

-::GANDHI MEDICAL COLLEGE::SECUNDERABAD:: ::TELANGANA STATE::-

ADMISSIONS FOR MD/MS, DIPLOMA COURSES 2023-2024

All the candidates who have been allotted MD/MS seats in PG counselling, in this institute are hereby directed to submit the following self attested documents.

PG Admission Committee:

- 1. Dr. K. Ramesh Reddy, Principal,
- 2. Dr. N. Krishna Mohan, Vice Principal (Academic).
- 3. Dr. C. Narender Kumar, Professor of Hospital Administration,
- 4. Dr. Shyamala Srujana, Associate Professor of Pathology,
- 5. Dr. Jonnala Sindhu, Assistant Professor of Hospital Administration,
- 6. Dr. P. Amulya, Assistant Professor of Hospital Administration,
- 7. Sri. K. V. Subba Rao, Administrative Officer (Academic).
- 8. Sri. Prabhu Singh, Office Superintendent (Academic).
- **9.**Smt. B. Madhavi Junior Assistant:- (PG Section Clerk)

For Queries and Information:

- 1. Sri. Prabhu Singh, Office Superintendent (Academic): 7981026233
- 2. Smt. B. Madhavi Junior Assistant:- (PG Section Clerk: 9989124648)
- a) Candidates who want to give willingness for upgradation for Round-2 while retaining Round -1 seat, "HAVE TO REPORT PHYSICALLY" at the allotted institute to confirm their admission.
- b) For allotment under OBC quota, <u>OBC certificate issued by concerned</u> <u>state</u> <u>government only is valid.</u>
- c) For allotment under PWD quota, <u>certificate issued this year (December 2022/January-2023)</u> by the medical board of Medical counselling <u>committee</u> authorized centres only is valid.

Checklist of the documents to be submitted by the candidates for

- 1. Provisional allotment order
- 2. Admit card/Hall Ticket
- 3. Rank Card
- 4. SSC/Date of the Birth Certificate
- 5. 12th Class (Intermediate) marks memo
- 6. Bonafide/ Study and conduct certificate of MBBS
- 7. Memorandum of marks in MBBS
- 8. MBBS Degree Certificate
- 9. Compulsory Rotatory Internship Certificate
- 10. Transfer Certificate
- 11. Migration Certificate
- 12. MBBS Permanent Registration Certificate
- 13. Caste Certificate
- 14. EWS Certificate/OBC Certificate issued by respective state government will be accepted not BC Certificate.
- 15. Physically Handicapped Certificate (Issued by Authorized Centers Only)
- 16. ID Proof -Aadhaar Card /PAN Card/Driving License/ Voter ID/ Passport
- 17. 4 Copies of latest Photographs
- 18. College fee Rs. 2 5,000/- (Rupees Twenty Five Thousand) (in favour of "College Development Society, Gandhi Medical College, Secunderabad") (One-Time Payment).
- 19. University fee of Rs. 29,600 (Rupees Twenty N i n e Thousand six Hundred Only) (DD in favour of "THE REGISTRAR, KNRUHS, WARANGAL") (One Time Payment)
- 20. Equivalency fee Rs. 5000/- (Rupees Five Thousand only) (DD in favour of "THE REGISTRAR, KNRUHS, WARANGAL") (If the candidate has completed MBBS in colleges other than Telangana & Andhra Pradesh states) (One-Time Payment)
- 21. Equivalency fee Rs. 7000/- (Rupees Seven Thousand only) (DD in favour of "THE REGISTRAR, KNRUHS, WARANGAL") (If the candidate has completed MBBS in colleges other Country) (One-Time Payment)
- 22. Processing Charges Rs. 2000/- (Rupees Two Thousand Only) in case of candidates sliding to other college, in subsequent rounds, uniform processing charges to be deducted and the remaining amount is to be refunded to the candidate.

- 23. Preferred mode of payment for the candidates who are willing to participate in the subsequent rounds of counselling is **Demand Draft** for both University and college fee, to avoid delay in refund process.
- 24. Submission of two(2) Bonds with surities
 - 1. Rs. 50,00,000 (Annexure -1) toward discontinuation of the course
 - 2. Failure to serve the Government as Senior Resident for the period of 1 year after completion of the course a bond of Rs. 20,00,000 (Annexure –II) for Degree and Rs. 10,00,000/- for Diploma course.
- 25. Undertaking by the candidate
- 26. Two Copies of All the above documents and bonds.
- 27. All Candidates are required to submit TSMC registration within one month after taking admission.
- 28. The mode of payment for the candidates who are willing to participate in the subsequent rounds of counselling is Demand Draft for both University and college fee, to avoid delay in refund process.

Note:-

- 1. All the certificate MUST be submitted ORIGINAL at the time of physical verification, no colour copy will be accepted.
- 2. For all the online transactions done by RTGS/NEFT/UPI, the copy of online fee payment receipt with UTR Number should be submitted online, along with the other documents.
- 3. In case of candidates sliding to other colleges in subsequent rounds, uniform processing charges of Rs. 2000/- (Rupees Two Thousand) only will be deducted and the remaining amount will be refunded to the candidate.
- 4. All admissions made online will be deemed "PROVISIONAL" and will be considered "FINAL" only on verification of original documents at the time of Physical joining and medical fitness at the college.

AFTER PHYSICAL VERIFICATION OF ALL THE ORIGINAL DOCUMENTS ONLY, THE ADMISSION ORDER WILL BE ISSUED.

GANDHI MEDICAL COLLEGE, SECUNDERABAD

PG Fee Structure for the Academic Year 2023-24

<u>S.</u>	<u>PARTICULARS</u>	AMOUNT	FREQUENCY	
<u>No</u>				
<u>1.</u>	University Fee (in favour of "THE REGISTRAR, KNRUHS, WARANGAL)	Rs. 29,600/-	One Time	(Only for AIQ Candidates to be paid at the time of admission)
<u>2.</u>	College Fee (To CDS Account) A. CDS Fee: Rs. 15,000/- B. Academic Fee: Rs. 7,000/- C. Library Fee: Rs.3,000/-	Rs.25,000/-	One Time	AIQ & State Candidates
3.	<u>Hostel Fee</u> (After Allotment)	Rs.18,000/-	ONCE A YEAR	AIQ & State Candidates
	<u>Total</u>	Rs. 72,600/-		

College Fee

D.D/ ONLINE PAYMENT IN FAVOUR OF

CDS, Gandhi Medical College, SECUNDERABAD.

ACCOUNT NO: 52099020301 IFSC CODE: SBIN0020256

BRANCH NEW BHOIGUDA, SECUNDERABAD

Note:-

The following payments to the University in Demand Draft (DD) form,

(in favour of "THE REGISTRAR, KNRUHS, WARANGAL") if applicable, atthe time of admission.

- 1. AIQ Candidates to Pay University Fee of Rs. Rs. 29,600/-.
- 2. Additional onetime payment of **Rs. 5000/-** Equivalency Fee for Candidates who completed MBBS from colleges other than Telangana & Andhra Pradeshstates.
- 3. Additional onetime payment of **Rs. 7000/-** Equivalency Fee for Candidates who completed MBBS from other Countries.

ANNEXURE - I

(Non-Judicial Stamp 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 red	quirements of the University. In the event of my leaving			
the studies after joining the course,	I undertake to pay to the KNR University of Health			
Sciences a sum of Rs.50,00,000/- (Ru	pees Fifty lakhs only) and refund the amount received			
as stipend/salary up to that date to Go	as stipend/salary up to that date to Government.			
DATE:				
Witness:	Signature of the Candidate			
1. Signature :				
Name and address in full	Name and address in full			
2. Signature :	2. Signature of parent:			
Name and address in full	Name and address in full			

N.B.: 1. The Bond format shall be typed on the Non Judicial

2. Sureties by Income Tax Payees / Gazzetted Officers only. (Other Than Parents) (Self attested Copies Of PAN & Aadhar of the Sureties)

(TO BE FILLED BY TWO SURITIES)

(1.)	1.) In consideration of the Surety Bond Son of/ da	l executed by the student (Mr./Ms. ughter of resident	
of		egistrar, KNRUHS, Warangal and the Principal	
of Gandhi Medical College, Secunderabad to a sum of Rs.50,00,000/- (Rupees F			
	lakhs only),	abad to a sum of Rs.50,00,000 /- (Rupees inty	
_	• •		
[_		ointly and severally, for the payment of the said	
		ove. In casethe student fails to pay on demand	
		Fifty lakhs only), I, the said surety, shall,	
	without any objection, pay the said	d due amount to the Gandhi Medical College,	
	Secunderabad on demand.		
	I the said surety do solemnly a surety and I have been regularly fil	affirm that I am solvent to the extent of the amount of ing income tax return.	
	Si	gnature	
		ame of the Surety	
		resent Address:	
		Pin	
		ermanent Address:	
		Pin	
		adhaar No:	
		AN No.	
	M	obile No.:	
	2.) In consideration of the Surety Bond Son of/ da	d executed by the student (Mr./Ms. ughter of resident	
of_	ofin favor of The R	egistrar, KNRUHS, Warangal and the Principal	
	of Gandhi Medical College, Secundera	abad to a sum of Rs.50,00,000/- (Rupees Fifty	
	lakhs only),		
r	hereby stand as surety i	ointly and severally, for the payment of the said	
amount on the terms mentioned above. In casethe student fails to pay on dema			
		Fifty lakhs only), I, the said surety, shall,	
	· · · · · · · · · · · · · · · ·	d due amount to the Gandhi Medical College,	
	Secunderabad on demand.	d due amount to the Gandin Medical Conege,	
	Secunderabad on demand.		
	I the said surety do solemnly a surety and I have been regularly fil	affirm that I am solvent to the extent of the amount of ing income tax return.	
	Si	gnature	
		ame of the Surety	
		esent Address:	
		Pin	
		ermanent Address:Pin	
		Pin	
	••	Hill	
	Δ	adhaar No	
		adhaar No:	
	Pa	adhaar No: AN No. lobile No.:	

ANNEXURE - II

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

(FOR ALL CANDIDATES)

, Drselected for Post Graduate
Degree / Diploma for the year 2023-24 do hereby undertake to serve the Government of
Celangana by working in Government Hospitals, as a Senior Resident for a period of one
vear after successful completion of the PG Degree/ Diploma course (if required). In case
fail to join as senior Resident or in case of not completing one year of service with in a
naximum period of 18 month, I undertake to pay sum of Rs. 20,00,000 (Rupees Twenty
Lakhs) for PG Degree course to the Government.

Date:

Signature of the Parent/ Guardian	Signature of the Candidate	
	Aadhar No :	
Name:	Name :	
Aadhar No :	Address:	

N.B.: 1. The Bond format shall be typed on the Non Judicial

2. Sureties by Income Tax Payees / Gazzetted Officers only. (Other Than Parents) (Self attested Copies Of PAN & Aadhar of the Sureties)

(TO BE FILLED BY TWO SURITIES)

	In consideration of the Surety Bond executed by the student (Mr./Ms. Son of/ daughter of resident
	in favor of Director of Medical Education. Telangana State and the
	Principal of Gandhi Medical College, Secunderabad to a sum of Rs. 20,00,000/- only (Rupees Twenty lakhs only),
I	hereby stand as surety, jointly and severally, for the payment of the said amount on the terms mentioned above. In case the student fails to pay on demand a sum of Rs. 20,00,000/- only (Rupees Twenty lakhs only), I, the said surety, shall, without any objection, pay the said due amount to the Gandhi Medical College, Secunderabad on demand.
	I the said surety do solemnly affirm that I am solvent to the extent of the amount surety and I have been regularly filing income tax return.
	Signature
	Name of the Surety
	Present Address:
	Pin
	Permanent Address:
	Pin
	Aadhaar No:
	PAN No.
	Mobile No.:
(2.) of_	In consideration of the Surety Bond executed by the student (Mr./Ms
I	hereby stand as surety, jointly and severally, for the
	payment of the said amount on the terms mentioned above. In casethe student fails to pay on demand a sum of Rs. 20,00,000/- only (Rupees Twenty lakhs only), I, the said surety, shall, without any objection, pay the said due amount to the Gandhi Medical College, Secunderabad on demand.
	I the said surety do solemnly affirm that I am solvent to the extent of the amount surety and I have been regularly filing income tax return.
	Signature
	Name of the Surety
	Present Address:
	Pin
	Permanent Address:
	Pin
	Aadhaar No:
	PAN No.
	Mobile No.:

PROFORMA FOR UNDERTAKING

I, (Candidate name) S/o / D/o, bear	ring PG NEET 2023 Rank No and I,
(Parent name) F/o: (Candidate name) , bearing UC	G NEET 2023 Rank No hereby give
an undertaking as below in connection with our cl	aim with regard to certificates submitted for
admission into UG Medical Course for the Academi	ic Year 2023-24 in Colleges affiliated to KNR
University of Health Sciences.	
We, hereby declare that all our certificates are genuin	ne.
I am aware that if the submitted relevant cert	ificate (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 ab	oide by the Rules and Regulations of KNR
University of Health Sciences.	
I also hereby undertake that I shall not enter is	nto legal litigation, if the seat allotted to me is
cancelled, for the above reasons.	
Signature of the Parent / Guardian	Signature of the Candidate
Aadhar No.	
Address:	
Date:	Place:



KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES, TELANGANA, WARANGAL-506002

NAME & ADDRESS OF THE COLLEGE (As per College Letter Head)

Scanned Photo of the Candidate (Attested by the Principal)

DETAILS OF THE CANDIDATE ADMITTED INTO PG (MD/MS & DIPLOMA) COURSE FOR THE ACADEMIC YEAR 2022-23

S.No.:	NEET Rank:	NEET Roll NO:		KNRUHS Merit:	
Student Nam	e (Block Letters, A	S PER MBBS CER	ΓΙFICATE) :		
Father's Name: Gender:			Gender:		
Address:					
		Loc	al/Non-Locali		
Category/Ca	ste:		Local/Non-Local: DOB (DD/MM/YYYY):		
AWADDODEO	GREE/DIPLOMA):		RVICE/NON-SERVICE:		
	kamination Board:		otted Quota (AIQ, CQ, M	IO) .	
Allotted cou				(V) .	
Allotted Deta		Alle	otted region:		
	-	se Refer to the A	llotment letter issued l	by KNRUHS)	
Site/College	Code:				
College name	e as per letter head	l:			
Name of the	Institution last stu	died:			
Date Of Com	pletion Of Internsh	ip:			
Mobile Number (10 Digits Only):					
Email ID:					
Aadhaar Number:					
Total Marks Obtained in Eligibility Exam:		Maximum Marks in	s in Eligibility Exam:		
	on Marks (<mark>As per</mark>				
SSC/Birt	th Certificate)	2)			
Signature o	of the Candidate	Signature of the Principal along with the Official Seal			

Form - I

FORMAT OF UNDER TAKING BY THE STUDENT

1.	ISon/Daughter of Mr./Mrs./Ms			
	_ admitted to the course of			
2.	I have carefully read and fully understood the provisions in the said regulations.			
3.	I have particularly perused the provisions of regulations of the said regulations and have fully understood what constitutes – ragging.			
4.	I have also in particular perused and read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or a abetting ragging actively or passively or being part of conspiracy to promote ragging.			
5.	I hereby undertake that (i). I will not indulge in any behavior or act that may come under the definitions of ragging as may be constituted under the said regulations. (ii). I will not participate in or abet or propagate ragging in any form included but not limited to those that may be constituted under the said regulations. (iii). I will not hurt anyone physically or psychologically or cause any other harm.			
6.	I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.			
7.	. I also declare that I have never been found to be guilty of ragging or abetting ragging actively or passively, or being part of conspiracy to promote ragging and have never been punished in any manner for these offences and further affirm that if these declaration incorrect or false, my admissions is liable to be cancelled/ withdrawn.			
	Signed on thisday ofmonth ofyear.			
	Signature Name of the StudentAddress			
	Phone no.			
	Witness I Name and SignatureAddress			
	Witness II Name and SignatureAddress			

GANDHI MEDICAL COLLEGE: SECUNDERABAD: NEET PG - 2023 PERSONAL DATA SHEET OF CANDIDATES ADMITTED

COURSE -

CATEGORY - AIQ/CQ

1. Full Name of the Candidate (In block letters	<u>:</u>
2. Age and Date of Birth	<u>:</u>
(As per SSC certificate)	
3. Sex	<u>:</u>
4. Category/Caste	<u>:</u>
5. Name of Father & Occupation	<u>:</u>
6. Name of the Mother & Occupation	<u>:</u>
7. Permanent Address of the Parents	<u>:</u>
(O) (R) (Mobile)	
8. Permanent /Temporary Address of the Candidate	<u>:</u>
Mobile:	
Email ID :	
9. Name of the college where the candidate where last studied UG	<u>:</u>
10. Number of attempts of NEET PG	<u>:</u>
11.Any significant medical history	<u>:</u>
(epilepsy /Heart disease / Any condition under treatment)	
12.Contact Details of Parents / Guardian	
13. Marital Status – Unmarried / Married / Divorced / Sepa	ırated
14. Name of the Spouse and Contact Number :	
15. Hobbies/Special talents :	
16. Aadhaar and PAN card details :	

GOVERNMENT OF TELANGANAREQUISITION FOR IDENTITY CARD GMC - SECUNDERABAD - 2023-24

To be filled BLOCK LETTERS

Name of the Student	t :		
Department/Course	:		
Batch	:	Affix Passport Size Photo	
Date of Birth	:		
Blood Group	:		
		Signature of Student	
Full Permanent Address with Pin code	:		
Mobile No.	:		
Kindly Issue Identity card.			

ADMN. OFFICER (ACAD.) GANDHI MEDICAL COLLEGE, SECUNDERABAD