

### **DECLARATION OF THE STUDENT AND PARENT / GUARDIAN**

I hereby solemnly and sincerely affirm that the statement made and information furnished by me in the application form and also in all the enclosures there to, are true and correct. I have neither withheld any information nor furnished fraudulent information. Should it however be found that any information furnished therein is fraudulent, incorrect or untrue in material particulars at any time during the pursuit of the course, I realize my selection or admission to the course is liable to be cancelled and I am liable for criminal prosecution. Further I also agree to forego my seat and fees paid thereof to Bhaskar Medical College, Yenkapally (V), Moinabad (M), R.R. Dist., A.P, unconditionally and I will not move any court of law in this connection.

I have read MBBS course brief regulations of MCI / Dr.NTR University of Health Sciences. I am aware that I may not be permitted to appear for any University Examinations unless I have 75% attendance in theory and practical/Clinics separately, and score minimum 35% marks in Internal Assessment Examination in concerned subjects in fulfillment of regulations laid down by Medical Council of India and Dr.NTR University of Health Sciences.

I shall abide by the decision of the selection Committee / Principal, Bhaskar Medical College, Yenkapally (V), Moinabad (M), R.R. Dist., A.P, which shall be final and binding on me.

Date:

SIGNATURE OF THE APPLICANT

I have fully read the information furnished by my son / daughter / ward and affirm that it is true and if it is proved that the information was fraudulent, I am liable for criminal prosecution and also forfeit the seat allotted to my ward and fees paid there of and abide by other conditions as specified above.

OFFICIAL ADDRESS : .....  
.....  
.....

RESIDENTIAL ADDRESS : .....  
.....  
.....

Date :

SIGNATURE OF THE PARENT / GUARDIAN

### **DISCIPLINARY DECLARATION**

I \_\_\_\_\_  
S/o / D/o. \_\_\_\_\_ resident of  
\_\_\_\_\_ provisionally selected for Admission into I MBBS,  
during the academic year \_\_\_\_\_ at Bhaskar Medical College, Yenkapally (V), Moinabad  
(M), R.R. Dist., A.P, do hereby solemnly affirm and state that I undertake to abide by all rules and  
regulations of Bhaskar Medical College, Yenkapally (V), Moinabad (M), R.R. Dist., A.P that are already  
in Vogue and that may come into force from time to time.

I further undertake to make good any loss sustained Bhaskar Medical College, Yenkapally (V),  
Moinabad (M), R.R. Dist., A.P due to my negligence.

I am aware that any involvement in any manner in the acts that break or contravene the rules &  
regulations of Bhaskar Medical College, Yenkapally (V), Moinabad (M), R.R. Dist., A.P attract punishment  
/ disciplinary action.

I further agree that any disputes between the Management / Administration and students are subject  
to the Jurisdiction of Courts at Ranga Reddy only and the jurisdiction of all other courts are hereby excluded.

Date:

Signature of the Candidate

I, \_\_\_\_\_ Parent /Guardian of  
Mr. / Ms. \_\_\_\_\_ undertake to see that my ward  
Mr. / Ms. \_\_\_\_\_ abides by all the rules &  
regulations of Bhaskar Medical College, Yenkapally (V), Moinabad (M), R.R. Dist., A.P, as per the above  
declaration.

Date:

Signature of the Parent / Guardian  
(Relationship to be mentioned)

## **FORMAT OF UNDERTAKING IN REGARDS FOR THE FEES**

**FROM:**

**1. PARENT/GUARDIAN**

**Name & Address**

**2. STUDENT Name**

**& Address**

**Date:**

**To,**

**The Principal,  
Bhaskar Medical College,  
Yenkapally (V), Moinabad (M),  
R.R. Dist., A.P**

**Sub: Undertaking in regard for the fees to be paid to the college**

Dear Sir,

(1) I, Mr/Ms. \_\_\_\_\_ (Name of the student) residing at \_\_\_\_\_.

(2) We, Mr./Ms. \_\_\_\_\_ (Name of the Parent/Guardian) residing at \_\_\_\_\_ the former having been admitted to the MBBS course at your institute under Convener/Management seat quota (Cat A, Cat B, Cat C) hereby agree, affirm and declare jointly and severally that we shall abide to pay the yearly tuition fees of Rs.60,000/ Rs.2,40,000/ Rs.5,50,000/ for five academic years to the said Institute as specified by the institute and the said fee shall be neither negotiable nor refundable in full or part thereof under any circumstances and that we will not raise the issue of refunding to us the said amount at any time or under any circumstance. We also agree and undertake to pay the prescribed fee for each term if the period of study is prolonged beyond the normal prescribed period of four and a half years of study due to any reason whatsoever. We also understand that if all the dues are not cleared, the student may not be allowed to appear for the university examination.

We further agree and declare that In the event of his / her seat falling vacant due to discontinuation of the course in the middle or any other reason we shall abide to pay the tuition fee and other fees for the remaining years of study as may be due on the date of discontinuation to Bhaskar Medical College, Yenkapally (V), Moinabad (M), R.R. Dist., A.P, in lump sum.

Yours faithfully,

STUDENT

PARENT

Cont...5

**ANNEXURE I**  
**AFFIDAVIT BY THE STUDENT**

I, \_\_\_\_\_ (full name of student with University Roll Number) s/o d/o Mr./Mrs./Ms. \_\_\_\_\_, having been admitted to \_\_\_\_\_ (name of the institution), have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the “Regulations”) carefully read and fully understood the provisions contained in the said Regulations.

- 2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
  - a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
  - b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
- 6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this \_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_ year.

\_\_\_\_\_  
Signature of deponent

Name:

**ANNEXURE II**  
**AFFIDAVIT BY PARENT/GUARDIAN**

I, Mr./Mrs./Ms. \_\_\_\_\_ (full Name of parent / guardian) father/mother/guardian of, \_\_\_\_\_ (full name of student with University Roll Number), having been admitted to \_\_\_\_\_ (name of the institution), have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the “Regulations”), carefully read and fully understood the provisions contained in the said Regulations.

- 2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
  - a) My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
  - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
- 6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this \_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year.

\_\_\_\_\_  
Signature of deponent  
Name:  
Address:  
Telephone / Mobile No.:

The above declarations duly notarized by me.

Mr./Ms. \_\_\_\_\_ Notary Public.

Place: \_\_\_\_\_

Date: \_\_\_\_\_ Seal/Stamp of Signature of the Notary Public Notary Public

B.G.No.:

Date of Issue:

B.G. Amount : Rs.22,00,000/-

Date of expiry : -----

**IRREVOCABLE BANK GUARANTEE**

We, \_\_\_\_\_ Bank, having its Branch at \_\_\_\_\_  
[hereinafter to be referred as '**BANK**'] do hereby issue this Irrevocable Bank Guarantee at the request,  
upon application and on behalf of Mr./Ms. \_\_\_\_\_, S/o /D/o  
\_\_\_\_\_ [hereinafter to be referred as '**STUDENT**'] in favour -----  
-----, represented by its Principal, ----- campus, -----,  
District, Andhra Pradesh [hereinafter to be referred as '**BENEFICIARY**'].

WHEREAS the above named Student got admitted into MBBS Course for the academic year 2013-14 for the duration of full course in the Beneficiary Institute and paid the 1<sup>st</sup> year fee of Rs.5,50,000/- and is also obligated to pay the balance fee of Rs.22,00,000/- for the remaining period of course.

WHEREAS as per the conditions for admission, the Student is required to furnish an Irrevocable Bank Guarantee to the Beneficiary from any Nationalized Bank to protect the interest of the Beneficiary in the event of any default of the Student in payment of balance fee during the entire course.

Hence in the event of default on the part of the Student in payment of balance fee of Rs.22,00,000/- or any part thereof during the balance course period of MBBS, the Bank on behalf of the Student hereby irrevocably, unequivocally and unconditionally agrees and undertakes to pay forthwith the said sum of Rs.22,00,000/- or part thereof to the Beneficiary without any condition,

protest, demur or proof and without reference to any consent of the Student and irrespective of and not withstanding any contest/objection from the Student or the existence of any dispute between the Student and the Beneficiary upon the Beneficiary invoking this Bank Guarantee with the Letter of Invocation by surrendering this Original Bank Guarantee to the Bank. The Bank agrees to make the payment of invoked amount to the Beneficiary simultaneously on the Beneficiary submitting the Letter of Invocation along with Original Bank Guarantee.

The Bank further agrees that this Guarantee shall constitute an independent and autonomous contract between the Bank and the Beneficiary and shall not in any way be affected by any dispute or difference between you viz., the Beneficiary and the Student of whatsoever nature.

Finally, the Bank confirms that a mere letter from the Beneficiary that there has been a default on the part of the Student in payment of the fees, shall without any other or further proof be final, conclusive and binding on the Bank to treat the same as a valid invocation and for making the simultaneous payment of the demanded amount upto the maximum of Rs.22,00,000/-.

This Bank Guarantee shall remain in force upto ----- and all claims should be received by the Bank on or before the said date.

THE BRANCH MANAGER,

\_\_\_\_\_ BANK, \_\_\_\_\_ BRANCH.



**SERVICE BOND**

(Non-Judicial stamped paper for Rs.100-00)

- N.B.: 1. The bond format shall be typed on the Non Judicial stamped paper.
2. Sureties should be of two permanent Gazetted Officers of Andhra Pradesh Government.

I, Mr./Ms. \_\_\_\_\_ selected for MBBS/BDS course

\_\_\_\_\_ for the year 2013-14 do hereby undertake, as per G.O.Ms. No. 166, HM & FW (E1) Dept., dated 20.07.2010 to provide Compulsory Rural Medical/ dental service for a period of one year, immediately following the successful completion of the MBBS/BDS including the completion of house surgency.

Date :

Signature of the Candidate

Witness :

Sureties

1. Signature :

1. Signature :

Name and Address in full

Name and Address in full

2. Signature :

2. Signature :

Name and Address in full

Name and Address in full

## STUDY BOND

(Non-Judicial stamped paper for Rs.100-00)

For all candidates

- N.B.: 1. The bond format shall be typed on the Non Judicial stamped paper.
2. Sureties should be of two permanent Gazetted Officers of Andhra Pradesh Government.

I, Mr./Miss \_\_\_\_\_ selected for MBBS course for the academic year 2013-14 do hereby undertake to complete the said course as per the requirements of the University. In the event of my leaving the studies after joining the course, I undertake to pay to the Dr. N.T.R. University of Health Sciences a sum of Rs.50,000-00 (Rupees fifty Thousand Only) and refund the amount received as stipend up to that date to Government.

Date :

Signature of the Candidate

Witness :

Sureties

1.

Signature :

1.Signature :

Name and Address in full

Name and Address in full

2. Signature :

2.Signature :

Name and Address in full

Name and Address in full