

ANNEXURE - II

DECLARATION

(This declaration is to be given by a student / ward as well as his/her NRI
Guardian for admission under NRI Category -C (S2)

I, Dr. NEET Roll
Number----- and NEET-2023 Rank (PG/MDS) -----
ward/S/o or D/o offor admission into Post
Graduate course in Category-C- S2 (NRI Quota) for the academic year 2023-24 in a
Unaided Private Medical & Dental Colleges affiliated to Dr. YSR UHS in the State of
Andhra Pradesh do hereby declare and state as under:

I declare that I am a ward S/o or D/o of /under Guardianship of
Mr/Ms.....S/o.....
.....R/o.....
..... (here incorporate the
complete address of NRI of whom the candidate/declarant is a ward).

I declare that the said NRI shall pay my entire fee and other expenses for pursuing
MD/MS/MDS 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.

(Signature of the Candidate)

Declaration of NRI:

I, S/o (or)
D/o here by declare and confirm that the
above declarant i.e., Dr.....is my
ward and is under my Guardianship and I hereby irrevocably agree and undertake
to provide financial support to him/her for payment of entire fee and other
expenses for pursuing MD/MS/MDS course for the academic year 2023-24 in any
Unaided Private Medical/Dental Colleges affiliated to Dr. YSR UHS in the State of
Andhra Pradesh.

Date:

(Name and Signature of the Guardian)

ANNEXURE - III

Sponsorship Certificate

(Institutional Quota Candidate for Category-C – S3)

This is to certify that Dr. _____S/o or D/o Sri _____NEET-2023 (PG/MDS) Roll Number_____ NEET Rank_____was a bonafide student of MBBS/BDS course of _____Medical/Dental College,_____ affiliated to Dr YSR University of Health Sciences, Vijayawada, AP.

I, on behalf of the management of the college pleased to recommend his/her candidature for admission to Postgraduate course under the Category-C-S3 (Institutional Quota)

Signature of Dean/Principal
with Office Seal

(Or)

Sponsorship Certificate

(Institutional Quota Candidate for Category-C-S3)

Employee of the Institution

This is to certify that Dr. _____ NEET-2023(PG)/(MDS) Roll Number_____ NEET Rank_____ is an employee (or) his/her Parent Sri/Smt _____ who is a an employee of our Institution and working as _____ from _____ to _____ period in _____ College affiliated to Dr YSR University of Health Sciences, Vijayawada.

I, on behalf of the Management of the college, pleased to recommend the name of Dr.----- candidature for admission into Postgraduate (Medical/Dental) course under the Category-C (Institutional Quota-S3)

Date:

Signature of Dean/Principal
(with Office seal)

Annexure - IV

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

(For all candidates)

I, Dr..... selected for Post Graduate Degree/Diploma for the year **2023-24** 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 Dr. YSR UHS a sum of Rs.3,00,000 + 18% GST (Rs.3,54,000/-) and refund the amount received as stipend up to that date to the respective College.

DATE:

Signature of the Candidate:

Witness:

1. Signature:

Name and address in full

2. Signature:

Name and address in full

ANNEXURE - V

DECLARATION

I Son of/Daughter of
..... Residing at and admitted to in 1st
year of (Name of the PG course) at
..... (Name of the College) for the academic year
2023-24 do hereby solemnly affirm and sincerely state as follows:

I declare that I shall abide by the rules and regulations prescribed by the Dr. YSR
University of Health Sciences, Vijayawada for the (course) including
regulations for
re-admission after the break of study.

Date :

Signature of candidate

/ Countersigned /

Dean / Principal / Director

(With Office seal)

TUITION FEE AFFIDAVIT SUBMITTED BY PG MEDICAL / PG DENTAL STUDENTS
ADMITTED INTO PRIVATE UN-AIDED NON-MINORITY MEDICAL & DENTAL COLLEGES
OF ANDHRA PRADESH FOR THE ACADEMIC YEAR 2023-24.
(ON Non - Judicial Stamp Paper for Rs. 100/-)

I, Dr. _____,
(Aadhar No: _____), NEET PG / NEET MDS Roll No.
_____, NEET PG / NEET MDS Rank. _____, S/o/D/o.
_____, R/o. _____ do here by
solemnly affirm and state on oath as follows.

That I have been allotted a _____ Seat in
_____ College by Dr. YSR
University of Health Sciences, Vijayawada in Counselling conducted on _____
under the Competent Authority Quota / Management Quota for the academic year
2023-24 for the duration of full course.

That I am aware of the fact that W. P. No. 32975 of 2022 were filed and the
Hon'ble High Court of A.P., gave the following direction in I. A. No. 2 of 2023 in W. P. No.
32975 of 2022, "Upon hearing both the counsel, this Court deems it appropriate to
enhance the existing fee for the academic year 2022-2023 at the rate of 15% for the
present year 2023-2024 for MBBS-PG and Super Speciality Courses, in the interest of
justice, keeping in view of the inflation and other factors.

Therefore, the State Government is directed to go ahead with the Counselling
notification in respect of MBBS PG and Super Speciality Courses medical admissions.

The Respondents are further directed to notify the enhanced fee for the present
academic year 2023-2024 at the rate of 15% as a tentative fee till the fixation of final fee
as per the procedure under the provisions Act 20 of 2019 and Rules made there under,
which is pending before the APHERMC".

As per the above Orders, the Government of Andhra Pradesh issued G. O. Ms.
No. 123, HM&FW (C1) Dept., Dt. 10/08/2023 notified the fee structure for the academic
year 2023-2024 by enhancing the rate of 15% on the existing fee of the academic year
2022-2023 which was notified in the G. O. Ms. No. 56, HM&FW C1) Dept., Dt.
29/05/2020 to the PG Medical and Dental Courses pending fixation of the final fee. The
G.O. further stated that the fee structure notified is subject to outcome of the W. P.
No's. 32975-33162 and 35090 of 2022.

I am herewith paying the tuition fee as per the above orders of the Government
of Andhra Pradesh (G. O. Ms. No. 123, HM&FW (C1) Dept., Dt. 10/08/2023), I further
undertake, without prejudice to my rights, I agree to pay the tuition fee payable
pursuant to the decision of the Hon'ble High Court in above batch of Writ Petitions or
by the Hon'ble Supreme Court of India or Order of the Government or any other
authority concerned.

I further declare that: I am fully conversant with the rules and regulations of

_____ in the matter of recovery of pending tuition fee and other fee from its students and the Management and Administration of the Institution may take any such legal action deemed fit to recover the dues from us.

This Affidavit cum Indemnity Bond is executed by me as a pre-condition to seek admission to _____ Course in _____ College for the year 2023-24.

Solemnly sworn and
Signed before me on this the
_____ day of _____ 2023

DEPONENT

//NOTARY//