

ANNEXURE -II

**(Non-Judicial Stamped paper for
Rs.100/-)**

(FOR ALL CANDIDATES)

I, Dr S/o , D/oSelected for PostGraduate Degree/Diploma for the year 2024-25 do here by undertake to complete the saidcourse as per the regulations of the university and Government rules for admissions . In theevent of my leaving the studies after joining the course, I undertake to pay to KNR University of Health Sciences a sum of Rs. 50,00,000/- (Rupees fifty lakhs only) and refund the amount received as stipend up to that date to Government of Telangana.

Date :

Witness:

1. Signature:

Name and address in full

Mobile. N

Mail. Id:

2. Signature

Name and address in full

Mobile. No

Mail. Id:

Signature of the Candidate

Name and address in full

Mobile. No.

Mail. Id:

Signature of parent

Name and address in full

Mobile. No

Mail. Id: