

# **GOVERNMENT MEDICAL COLLEGE SURYAPET**

(Affiliated to Kaloji Narayana Rao University of Health Sciences, Warangal)
Recognized by MCI vide Endst No.MCI-34(41) (E-54)/2019-Med/118752, Amaravadi Nagar, Suryapet-508213

#### STUDENT CHECK LIST

- 01. NEET UG Rank Card.
- 02. NEET Admit Card
- 03. NEET Provisional Allotment Letter.
- 04. Birth Certificate (SSC Marks Memo).
- 05. Qualifying Exam Certificate (Intermediate Marks Memo OR Equivalent-Grade Certificate).
- 06. Study Certificates from 6<sup>th</sup> to 10<sup>th</sup> Standard (Study and Conduct/Character Certificate).
- 07. Study Certificates of Intermediate or equivalent for 2 Years.
- 08. Transfer Certificate.
- 09. Latest Caste Certificate (If Applicable) with father name.
- 10. Minority Certificate-Muslim Only (If Applicable)
- 11. Latest Parental Income Certificate.
- 12. Residence Certificate of the Candidate or either parent issued by MRO/Tahsildar of Telangana/AP for a period of **Ten Years**.
- 13. Migration Certificate ONLY FOR AIQ STUDENTS (PERIOD TO BE SPECIFIED WITH EXACT MONTH & YEAR) excluding the period of study/employment out-side the state (If Applicable).
- 14. Discontinuation Bond (On Rs.100/- Non-Judicial Stamp Paper & Notarized).
- 15. Genuinity Bond (On Rs.100/- Non-Judicial Stamp Paper & Notarized).
- 16. Gap Certificate issued by MRO/Tahsildar.
- 17. Equivalency Certificate **ONLY FOR AIQ STUDENTS** (To be Obtained from Board of Intermediate Education).
- 18. All the Above Certificates (03 Sets Xerox).
- 19. Candidate's Recent Passport Size Photographs-04 Nos.
- 20. Demand Draft-03(FOR STATE QUOTA), Demand Draft-04(FOR AIQ STUDENTS).
- 21. Economically Weaker Section (EWS) Certificate.

#### **GOVERNMENT MEDICAL COLLEGE SURYAPET TELANGANA**

### **New Under Graduate (MBBS Fee Structure 2023-2024)**

S1. No.	Description	OC/BC	SC/ST	Frequency
01.	Tuition Fee	10000-00	10000-00	YEARLY
02.	CDS	5000-00	5000-00	ONCE
03.	E-Library	2000-00	2000-00	YEARLY
04.	Central Stores	2000-00	2000-00	ONCE
05.	Library Fee	2000-00	2000-00	YEARLY
06.	Caution Deposit	3000-00	3000-00	ONCE
07.	Non-Government Fund	2000-00	2000-00	ONCE
	TOTAL		26000-00	

DEMAND DRAFT IN FAVOUR OF **PRINCIPAL CDS GOVERNMENT MEDICAL COLLEGE**, **SURYAPET**" FROM ANY NATIONALIZED BANK.

**Academic Development Fund (2023-2024)** 

S1.No.	Description	Amount
01.	For OC/BC	3000-00
02.	For SC/ST	1000-00

DEMAND DRAFT IN FAVOUR OF "PRINCIPAL ACADEMIC DEVELOPMENT FUND GMC, SURYAPET" FROM ANY NATIONALIZED BANK.

**Hostel Fee Structure (2023-2024)** 

SI. No.	Description	Amount
01.	Non-Refundable Amount	5000-00
02.	Caution Deposit (Refundable)	5000-00
03.	Rent (Rs. 600/- Per Month×12 Months)	7200-00
04.	Hostel Admission Application Fee	1000-00
	Total	18200-00

DEMAND DRAFT IN FAVOUR OF "PRINCIPAL GOVERNMENT MEDICAL COLLEGE, SURYAPET"
FROM ANY NATIONALIZED BANK.

# **University Fees (For AIQ Students only)**

Sl.No.	Description	Amount
01.	University Fees	Rs.12000-00

DEMAND DRAFT IN FAVOUR OF "KNR UNIVERSITY OF HEALTH SCIENCES, WARANGAL"

PAYABLE AT WARANGAL"

SD/-Principal/Director Govt. Medical College

# Bond (On Rs.100/- Non-Judicial Stamp Paper)

#### KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES WARANGAL-506002 MBBS ADMISSIONS 2023-24

I,	Mr./Ms		(Name	of the	Student)	S/o,	D/o
		(Name of the	e Parent) sel	ected for	MBBS/BD	S Cours	e do
he	reby undertake t	o complete the course	as per the re	equireme	nts of KNR	Universi	ty of
Не	alth Sciences, Te	langana, Warangal. In t	he event of r	ny discor	ntinuing the	studies	after
joi	ning the course	or after the date of an	nouncement	of second	d phase of	admission	ns, i
un	dertake to pay K	NR University of Health	Sciences, a s	sum of <b>R</b> s	s. 20,00,00	0-00 (Ru	pees
Tw	enty Lakhs Only	<b>y</b> ) and I am aware that i	I will be deba	arred for	three years	for admis	ssion
int	to MBBS/BDS co	urse in the state of Tel	angana besid	les paym	ent of <b>Rs.</b>	20,00,00	0-00
(R	upees Twenty I	Lakhs Only) towards f	forfeiture of	the bone	d in accor	dance to	the
G.	O.Ms.No.125,126	and 127 HM&FW Dept.	Dated: 22-09-	-2022.			
				Signatu	re of the Ca	ndidate	
I,	Mr./Ms.		_ (Name	of the	Parent)	Parent	o
M	r./Ms	(Name of the	Student) do	hereby	undertake	to pay	KNR
U	niversity of Healt	th Sciences, Warangal a	a sum of <b>Rs</b>	. 20,00,	000-00 (Ru	pees Tw	enty
L	akhs Only) in cas	se of discontinuation of M	IBBS/BDS Co	ourse afte	er joining or	after the	date
of	announcement o	of second phase of admis	sions by my S	Son/Daug	ghter and I a	am aware	that
m	y Son/Daughter	will be debarred for three	e years for ada	mission i	nto MBBS/1	BDS cour	se in
th	ne state of Telanga	ana besides payment of <b>F</b>	Rs. 20,00,000	)-00 (Rup	ees Twenty	y Lakhs C	nly
to	wards forfeiture	of the bond in accordan	ce to the G.O	0.Ms.No.1	25,126 and	. 127 HM	&FW
D	ept. Dated: 22-09	-2022.					
D	ate:			Sign	nature of the	Doront	
ט	aic.			Sigi.	lature of the	, i aiciii	
	**.						
W	itnesses:						
0	1.						
O	2						

### **UNDERTAKING**

(On Rs.100/- Non-Judicial Stamp Paper)

I,		D/o	bearing UG
NEET Rank No	and	l NEET Hall Tick	ket No
		and	
I,	F/o	hereby	y give an undertaking as belov
in connection with o	our claim with r	regards to certifi	ficates submitted for admission
into UG Medical ar	ıd Dental Cour	ses for the acad	demic year 2023-2024 in thi
college affiliated to l	KNR University	of Health Science	ces. We hereby declare that a
our certificates are g	genuine.		
I am aware th	nat the submitte	ed relevant certi	tificates is/are found to be no
genuine at a later d	ate, my admissi	on is liable to b	oe cancelled and I am liable fo
criminal prosecution	ns, as may be le	egally deemed fit	it. Further, I agree that I abid
by the rules and reg	ulations of KNR	University of He	ealth Sciences.
I also hereby	undertake that l	I shall not enter	r into legal litigation, if the sea
allotted to me cance	lled for the abov	e reasons.	
Signature of the Parent/0 Name & Address:	Suardian		Signature of the Candidate Name & Address:

## ANNEXURE-I Part-I

#### **UNDERTAKING BY THE CANDIDATE/STUDENT**

1.	l,		S/o.	D/o.	of
	Mr./Mrs./Ms	<del>.</del>	, have	carefully	read
	and fully understood the law pro	ohibiting ragging a	and the	e direction	ns of
	the supreme court and the centra	ıl/state Governmer	nt in thi	s regard.	
•					•
2.	I have received a copy of the MC	_	urbing	the Mena	ce of
	Ragging in Higher Educational Ins	stitutions 2009.			
3.	I hereby undertake that I will not	indulge in any beh	avior c	or act that	may
	come under the definition of rago	jing. I will not hurt	anyon	e physica	lly or
	psychologically or cause any other	er harm.			
			_		_
4.	I hereby agree that if found guil				-
	punished as per the provisions of	the MCI Regulation	ons me	ntioned a	bove
	and/or as per the law in force.				
Signe	ed thisDay of	Month of	_Year.		
	•				
	Name	Ad	dress		
)1 W	litness:				
J 1. VV	1410001				
02. W	litness:				

#### **APPENDIX-I**

## Ragging

The Parents have to give an undertaking (as per judgment of Hon'ble High Court, AP & TS) in Form-6 that in the event of their Son/Daughter committing or indulging in the act of ragging. They would also be liable for punishment along with their word.

# Form-II (Undertaking by Candidate/Parent of Ragging)

### **UNDERTAKING OF CANDIDATE**

I, Mr./Ms Ticket No admitted into any course of Kaloji Narayana the academic year 2023-24 assure that I wi during study period in the colleges university/college authorities may take appren	Son/Daughter of a Rao University of Health Sci ill not indulge in the act of rag affiliated of this University	If ences, Warangal in ging or indiscipline
Name of the Candidate: Date:	Signatur	re of the Candidate
UNDERTAKIN	G OF THE PARENT	
I, Sri. / Smtwho is admitted into MBBS Course of Kale Warangal Telangana in the academic year indulge in the act of ragging at any stag affiliated to this University. If violated. I may with my son/daughter.	oji Narayana Rao University or 2023-24 assure that my songe during his/ her study perion	of Health Sciences, n/ daughter will not od in the colleges
Name of the Parent (Father/Mother):	Signature of the Pare	nt (Father/ Mother)
Aadhaar No (Copy Should be Enclosed): Date:		

#### **Residential Address**