

ADMISSIONS FOR MBBS COURSE 2025-26.

UG ADMISSION COMMITTEE.

- 01. Dr. D. Mohandas, Principal, Govt .Medical College, Narsampet, Wgl (Dt)
- 02. Dr. S. Lakshmi Narayana, Prof &HOD, Dept. of Orthopedics, Govt. Medical College, Narsampet, Wgl (Dt)
- 03. Dr. S. Sreedevi, Prof & HOD, Dept. of Microbiology, Govt. Medical College, Narsampet, Wgl (Dt)
- 04. Dr. K. Ramesh, Associate Professor in Biochemistry, Nodal Officer, GMC, Nspt,Wgl (Dt)

S.No.	Team- A	Team-B
01	Dr .M. Damodari bai	Dr. S. Sreedevi
	Prof & HOD of Pharmacology	Prof. & HOD of Microbiology
02	Dr. V. Usha Rani	Dr. R. Sowjanya
	Assoc. Prof of Microbiology	Assoc. Prof of Pathology
03	Dr. R. Sravanthi	Dr. B. Vasantha Kumari
	Assoc. Prof. of Anatomy	Assoc. Prof. of DVL
04	Dr. Kranthi kiran	Dr. A. Pooja
	Asst. Prof. of Pathology	Senior resident, Physiology
05	Dr. Y. Chathurya	Dr. Jasmine Maharana
	Senior resident, Pharmacology	Tutor, Anatomy

For Additional Support.

- 01. Dr. N. Parushuram, Professor & HOD, Dept of ENT.
- 02. Dr. B. Giridhar, Professor & HOD, Dept of Ophthalmology
- 03. Dr. M. Venkanna, Professor, Dept. of General Surgery

For Queries and Information (Administrative Staff).

- 01. Smt. Padmavathi, office superintendent
- 02. Shri Riyaz, Sr. Asst.

Reporting time from 10:00 A.M. to 04:00 P.M.

- Candidate who want to give willingness for up gradation for Round–II while retaining Round – I <u>"Have to Report Physically"</u> at the allotment institute to confirm their admission.
- For allotment under <u>OBC Quota, OBC Certificate issued by Concerned</u> <u>State Government Only is Valid.</u>
- For allotment under PWD Quota, <u>Certificate Issued should be latest-by the</u> <u>Medical Board of Medical Counseling Committee authorized Centers.</u>

All the candidates who have been allotted MBBS Seats in UG Counseling, in this Institute are hereby directed to submit the Following Documents.

THE FOLLOWING DOCUMENTS ARE TO BE SUBMITTED AT THE TIME OF ADMISSION

SI.No	Name of The Particular		Check	
1	Provisional Allotment Order	Yes	No	
2	NEET UG ADMIT Card -2025 (Mandatory)	Yes	No	
3	NEET UG Rank Card-2025 (Mandatory)	Yes	No	
4	Birth Certificate (SSC Marks Memo or Its Equivalence) (Mandatory)	Yes	No	
5	Qualifying Exam Certificate(Intermediate Marks Memo/Equivalent, (Mandatory).{Grade Certificate Not Accepted}	Yes	No	
6	Study & Conduct Certificates VI to X (Mandatory)	Yes	No	
7	Study & Conduct Certificates XI & XII (Intermediate) (Mandatory)	Yes	No	
8	Latest Caste Certificate (Mandatory – if applicable) with father Name	Yes	No	
9	Transfer Certificate (Mandatory)	Yes	No	
10	Minority Certificate (Mandatory-if applicable)	Yes	No	
11	EWS (Economically Weaker Section) Certificate for the year 2025-26 Claiming Reservation under EWS Categories issued by Competent Authority (Tahsildar) of State of Telangana (Mandatory - if applicable)	Yes	No	
12	Latest Parental Income Certificate (If applicable)	Yes	No	
13	Residence Certificate of the Candidate or either parent issued by MRO/ Tahsildar of Telangana for a period of Ten(10)years (Period to be specified with exact month and year) excluding the period of Study/ employment outside the state (Mandatory - if applicable)	Yes	No	
14	GAP Certificate Issued by Tahsildar / MRO(Mandatory-if applicable)	Yes	No	
15	NCC Certificate(Mandatory-if applicable)	Yes	No	
16	CAP(Children of Armed Personnel)Certificate(Mandatory-if applicable)	Yes	No	
17	PMC(Post Matriculation)(Mandatory-if applicable)	Yes	No	
18 19	Anglo Indian Certificate (Mandatory-if applicable) PWD (Persons with Disability) certificate (Mandatory - if applicable) certificate issued this year (December 2023 – January 2024) by the Medical Board of Medical Counseling committee authorized centres.	Yes Yes	No No	
20	Migration Certificate(if applicable)	Yes	No	
21	Equivalent Certificate(If student from other state)	Yes	No	
22	Employment Certificate of Parent(For Non- Local Status)	Yes	No	
23	D.D in favour of "THE REGISTRAR, KNRUHS, WARANGAL") Fee Rs.12,000/- (All India Quota) (Mandatory)	Yes	No	
24	College Fee DEMAND DRAFT in favour of the PRINCIPAL , GOVERNMENTMEDICALCOLLEGE ,NARSAMPET,WARANGAL DIST payable at NARSAMPET,WARANGAL DIST Amount of Rs. 29,000/- (OC, BC) and Rs.27,000/- (SC, ST)(Mandatory)	Yes	No	
25	4 Passport Size Photos-Latest(Mandatory)	Yes	No	
26	Aadhaar Card Xerox Copy(Mandatory)	Yes	No	
27	Form I & II (Enclosed)	Yes	No	

28	Specimen Signature of the Candidate (Mandatory)	Yes	No
29	Undertaking in the form of Affidavit on Rs.100 Non-Judicial stamp paper by the parent and candidate stating that all the certificates including the caste and category certificates are genuine and they are responsible for any further consequences as per law shall be submitted at the time of admission. If any Discrepancy is noticed, the admission will be cancelled.(Mandatory)	Yes	No
30	BondofRs.20,000/-(Rupees Twenty Lakhs)(Mandatory)	Yes	No
31	2 sets of self- attested Xerox copies of all certificates and Bonds.	Yes	No
32	Processing Charges of Rs. 2,000/- DEMAND DRAFT in favour of the PRINCIPAL,GOVERNMENT MEDICAL COLLEGE, NARSAMPET, WARANGAL DIST payable at NARSAMPET, WARANGAL DIST *All DD (Demand Draft) must be drawn from a Nationalized Bank Only	Yes	No
33	Self-Attested copies of Aadhaar and pancard of sureties.	Yes	No

The above certificate will not return to him/ her unless he/she completes the course as norms of KNR University of Health Sciences, Warangal, Telangana State.

"Signature of Verification Officers"

TEAM-A	TEAM-B
01.	01.
02.	02.
03.	03.
04.	04.
05.	05.

GOVERNMENT MEDICALCOLLEGE: NARSAMPET, WARANGAL DIST: NEET - 2025 MBBS BATCH 2025-26 PERSONAL DATA SHEET OF CANDIDATES ADMITTED ON:

SHOULD BE FILLED BY THE CANDIDATE OWN HAND WRITING:

1. Full Nam e of the Candidate	:	
(In block letters as per Intermediate Certifica	ıte)	
2. Age and Date of Birth(As per SSC certificate)	:	
3. Sex	:	
4. Name of Father & Occupation	:	
5. Literacy status of Father	:	
6. Name of the Mother & Occupation	:	
7. Permanent Address of the Parents	:	
Parents Phone No. (Or) Mobile		
8. Temporary Address of the Candidate	:	
Phone No (Or) Mobile		
9. Name of the College where the candidate	:	
Where last studied (Inter 2^{nd} year or +2)		
10. Name of the Coaching Centre	:	
(If Studied)		
11. Number of attempts of NEET	:	
12. After Completion of MBBS Course		
Whether you will join in	:	Govt. Service/Private Service
13. Whether you wish to pursue Postgraduate	:	
Course if yes which specialty		

Signature of the Parent/Guardian

Signature of the Candidate

FORM-I

FORMAT OF UNDERTAKING BY THE STUDENT(ANTI-RAGGING)

01. I, _____Son/Daughter of Mr./Mrs./Ms.

_____Admitted to the course of MBBS at Government Medical College, NARSAMPET, WARANGAL DIST with

Admission Number affiliated to Kaloji Narayana Rao University of Health Sciences, have received a copy of the

National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, 2021 (Here in after referred to as the said Regulations).

- 02. I have carefully read and fully understood the provisions in the said Regulations.
- 03. I have particularly per used the provisions of regulations 3 and 4 of the said regulations and have fully understood what constitutes Ragging.
- 04. I have also in particular per used the provisions of chapter–IV and read and understood the administrative and penal actions that may be taken against me in case I am found guilty of ragging or abetting ragging actively or passively or being part of conspiracy to promote ragging.
- 05. 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 regulation 3 of 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 regulation 3 of the said regulations.
 - III. I will not hurt anyone physically or psychologically or cause any other harm.
- 06. 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.
- 07. 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 declarations is incorrect or false, my admission is liable to be cancelled/withdrawn.

Signed on this _____ Day of _____ Month of _____ Year.

Signature Name of the Student Phone No. Address.

Witness–I Name and Signature Address

Witness–II Name and Signature Address

<u>FORM-II</u> FORMAT OF UNDER TAKING BY THE PARENTS /GUARDIAN OF THE CANDIDATE / STUDENT (ANTI- RAGGING)

01. I,______Father/Mother/Guardian of Mr./Mrs./Ms._____Admitted to the course of MBBS at

Government Medical College, NARSAMPET, WARANGAL DIST with _ Admission Number affiliated to **Kaloji Narayana Rao University of Health Sciences**, hereby declared that, I have received a copy of the National Medical Commission(Prevention and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, 2021(Here in after referred to as the said Regulations).

- 02. I have carefully read and fully under stood the provisions in the said Regulations.
- 03. I have particularly per used the provisions of regulations 3 and 4 of the said regulations and have fully understood what constitutes Ragging.
- 04. I have also in particular per used the provisions of chapter –IV and read and understood the administrative and penal actions that may be taken against my Son/Daughter/ward incase he/she is found guilty of ragging or a betting ragging actively or passively or being part of conspiracy to promote ragging.
- 05. I hereby undertake that My Son/Daughter/Ward_____
 - I. Will not indulge in any behavior or act that may come under the definitions of ragging as may be constituted under regulation 3 of the said regulations.
 - II. Will not indulge in any behavior or act that may come under the definitions of ragging as may be constituted under regulation 3 of the said regulations.
 - Will not participate in or a bet or propagate ragging in any form included but not limited to those that may be constituted under regulation 3 of the said regulations. I will not hurt anyone physically or psychologically or cause any other harm.
- 06.I hereby agree that my Son/ Daughter / Ward is found guilty of any aspect of ragging, he/she may be punished as per the provisions of the said regulations or as per the applicable laws for the time being in force.
- 07. I also declare that, my Son/ Daughter / Ward 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 declarations is incorrect or false, his/her admission is liable to be cancelled/ withdrawn.

Signed on this _____ Day of _____ Month of _____ Year.

Signature Name of the Parent/Guardian. Phone No. Address.

Witness–I Name and Signature Address

Witness–II Name and Signature Address

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 2025-26

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 admission, 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 in to MBBS/BDS course in the state of Telangana be sides payment of **Rs.20,00,000/-(Rupees Twenty Lakhs only)** towards for feature 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

I, _______(Name of the Parent), Parent of Mr/Ms. ______(Name of the candidate), do here by under-take to pay KNR University if Health Sciences, Warangal a sum of Rs.20,00,000/-(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

Witness:

1)

2)

(TO BE FILLED BY TWO SURETIES)

(I.)In consideration of the Surety Bond executed by the student (Mr./Ms.____

_____Son of/Daughter of_____

Resident of ______ in favour of The **Registrar, KNRUHS, Warangal** and the **Principal, Govt. Medical College, NARSAMPET, WARANGAL DIST** to sum of **Rs.20,00,000/-(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 Rs.20,00,000/-(Rupees

Twenty lakhs only). I the said surety, shall, without any objection, pay the said due amount to the **Govt. Medical College, NARSAMPET, WARANGAL DIST** on demand.

It he said surety do solemnly affirm that I am solvent to the extent of the amount of 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

(II). In consideration of the Surety Bond executed by the Student (Mr./Ms Son of/daughter of resident of......in favour of The **Registrar, KNRUHS, Warangal** and the **Principal, Govt. Medical College, NARSAMPET,WARANGALDIST** to a sum of Rs.20,00,000/-(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 fail stop yon demand a sum **Rs.20,00,000/-** (Rupees Twenty lakhs only), I the said surety, shall, without any objection, pay the said due amount to the **Govt. Medical College, NARSAMPET, WARANGAL DIST** on demand.

It he said surety do solemnly affirm that I am solvent to the extent of the amount of surety and I have been regularly filing income tax return.

(Attach self-attested copies of PAN and Aadhaar)

Signature
Name of the Surety
Present Address
Pin
Permanent Address:
Pin
Aadhaar No
PAN No
Mobile No

PROFORMAFORUNDERTAKINGINTHEFORMOFAFFIDAVIT(ONNO N-JUDICIALSTAMPPAPERSOFRS.100/-)

UNDERTAKING

Ι,	(Candidate Name)S/o. D/o	,
BearingUGNEET-2024RankNo	,and I,	(Parent
Name)F/o	(Candidate Name), Bearing UG N	EET Rank No.
TT 1 '	1 . 1 . 1	

______Hereby give an undertaking as below in connection with our claim with regards to certificates submitted for admission into UG Medical Course for the academic year 2024-25 in Colleges affiliated to Kaloji Narayana Rao, University of Health Sciences.

We, hereby declare that all our **<u>Certificates are genuine</u>**.

I am aware that if the submitted relevant certificates (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 **Kaloji Narayana Rao University of Health Sciences (KNRUHS), Warangal**

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

(Attach self-attested copies of PAN and Aadhaar)

Signature of the Parent / Guardian	
Candidate. Aadhar No.	
Mobile No.	
Address.	

Signature of the

Dated. Place.

<u>GOVERNMENTOFTELANGANA</u> GOVERNMENTMEDICALCOLLEGENARSAMPET,WARANGALDIST. NEW UNDER GRADUATE (MBBS COLLEGE FEE STRUCTURE)

Sl.No.	Description	OC/BC	SC/ST	Frequency
1	Tuition Fee	₹ 10,000.00	₹ 10,000.00	Yearly
2	CDS	₹ 5,000.00	₹ 5,000.00	One Time
3	E-Library	₹ 2,000.00	₹ 2,000.00	Yearly
4	Central Stores	₹ 2,000.00	₹ 2,000.00	One Time
5	Library Fee	₹ 2,000.00	₹ 2,000.00	Yearly
6	Caution Deposit	₹3,000.00	₹3,000.00	One Time
7	Academic Development Fund	₹3,000.00	₹ 1,000.00	One Time
8	Non–Government Fund	₹ 2,000.00	₹ 2,000.00	One Time
	TOTAL	₹ 29,000.00	₹27,000.00	

Demand Draft in Favour of <u>"PRINCIPAL GOVERNMENT MEDICAL COLLEGE, NARSAMPET,</u> WARANGAL DIST",

Payable at NARSAMPET, WARANGAL DIST from any Nationalized Bank.

HOSTEL FEES

Sl.No.	Description	Amount	Frequency
1	Non-Refundable Amount	₹ 5,000.00	One Time
2	Caution Deposit(Refundable)	₹ 5,000.00	One Time
3	Rent(Rs.1000/-PerMonth-12Months)	₹ 12,000.00	Yearly
4	Hostel Admission Application Fee	₹ 1,000.00	One Time
	TOTAL	₹ 23,000.00	

Demand Draft in Favour of<u>" PRINCIPAL GOVERNMENT MEDICAL COLLEGE, NARSAMPET,</u> WARANGAL DIST",

Payable at NARSAMPET, WARANGAL DIST from any Nationalized Bank.

UNIVERSITY FEE(FOR AIQ Students Only)

Sl.No.	Description	Amount
01	University Fee	₹ 12,000.00

Demand Draft in Favour of <u>" The Registrar KNR University of Health Sciences, Warangal"</u>, Payable at Warangal.

Processing Charges of **Rs.2000**/-(Two Thousand Rupees only) Demand Draft in favour of the **Principal, Government Medical College, NARSAMPET, WARANGAL DIST Payable at NARSAMPET, WARANGAL DIST** (Non - Refundable).

**Note. All DD (Demand Draft) Must be Drawn from a Nationalized Bank Only.



GOVERNMENT MEDICAL COLLEGE NARSAMPET, WARANGAL DIST REQUISITION FOR IDENTITY CARD

To be filled in BLOCK LETTERS

01.	Name of the Student	:
02.	Department/Course	:
03.	Batch	:
04.	Date of Birth	:
05.	Blood Group	:
06.	Full Permanent Address	
	With Pin Code	:

Affix Recent Passport Size Photograph

07. Mobile Number :

Kindly Issue Identity Card.

Signature of the Student.

Admn. Officer (Academic) Govt. Medical College, Narsampet, Warangal Dist

<u>ANNEXURE I</u> AFFIDAVIT BY THE STUDENT

I -----Registration No. ------

S/o, D/o------, having been admitted to Government

<u>Medical College, Narsampet, Warangal district</u>, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions 2009. (Here in after called the "Regulations") carefully read and fully understood the provisions constrained in the said Regulations.

2) I have, in particular, per used clause 3 of the Regulations and am aware as to what fully constitutes ragging.

3) I have also, In particular, Per used 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 ever 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 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 form 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 that 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 the Student Name:

<u>ANNEXURE – II</u> AFFIDAVIT BY PARENT / GUARDIAN

1) Mr./Mrs./Ms._____(full name of parent / guardian) father / mother / guardian of ______

(full name of student with admission / registration / enrolment number) having been admitted to **<u>Government Medical College, Narsampet, Warangal District</u>** 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 constrained in the said Regulations.

2) I have, in particular, per used clause 3 of the Regulations and am aware as to what fully constitutes ragging.

3) I have also, In particular, Per used 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 ever and under take that

a) Mywardwillnotindulgeinanybehaviororactthatmaybeconstitutedasraggingunderclause 3 of the Regulations.

b) Mywardwillnotparticipateinorabetorpropagatethroughanyactofcommissionoromission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, my ward liable for punishment according to clause

9. 1of 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 form 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 that 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 the Parent Name: Address:

Telephone/Mobile No.

UG Admissions 2025-26 Student details for Admission register

NEET Rank NEET Ht. No. **KNRUHS Rank** Full Name as per SSC Father Name as per SSC Mother Name Gender Address Category Sub Caste Local/Non Local Date of Birth Admission details **Mobile Number** Student: Father: Mother: **Email ID** Aadhar Number **Identification marks Allotted Phase** NEET Marks obtained out of 720 SSC Board

Signature of the Student

РНОТО