

**KAMINENI ACADEMY OF MEDICAL SCIENCES AND RESEARCH CENTRE  
L.B.NAGAR, HYDERABAD-500068.**

**Receipt of Documents**

1. **Allotment Letter and Provisional Verification Report** issued by KNRUHS.
2. Admit card of NEET UG – 2026 Examination and Rank Card NEET UG – 2026 issued by KNRUHS.
3. SSC or equivalent examination containing Date of Birth.
4. Memorandum of marks of qualifying examination i.e., Intermediate.
5. Transfer certificate (T.C).
6. Original Bonafied certificates from Class 6<sup>th</sup> to 10<sup>th</sup> and Intermediate.
7. Equivalency certificate from Board of intermediate education Govt. of Telangana in case of state other than Telangana/AP.
8. Permanent Caste Certificate claiming reservation under BC/SC/ST Categories issued by MRO for “A” Category only.
9. Copy of the Aadhar Card.
10. Photographs 5... (Passport Size)
11. Minority certificates issued by the MRO (If applicable).
12. Candidates who have not studied in the any Educational Institutions have to submit residence certificate of the candidate/Parent for 10 years period immediately preceding the qualifying examination (dates of period to be specified).
13. The candidates claiming fee exemption shall produce the latest Income certificate of the Parent issued by MRO / Tahsildar.
14. Candidates claiming eligibility of reservation under Special categories i.e., PWD, CAP, PMC and Anglo Indian should furnish the required certificates issued by competent Authority in support of their claim.
15. EWS Certificate for the year 2026-27 claiming reservation under EWS Categories issued by Competent Authority (Tahsildar) of State of Telangana (Mandatory If applicable) for “A” Category only.
16. Genuinity of the certificate Bond on Rs 100/- bond paper duly Notarized **Annex. (I)**
17. Discontinuing bond KNRUHS on Rs 100/- bond paper duly Notarized **Annex. (II)**
18. Anti- Drug Affidavit by Student & Parent on Rs 100/- bond paper duly Notarized **Annex. (III)**
19. Anti-Ragging Affidavit by Student on Rs 100/- bond paper duly Notarized **Annex. (IV)**
20. Anti- Ragging Affidavit by Parent on Rs 100/- bond paper duly Notarized **Annex. (V)**
21. Seat blocking bond on Rs 100/- bond paper duly Notarized **Annex. (VI)**
22. Discontinuing Bond KAMSRC on Rs. 100/- bond paper duly Notarized **Annex. (VII)**
23. Bank Guarantee (BG) from any nationalized/schedule bank for MQ and NRI category only **Annex. (VIII)**
24. Documents required for **NRI** Candidates quota seats should submit the following documents from a Blood relative such as Father/Mother/Brother/Sister/Uncle/Aunt. only and should submit a declaration to that effect
  - I. NRI Declaration form by the student 100/- bond paper duly Notarized **Annex. (IX)**
  - II. NRI Sponsorship certificate from blood relation only.
  - III. NRI status certificate of the financial supporter issued by embassy of respective country under their seal.
  - IV. Copy of NRI Bank account pass book of the financial supporter for last one Year.
  - V. Copy of Pass port of NRI.
25. 2 set of Xerox Copy of all the above Certificates in the above order including 1 self-attested.

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**(ANNEXURE - I)**

**PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT**  
**(ON-NON- JUDICIAL STAMP PAPER - RS.100/-)**

**GENUINITY OF CERTIFICATES**

**UNDERTAKING**

I,..... S/o / D/o.....  
Bearing UG NEET 2026 Rank No.....

And

I.....M/o / F/o.....,  
Bearing UG NEET 2026 Rank here by give an undertaking as below, in connection with our claim with regard to certificates submitted for admission into UG Medical course for the Academic year 2026-27 in colleges affiliated to KNR University of Health Sciences. We, here by declare that all our **certificates are genuine**.

I am 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 KNR University of Health Sciences.

I also hereby undertake that I shall not enter legal litigation, if the seat allotted to me is cancelled, for the above reasons.

**Signature of the parent/Guardian**

**Signature of the Candidate**

**Adhar No:**.....

**Adhar No:**.....

**Phn. No.**.....

**Phn. No.**.....

**Email. Id.**.....

**Email. Id.**.....

**Address:**

**Address:**

**Date:**

**Place:**

# **DRAFT**

## **Annexure –II**

### **KNRUHS DISCONTINUATION BOND** **PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT**

**(ON NON-JUDICIAL STAMP PAPERS OF RS 100/- WITH NOTARY)**

#### **BOND FOR UG MBBS/BDS ADMISSION FOR THE ACADEMIC YEAR 2026-27**

I, \_\_\_\_\_ (Name of the candidate) S/o, D/o \_\_\_\_\_  
(Name of the parent), Selected for MBBS/BDS Course do hereby under take 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.O. Ms.No.125, 126 and 127 HM&FW Dept., Dated: 22.09.2022

Signature of the candidate  
Phn. No.....  
Mail. ID:.....

I, \_\_\_\_\_ (Name of the parent), parent of Mr/Ms. \_\_\_\_\_ (Name of the candidate), do hereby undertake to pay KNR University of Health Sciences, Telangana 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  
Phn. No.....  
Mail. ID:.....

Witnesses:

1. Signature.....

Name.....

Mobile.....

Mail. ID:.....

2. Signature.....

Name.....

Mobile.....

Mail. ID:.....

## **UNDERTAKING / DECLARATION AGAINST DRUG ABUSE**

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

I 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.

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.

The parent/guardian undertake 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.

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.

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 :**

Name of Parent / Guardian :

**NEET Roll No :**

Relationship with Student :

**Course :** MBBS

Mobile No. :

**College :** Kamineni Academy of Medical  
Sciences and Research Centre

Mail Id :  
Address :

**Academic Year :** 2026-27

**Signature of the Student**

**Signature of the Parent / Guardian**

**DRAFT**  
**(ANNEXURE – IV)**  
**(ANTI RAGGING)**  
**AFFIDAVIT BY THE STUDENT**

I, \_\_\_\_\_, Admn. No. \_\_\_\_\_  
S/o. / D/o \_\_\_\_\_, having been admitted to KAMINENI ACADEMY OF MEDICAL SCIENCES AND RESEARCH CENTRE, L.B.NAGAR, HYDERABAD -500068 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.

1. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
2. I have also, perused in particular, definition & penalties of Ragging 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.
3. 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.
4. 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.
5. 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.
6. I hereby declare that I submit online Undertaking to the website [www.antiragging.in](http://www.antiragging.in) and [www.amanmovement.org](http://www.amanmovement.org).

Declared on this date (DD/MM/YYYY) : \_\_\_\_\_

Signature of deponent

Name:

Address:

Mail. ID.

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at Hyderabad on this date: \_\_\_\_\_

Signature of deponent

Solemnly affirmed and signed in my presence on this date: \_\_\_\_\_ after reading the contents of this affidavit.

**OATH COMMISSIONER**

**DRAFT**

**ANNEXURE – V  
(ANTI RAGGING)  
AFFIDAVIT BY THE PARENT**

I, \_\_\_\_\_, F/o / M/o. \_\_\_\_\_  
Admn. No. \_\_\_\_\_, having been admitted to  
KAMINENI ACADEMY OF MEDICAL SCIENCES AND RESEARCH CENTRE,  
L.B.NAGAR, HYDERABAD -500068 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.

1. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
2. I have also, perused in particular, definition & penalties of Ragging 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.
3. 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.
4. 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.
5. 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, I am aware that my ward's admission will be liable to be cancelled.
6. I hereby declare that I submit online Undertaking to the website [www.antiragging.in](http://www.antiragging.in) and [www.amanmovement.org](http://www.amanmovement.org).

Declared on this date( ): \_\_\_\_\_.

Signature of deponent  
Name of the parent:  
Address:  
Mobile No:  
Mail. Id.

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.  
Verified at Hyderabad on this Date: \_\_\_\_\_.

Signature of deponent

Solemnly affirmed and signed in my presence on this date: \_\_\_\_\_ after reading the contents of this affidavit.

**OATH COMMISSIONER**

**DRAFT**

**(ANNEXURE – VI)**

**DECLARATION BY CANDIDATE**

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

I,.....S/o/D/o .....,  
Selected for MBBS / BDS..... for the year 2026- 27 under  
Competent Authority Quota / Management Quota / NRI Quota at Kamineni Academy of Medical  
Sciences and Research Centre - Affiliated to KNRUHS. I do hereby declare that I am not admitted  
into MBBS/BDS Course in any Medical/Dental College in the country at present which amounts to  
**seat blocking.** I have been informed by the Principal that in the event of detection later of the  
candidate being admitted in any other Medical/Dental College for UG Course simultaneously, the  
candidate will be liable for penal action by the National Medical Commission/ Kaloji Narayan Rao  
University of Health Sciences/Government.

**Date:**

**Signature of the candidate**

**Name and address in full**

**Name:**.....

**Address:**.....

.....

.....

.....

**Signed in my presence  
Attested by**

**Principal of the college with seal**

**Mobile No**.....

**Email Id**.....

**DRAFT**

**ANNEXURE – VII**

**(NON-JUDICIAL STAMPED PAPER FOR RS.100/-)**  
**KAMSRC - DISCONTINUATION BOND**

I Mr/Ms ..... S/o, D/ o ..... 1<sup>st</sup> year MBBS student, joined at Kamineni Academy of Medical Sciences and Research Centre in the year 2026-27 under Convener Quota / Management Quota ( B & C Categories ) , do hereby undertake to complete the said course as per the requirements of the KNR University of Health Sciences, Warangal and as per the norms of the management of **Kamineni Academy of Medical Sciences And Research Centre**, L.B. Nagar, that in the event of my leaving the studies in the mid-term after closing of admissions , I undertake to pay to Kamineni Academy of Medical Sciences And Research Centre, L.B. Nagar the balance of fees for the remaining period of the course.

Date:

**Signature of the Candidate**

Mobile .No:

**Witnesses:**

1. Signature :  
Name & Address :  
Mobile No :

**Signature of the Parent**

Address:

Mobile .No:

2. Signature :  
Name & Address :  
Mobile :