



ANNEXURE - III

**KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES,
TELANGANA:: WARANGAL
MBBS/BDS ADMISSIONS 2022-23**

PROFORMA FOR BOND MBBS/BDS (ON NON-JUDICIAL STAMP PAPER FOR Rs.100/-)

I, Mr/Ms. _____ S/o,D/o _____
selected for MBBS/BDS Course for 2022-23 do hereby undertake to complete the course as per the regulations of Kaloji Narayana Rao University of Health Sciences and in the event of my discontinuing the studies after joining the course after the last date for free exit for admissions of CQ/MQ as notified by University . I undertake to pay the university 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, Mr/Mrs. _____ parent of
Mr/Ms. _____ hereby undertake to pay Kaloji Narayana University of Health Sciences, a sum of Rs. 20,00,000 (Rupees Twenty Lakhs only) in case of discontinuation of MBBS Course after joining or after the date of announcement of second phase of admissions by Son/Daughter and I am aware that my son/daughter will be dibarred 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.

WHEREAS for the better protection of the Government, the Party of the FIRST PART has agreed to execute the bond with 2 Witeness who are Government Gazetted Officers/ Income Tax assesses to stand guarantee for the above said amount.

Date (DD/MM/YYYY):

Signature of Parent

Witeness

1. Signature:

Name and Address in full.

2. Signature:

Name and Address in full.