KNRUHS GENUINITY BOND

PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT
(ON NON-JUDICIAL STAMP PAPERS WITH NOTARY)

I, _____ (candidate name), S/o / D/o _____, bearing UG NEET 2026 Roll No _____, UG NEET 2026 Rank _____

And

I, _____ (parent/guardian name), F/o _____, bearing UG NEET 2026 Roll No _____, UG NEET 2026 Rank _____

Hereby give an undertaking as below, in connection with our claim with regard to certificates submitted for admission into MBBS/BDS courses for the Academic Year 2026-27 in _____ (college name), affiliated to Kaloji Narayana Rao University of Health Sciences. We, hereby declare that all our certificates are genuine.

Iam 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 Kaloji Narayana Rao 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**

Aadhaar No.
Address:

Date: **Place:**

KNRUHS DISCONTINUATION BOND

PROFORMA FOR UNDERTAIKNG IN THE FORM OF AFFIDAVIT (ON NON-JUDICIAL STAMP PAPERS WITH NOTARY)

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 requirement of KNR University of Health Sciences. Telangana, Warangal in the event of my discontinuing the studies after joining the course or after the date of announcement of second phase of admissions. I under take 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.0.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 here by undertake to pay KNR University of Health Sciences, a sum of Rs 20,00,000.00/- (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 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

Signature of the Parent

Witnesses: 1)

2)

DATE: PLACE:

KNRUHS ANTI-DRUG UNDERTAKING

PROFORMA FOR ANTI-DRUG UNDERTAKING / DECLARATION IN THE FORM OF AFFIDAVIT (ON NON-JUDICIAL STAMP PAPERS WITH NOTARY)

We, the undersigned, hereby solemnly affirm and undertake the following:

1. The student shall not consume, possess, procure, manufacture, transport, distribute, sell, purchase, promote or engage in any activity relating to narcotic drugs, psychotropic substances or any other prohibited intoxicating substances during the period of study in the College/University.
2. The student shall abide by the provisions of the Narcotic Drugs and Psychotropic Substances Act, 1985, the Rules made thereunder, the Regulations of Kaloji Narayana Rao University of Health Sciences, Government Orders, and all instructions issued by the University/College from time to time.
3. The parent/guardian undertakes to monitor the conduct and activities of the student and extend full cooperation to the College and the University in maintaining a drug-free campus and preventing drug-related activities.
4. We understand that any involvement of the student in drug-related activities shall be treated as a serious act of misconduct and may result in disciplinary action, including suspension, cancellation of admission, expulsion from the institution, withholding of certificates, and/or initiation of legal proceedings under the applicable laws, without prejudice to any other action that may be taken by the competent authorities.
5. We further declare that the information furnished herein is true and correct to the best of our knowledge and belief, and we agree to abide by this undertaking throughout the period of study.

Name of the Student:
NEET Roll No:
Course:
College:
Academic Year:

Name of Parent / Guardian:
Relationship with Student:
Address:
Mobile No.:

Signature of the Student

Signature of the Parent / Guardian

Place:

Date:

KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES, TELANGANA: WARANGAL
MBBS/BDS ADMISSIONS 2026-27 UNDER MANAGEMENT QUOTA

DECLARATION BY CANDIDATE/PARENT ON NON-JUDICIAL STAMP PAPER FOR Rs.100/-

I, Mr./Ms. _____S/o/D /o: _____ selected for MBBS/BDS Course for the year 2026-27 under Management Quota declare that I am not admitted in any other Medical College in the country as on today. I am not a part of any seat blocking procedure. I will not discontinue the course without valid seal allotment at a later date in other college. In case of any discrepancy, I am liable for legal action by KNR University of Health Sciences and Government and cancellation of seat.

Signature of the Candidate

We, Mr./Mrs. _____parent of Mr./Ms._____Selected for MBBS/BDS Course for the year 2026-27 under Management Quota declare that my son/daughter is not admitted in any other Medical College in the Country as on today. My son/daughter is not a part of any seat blocking procedure. Candidate will not discontinue the course without valid seat allotment at a later date in other college. In case of any discrepancy, we are liable for legal action by KNR University of Health Sciences ang Government and cancellation of seat.

Date: **Signature of Parent**

Witness

1. Signature:
Name and address in full.

2. Signature:

Name and address in full.

NOTARY

NRI DECLARATION

(This declaration is to be given by a student/parent/Blood Relative (family member) who is seeking admission under NRI category (Management quota of NRI)

I, Mr/Ms. _____, NEET UG 2026 Roll No _____ NEET UG 2026 Rank _____ , Son/daughter of Mr/Ms. _____ seeking admission into MBBS/BDS course in Management Quota (NRI quota seats) for the academic year 2026-27 into Medical/Dental Colleges of Telangana Private Non- Minority/ Minority Medical & Dental Colleges do hereby declare and state as under:

I declare that I am Son/ Daughter/ Niece/ Nephew/ Brother/ Sister of Mr/Ms. _____, S/o. _____, R/o. _____
(here incorporate the complete address of NRI to whom the candidate is related).

I declare that the said family member NRI is paying my fee for my UG course and I further declare that the above facts stated are true and correct and I am liable for any action in the event of concealment of facts. Hence, this declaration.

(Signature of the Candidate)

I, _____, S/o. _____ here declare and confirm that the above candidate viz., Mr/Ms _____ is related to me as **Son/Daughter/Niece/Nephew/Brother/Sister** and I hereby irrevocably agree and undertake to provide finance support to him/her by payment of entire fees and other expenses for pursuing MBBS/BDS course in the Medical/Dental Colleges of Telangana State under KNRUHS.

Date: (Signature of the NRI)