statute of Odisha University of Health Sciences, 2023 and the terms and conditions as imposed by the Odisha University of Health Sciences, Bhubaneswar from time to time in the event of Consent of Affiliation granted by the said University to us.

(Signature with Seal)

Name: _____

Address: _____

Place: _____

Date: _____

Name of the Institution:
