

The Following Original Certificate submitting during the admissions of Super Specialty 2024-25 batch

1. Provisional Allotment Order MCC
2. NBE Admit Card
3. NEET SS Score Card
4. Permanent Medical Registrations MBBS & PG ().
(Telangana Registration Mandatory)
5. Provisional/ Permanent MBBS & PG Degree Certificates ().
6. Internship Certificate.
7. Bonafide (Study) and Conduct Certificate MBBS & PG ().
8. Memorandum of Marks (SSC/CBSC) 10th ()
9. Memorandum of Marks 12th ()
10. Memorandum of Marks / Consolidated Memo MBBS & PG ().
11. Transfer Certificate MBBS & PG
12. Migration Certificate MBBS & PG
13. Bond of Rs.50,00,000/- + 5,00,000/-
14. Social Status
15. Service Certificate
16. Aadhar Card Xerox
17. FMG Screening Test (if MBBS or PG Done in out of India)

Note: 1. The above originals Two set of Xerox copies must be submit at the time of reporting in the above sequel

2. The above originals Scan copies have to mail this mail ID:

omcadmissionspg@gmail.com

2. Candidates those who want to give willingness for up-gradation conformation for SS round-2, while reporting round-1 seat, have submitting their willingness on the their Provisional Allotment Order issued by the MCC by writing that **“Yes I am will for up-gradation for round -2”** if your not will for up-gradation **“Not I am not will for up-gradation round -2”**

Super Speciality ADMISSIONS 2024-25 fee datials

- 1. Rs. 20,000/- Demand Draft in favor of College Development Society, Hyd (CDS) (A/c. No. 52197213213, SBI, OMC Br., Hyd).**
- 2. Rs. 10,000/- Demand Draft in favor of Academic Development Fund, Hyd (ADF) (A/c. No. 52197213451, SBI, OMC Br., Hyd).**

Note: above DD's Submit at CDS Section & take Slip

- 3. Rs.45000/- Demand Draft in favor of the Registrar KNRUHS, Warangal.**
- 4. Rs.2000/- Demand Draft in favor of E-library OMC, Hyd**
- 5. Rs.5000/- Demand Draft in favor of the Registrar KNRUHS, Warangal for Other State candidates only. for (E.C.)**

Principal
Osmania Medical College,
Hyd

ANNEXURE-II
(NON- JUDICIAL STAMPED PAPER OF Rs.100/-)
(FOR NON-SERVICE CANDIDATES)

I, Dr. _____, selected for super specialty course _____ for the year 2023-24 do hereby undertake to serve the Government of Telangana by working in Government Hospitals for a period of two years after successful completion of super specialty course (If required). In case If I fail Join as Senior Resident or in case of not completing two years of service within maximum period of 36 months. I undertake to pay a sum of Rs.**50,00,000/-** (Rupees **Fifty Lakhs** only) to Government.

DATE:

Signature of Parent
Aadhar No & Address

Signature of the Candidate
Aadhar No & Address

Witness

Witness

1 Signature
Name and address full

1 Signature
Name and address full

2. Signature
Name and Address full

2. Signature
Name and Address full

Note: 1. The Bond format shall be typed on the Non Judicial Stamped paper.
2. Two sureties – only by Gazetted Officer/Income Tax Payee
3. Also enclose self-attested copies of PAN & Aadhar of the Sureties 02 different (Not Blood Relation) persons and Aadhar of the Witnesses 4 different persons

ANNEXURE-II

(TO BE FILLED BY TWO SURETIES)

Surety 1

In consideration of the Surety Bond executed by the student (Dr. _____ Son / daughter of _____ resident of _____ in favor of The Registrar, KNRUHS, Warangal and the Principal of Osmania Medical College, Hyderabad to a sum of _____ Rs. 50,00,000/- only (Rupees Fifty 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 candidate fails to pay on demand a sum of Rs. 50,00,000/- only (Rupees Fifty lakhs only), I, the said surety, shall, without any objection, pay the said due amount to the Osmania Medical College, Hyderabad on demand.

I the 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.:

Surety 2

In consideration of the Surety Bond executed by the student (Dr. _____ Son / daughter of _____ resident of _____ in favor of The Registrar, KNRUHS, Warangal and the Principal of Osmania Medical College, Hyderabad to a sum of Rs.50,00,000/- only (Rupees Fifty 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 candidate fails to pay on demand a sum of Rs. 50,00,000/- only (Rupees Fifty lakhs only), I, the said surety, shall, without any objection, pay the said due amount to the Osmania Medical College, Hyderabad on demand.

I the 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.:

ANNEXURE-
(NON- JUDICIAL STAMPED PAPER OF Rs.100/-)
(FOR ALL CANDIDATES)

I, Dr. _____ , selected for super specialty course _____ 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 the **KNR University of Health Sciences** a sum of Rs. **5,00,000/-** (Rupees **Five Lakhs** Only) and refund the amount received as stipend upto that date to Government.

DATE:

Signature of Parent
Aadhar No & Address

Signature of the Candidate
Aadhar No & Address

Witness

1 Signature
Name and address full

2. Signature
Name and Address full

Note: 1. The Bond format shall be typed on the Non Judicial Stamped paper.
2. Two sureties – only by Gazetted Officer/Income Tax Payee
3. Also enclose self-attested copies of PAN & Aadhar of the Sureties 02 different (Not Blood Relation) persons and Aadhar of the Witnesses 4 different persons

ANNEXURE-
(TO BE FILLED BY TWO SURETIES)

Surety 1

In consideration of the Surety Bond executed by the student (Dr. _____ Son / daughter of _____ resident of _____ in favor of The Registrar, KNRUHS, Warangal and the Principal of Osmania Medical College, Hyderabad to a sum of Rs. 5,00,000/- only (Rupees Five 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 candidate fails to pay on demand a sum of Rs. 5,00,000/- only (Rupees Five lakhs only), I, the said surety, shall, without any objection, pay the said due amount to the Osmania Medical College, Hyderabad on demand.

I the 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.:

Surety 2

In consideration of the Surety Bond executed by the student (Dr. _____ Son / daughter of _____ resident of _____ in favor of The Registrar, KNRUHS, Warangal and the Principal of Osmania Medical College, Hyderabad to a sum of Rs.5,00,000/- only (Rupees Five 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 candidate fails to pay on demand a sum of Rs. 5,00,000/- only (Rupees Five lakhs only), I, the said surety, shall, without any objection, pay the said due amount to the Osmania Medical College, Hyderabad on demand.

I the 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.:

ANNEXURE – III

(NON - JUDICIAL STAMPED PAPER OF RS. 100/-)

UNDERTAKING

I, (Candidate name) S/o / D/o._____, bearing NEET SS 2022-23 Rank No_____ and Hall Ticket No_____ hereby give an undertaking as below in connection with our claim with regard to certificates submitted for admission into Super Speciality Course for the A/Y 2022-23 in Colleges affiliated to KNR University of Health Sciences.

I, hereby declare that all my 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 into legal litigation, if the seat allotted to me is cancelled, for the above reasons.

Date:

Place:

Signature of the Parent
Full Address
Aadhar No
Phone No

Signature of the Candidate
Full Address
Aadhar No
Phone No



KALOJI NARAYANA RAO UNIVERSITY
OF HEALTH SCIENCES, TELANGANA,
WARANGAL-506007



OSMANIA MEDICAL COLLEGE,
KOTI, HYDERABAD

Scanned latest Colour
Photo of the Candidate

DETAILS OF THE CANDIDATE ADMITTED INTO SS (D.M./M.Ch.) COURSE FOR THE ACADEMIC
YEAR 2024-25

S.No.:	NEET Rank :	NEET Roll NO :	
Student Name (Block Letters, AS PER MBBS/PG CERTIFICATE) :			
Father's Name: (As per the 10th /12th Certificate)			Gender:
Address: Full Address with Land mark and pin code			
Category/Caste:	Local/Non-Local:		
	DOB (DD/MM/YYYY):		
AWARD (Ex.D.M. /M.Ch.):	SERVICE/NON-SERVICE:		
Qualifying Examination Board: NEET	Allotted Quota (AIQ) :		
Allotted course:			
Allotted Details as per			
Site/College Code: 001			
College name as per letter head: OSMANIA MEDICAL COLLEGE, KOTI, HYDERABAD			
Name of the Institution last studied: (As per MBBS Degree/Bonafide Certificate)			
Date Of Completion Of Internship:			
Mobile Number (10 Digits Only):			
Email ID:			
Aadhaar Number:			
Total Marks Obtained in NEET Eligibility Exam:		Maximum Marks in NEET Eligibility Exam:	
Identification Marks (As per SSC/Birth Certificate)	1)		
	2)		
Signature of the Candidate	Signature of the Principal along with the Official Seal		