

**PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT  
BOND FOR UG MBBS/BDS ADMISSION FOR THE ACADEMIC YEAR 2022-23**

I, \_\_\_\_\_ (NAME OF THE CANDIDATE) S/O: D/O:  
\_\_\_\_\_ (NAME OF THE PARENT) SELECTED FOR MBBS/BDS COURSE DO  
HEREBY UNDERTAKE TO COMPLETE THE COURSE AS PER THE REQUIREMENTS OF KNR UNIVERSITY OF  
HEALTH SCIENCES, TELANGANA, WARANGAL. IN THE EVENT OF MY DISCONTINUING THE STUDIES AFTER  
JOINING THE COURSE OR AFTER THE DATE ANNOUNCEMENT OF SECOND PHASE OF ADMISSIONS, I  
UNDERTAKE TO PAY KNR UNIVERSITY OF HEALTH SCIENCES, A SUM OF RS. 20,00,000/- ( RUPEES TWENTY  
LAKHS ONLY) AND I AM AWARE THAT I WILL BE DEBARRED FOR THREE YEARS FOR ADMISSION INTO  
MBBS/BDS COURSE IN THE STATE OF TELANGANA BESIDES PAYMENT OF RS. 20,00,000/- ( RUPEES TWENTY  
LAKHS ONLY) TOWARDS FORFEITURE OF THE BOND IN ACCORDANCE TO THE G.O.MS. NO. 125,126 AND  
127, HM&FW DEPT. DATED: 22.09.2022.

**Signature of the Candidate**

I, \_\_\_\_\_ (NAME OF THE PARENT), PARENT OF  
MR./MS. \_\_\_\_\_ (NAME OF THE CANDIDATE), DO HEREBY  
UNDERTAKE TO PAY KNR UNIVERSITY OF HEALTH SCIENCES, A SUM OF RS. 20,00,000/- (RUPEES TWENTY  
LAKHS ONLY ) IN CASE OF DISCONTINUATION OF MBBS/BDS COURSE AFTER JOINING OR AFTER THE  
DATE OF ANNOUNCEMENT OF SECOND PHASE OF ADMISSIONS BY MY SON/DAUGHTER AND I AM  
AWARE THAT MY SON/DAUGHTER WILL BE DEBARRED FOR THREE YEARS FOR ADMISSION INTO  
MBBS/BDS COURSE IN THE STATE OF TELANGANA BESIDES PAYMENT OF \_\_\_\_\_ RS. 20,00,000/-  
(RUPEES TWENTY LAKHS ONLY ) TOWARDS FORFEITURE OF THE BOND IN ACCORDANCE TO THE  
G.O.MS. NO. 125,126 AND 127, HM&FW DEPT. DATED: 22.09.2022.

DATE:

**SIGNATURE OF THE PARENT**

WITENESS

1. SIGNATURE:  
NAME AND ADDRESS IN FULL.

2. SIGNATURE:  
NAME AND ADDRESS IN FULL.

NOTARY

**PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT (ON NON-JUDICIAL  
STAMP PAPERS OF RS. 100/-**

**UNDERTAKING**

I, \_\_\_\_\_ (Candidate name) S/o / D/o \_\_\_\_\_ bearing UG NEET  
2022 Rank No \_\_\_\_\_

and

I, \_\_\_\_\_ (Parent name) F/o \_\_\_\_\_, bearing UG NEET 2022 Rank No  
\_\_\_\_\_ hereby give an undertaking as below, in connection with our claim with regard  
to certificates submitted for admission into UG Medical and Dental Courses for the Academic  
Year 2022-23 in Colleges affiliated to KNR University of Health Sciences. We, hereby declare  
that all our certificates are genuine.

I am aware that if the submitted relevant certificate (s) is / are found to be not genuine at a  
later date, my admission is liable to be cancelled and I am liable for criminal prosecution, as  
may be legally deemed fit. Further I agree that I abide by the Rules and Regulations of KNR  
University of Health Sciences.

I also hereby undertake that I shall not enter into legal litigation, if the seat allotted to me is  
cancelled, for the above reasons.

**Signature of the Parent / Guardian**

**Signature of the Candidate**

Aadhar No.

Address :

Date:

Place:

NOTARY

**(NON-JUDICIAL STAMPED PAPER FOR RS.100/-)  
SURETY - CUM - AGREEMENT BOND**

I, \_\_\_\_\_ (Candidate name) S/o / D/o \_\_\_\_\_  
bearing UG NEET 2022 Rank No \_\_\_\_\_

and

I, \_\_\_\_\_ (Parent name) F/o \_\_\_\_\_

(Candidate name), bearing UG NEET 2022 Rank No \_\_\_\_\_ admitted under  
Competent Quota (A-Cat / Management Quota (B-Cat / NRI) hereby give an  
undertaking as below.

I, hereby undertake to complete the said course as per the requirements of the KNR  
University of Health Sciences, Warangal and as per the norms of the management of  
Chalmeda Anand Rao Institute of Medical Sciences, Bommakal Village, Karimnagar  
(Mandal & District). In the event of my leaving the studies in the mid-term, I undertake  
to pay to the Chalmeda Anand Rao Institute of Medical Sciences, Karimnagar for the  
remaining period Tuition fee.

Signature of the Parent

Signature of the Candidate

Date:

Witness:

1. Signature : Name & Address

NOTARY