SESSION- 2023-24			
NIMT Hospital , Greater Noida			
Course Name - Diploma in Operation Theater Technician (OTT)			
The minimum age of admission admission. There is no maximur	shall be 17 years on or before 31st December of the year of mage limit for admission.		
Candidate shall have passed 10+2 with PCB or PCM. Minimum 35% marks aggregate in all subjects in 12th			
Admission Criteria: Through Merit or process announced by UP Govt. / UP State Medical Faculty, Lucknow (For Details kindly visit at https://upsmfac.org/)			
n (in years)	2 Years		
)	NIMT Ho Course Name - Diploma i The minimum age of admission admission. There is no maximur Candidate shall have passed 10 subjects in 12th  eria: Through Merit or process a		

## Check the opted Fee Structure

Standard Fee - Easy EMI - 10 Months
Discounted Fee - Easy EMI - 8 Months
Discounted Fee - Easy EMI - 6 Months
Discounted Fee - Pay in Full

Fee
Exclusions
(शुल्क बहिष्करण)

UPSMF Theory Exam/Migration/Degree/ Certificate/ Marksheet/UPSMF registration chareges are separate and payable directly to UPSMF as per their schedule/ Notices. Book Bank

Stand	lard Fee - Easy EMI - 10 N	Months	Di	scounted Fee	e - Easy EMI - 8 N	Months
FEE CODE		DOT-10-JG	FEE CODE			DOT-8-JG
COURSE YEAR	TUITION FEE (₹)	FEE INSTALLMENT	COURSE YEAR	TUITION FEE (₹)	WAIVER (On Standard Fee)	FEE INSTALLMENT
1ST YEAR	₹53225	₹3726X10	1ST YEAR	₹52625	₹600	₹4605X8
2ND YEAR	₹54822	₹5482X10	2ND YEAR	₹54204	₹618	₹6775X8
EEE DAVAD	LE AT TIME OF ADMISSION	₹15968	ECCE DA	VADI E AT TIME	OF ADMISSION	₹15788

Di	scounted Fe	e - Easy EMI - 6 I	Months		Discounte	ed Fee - Pay In F	ull
FEE CODE			DOT-6-JG	FEE CODE			DOT-1-D
COURSE YEAR	TUITION FEE (₹)	WAIVER (On Standard Fee)	FEE INSTALLMENT	COURSE YEAR	TUITION FEE (₹)	WAIVER (On Standard Fee)	FEE INSTALLMENT
1ST YEAR	₹52000	₹1225	₹6067X6	1ST YEAR	₹50000	₹3225	₹X
2ND YEAR	₹53560	₹1262	₹8927X6	2ND YEAR	₹51500	₹3322	₹X1

Fee Schedule

## Last Date to Pay All Fee for 2nd Year

10th Janaury 2025

Please note that any payment after last	dates will incur fine at 1	00 Rupees Per Day.

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Name of Counsellor:	Signature of Counsellor:			
Date of Admission:				