



Narayana Medical College

Chinthareddypalem, Nellore – 524 003, A.P.

Tel. No.:0861-2317963; Fax : 0861-2317962

Recognized by MCI / Govt. of India vide Lr.No.U.12012/93/1994-ME(P-II), dt:12.07.2006 &

F.No. U.12012/189/2005-ME(P-II), dt: 26.06.2012.

Affiliated to Dr.NTR University of Health Sciences, Vijayawada, A.P.

Serial No:

Regd. No.:

**APPLICATION FORM FOR ADMISSION INTO MEDICAL PG DEGREE / DIPLOMA COURSES
UNDER MANAGEMENT QUOTA
FOR THE ACADEMIC YEAR 2014-15**

NAME OF THE CANDIDATE
(IN BLOCK LETTERS)

.....

COURSE APPLIED FOR

.....

Application form for admission into Medical PG Degree / Diploma courses – 2014-15

Note : Please fill in each column in your own handwriting, put tick mark (✓) wherever necessary and strike off the portion not applicable. Incomplete application forms will be rejected summarily.

1. a) Name of the candidate :
(IN BLOCK LETTERS)
- b) Expand the initials :
- c) Address with Pin code to :
which communication to
be sent
- d) Phone No. with STD code :Residence:
- Mobile :

2. a) Father's Name & Occupation :
- b) Mother's Name & Occupation :

3. Sex : Male Female
4. Date of birth and age :
5. Place of birth, District and State :
6. a) Nationality and Religion :
- b) Community

SC	ST	OBC	OTHERS
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- c) Sub-Caste Name :
7. a) Name and address of the Medical :
College where qualified
- b) Whether the Medical college is : Recognized Not Recognized
recognized by MCI
8. Qualifying examination MBBS / :
Equivalent passed (Photo copy of
Degree Certificate, Statement of
Marks of all Examinations &
Consolidated Statement of Marks,
Equivalence Certificate if applicable
to be enclosed.)

9. Marks secured in MBBS / Equivalent Degree Course:

Course	Subject (s)	Marks secured	Maximum marks	Month & Year of Passing	No. of attempts
I MBBS					
II MBBS					
FINAL MBBS PART-I					
FINAL MBBS PART-II					
GRAND TOTAL				Percentage of Marks	

10. Registered /H.T. No., Month and Year : Regd./H.T. No. :
of passing of qualifying Examination Month :
(MBBS / Equivalent Degree course) Year :

11. a) Whether the candidate has passed : Yes No
all the examinations in the first
attempt during MBBS Degree
course

b) If No, how many attempts were made to pass:

MBBS Exam	No. of attempts	Year of Pass
1 I – MBBS	-	
2 II – MBBS	-	
3 Final MBBS Part-I	-	
4 Final MBBS Part-II	-	

12. Name of the University which :
Awarded MBBS Degree

13. a) Period during which Internship : From to
was completed.
(Attested copy of Internship
completion certificate should
be enclosed).

14. Details of Medical Council : State
Permanent Registration Regn. No. & Date

Declaration by the candidate

I declare that the information furnished by me herein is true and correct. In case of any information furnished herein is found to be incorrect, I agree to forego my claim for admission. I shall be liable to make good financial loss incurred by the institution on this account.

Place :

Date :

Signature of the Candidate

Note: 1) This application should be submitted along with the documents mentioned in the list of documents. A non refundable application fee of Rs.5,000-00 shall be paid by Cash in the college office.

Last date for submission of application along with enclosures : 22nd March, 2014 4.00 P.M.

Read contents of the information brochure thoroughly before filling the application.

2) Candidates admitted to a PG course shall execute a bond to serve the Government for a period of one (1) year within a maximum period of 18 months after obtaining the PG Degree / Diploma. If they violate the bond condition, a penalty of Rs. 15,00,000/- on the Diploma candidates and Rs. 20,00,000/- on the PG Degree candidate shall be levied (G.O. Ms. No. 40 and 43, HM & FW (E2) Dept. dt: 10.02.2010).

List of attested documents (attestation should be done by Gazetted Officer) to be submitted along with application form:

1. S.S.C. Certificate / Date of Birth Certificate
2. MBBS / Equivalent Degree Certificate
3. P.G.Diploma Certificate (If applicable)
4. All Statement of Marks of MBBS / Equivalent Degree
5. Consolidated Marks during MBBS / Equivalent (Transcripts)
6. Study certificate of MBBS / Equivalent course
7. Attempt Certificate MBBS / Equivalent Degree
8. Permanent Registration from State Medical council
9. Internship completion certificate should be on or before 31.03.2014
10. Conduct and Character Certificate from the college in which last studied
11. Transfer Certificate from the college in which last studied
12. Migration Certificate (If applicable)
13. Verification fee of Rs. 1,000/- in the form of Demand Draft drawn in favour of “ The Registrar, Dr. NTR University of Health Sciences’ payable at Vijayawada for candidates qualified from Universities other than Dr. NTR UHS.
14. Verification fee of Rs. 5,000/- in the form of Demand Draft drawn in favour of “ The Registrar, Dr. NTR University of Health Sciences’ payable at Vijayawada for candidates qualified from Abroad Universities (other than Indian Universities).
15. Passport size Photographs – 12 Nos.
16. Bank Guarantee for the Tuition fee
17. Study Bond to Management
18. Study Bond to Dr. NTR UHS
19. Service Bond to Government

(Non-Judicial stamped paper for Rs.100-00)
 (STUDY BOND for Candidates –
P.G. Degree / Diploma **Clinical courses - Management Quota**)

I, Dr. _____ selected for _____
 _____ Post Graduate Degree/Diploma course for the year 2014-15 and admitted in Narayana Medical College, Nellore under management quota do hereby undertake to complete the said course as per the requirements of the University. In the event of my discontinuation the studies after joining the course or without completing the stipulated period of the above said course, I undertake to pay to the Principal, Narayana Medical College, Nellore a sum of **Rs.5,25,000-00 per annum for the remaining period of the course from the date of discontinuation.**

Date :
 Witness :
 1. Signature :
 Name and Address in full

Signature of the Candidate
 Sureties
 1. Signature :
 Name and Address in full

2. Signature :
 Name and Address in full

2. Signature :
 Name and Address in full

N.B.: 1. One of the Sureties should be father / mother / guardian.

(Non-Judicial stamped paper for Rs.100-00)
 (STUDY BOND for **Non-Service** Candidates –
P.G. Degree **Para-Clinical** courses - **Management Quota**))

I, Dr. _____ selected for _____
 _____ Post Graduate Degree/Diploma course for the year 2014-15 and admitted in Narayana Medical College, Nellore under management quota do hereby undertake to complete the said course as per the requirements of the University. In the event of my discontinuation the studies after joining the course or without completing the stipulated period of the above said course, I undertake to pay to the Principal, Narayana Medical College, Nellore a sum of **Rs.1,70,000-00 per annum for the remaining period of the course from the date of discontinuation.**

Date :
 Witness :
 1. Signature :
 Name and Address in full

 2. Signature :
 Name and Address in full

Signature of the Candidate
 Sureties
 1. Signature :
 Name and Address in full

 2. Signature :
 Name and Address in full

N.B.: 1. One of the Sureties should be father / mother / guardian.

(Non-Judicial stamped paper for Rs.100-00)
 (STUDY BOND for **Non-Service** Candidates –
P.G. Degree **Pre-Clinical courses** - Management Quota))

I, Dr. _____ selected for _____
 _____ Post Graduate Degree/Diploma course for the year 2014-15 and admitted in Narayana Medical College, Nellore under management quota do hereby undertake to complete the said course as per the requirements of the University. In the event of my discontinuation the studies after joining the course or without completing the stipulated period of the above said course, I undertake to pay to the Principal, Narayana Medical College, Nellore a sum of **Rs.60,000-00 per annum for the remaining period of the course from the date of discontinuation.**

Date :

Witness :

1. Signature :

Name and Address in full

Signature of the Candidate

Suretias

1. Signature :

Name and Address in full

2. Signature :

Name and Address in full

2. Signature :

Name and Address in full

N.B.: 1. One of the Sureties should be father / mother / guardian.

SERVICE BOND

(Non-Judicial stamped paper for Rs.100-00)
(For Non-Service Candidates)

I, _____ selected for PG Degree/ Diploma Course for the year 2014-15 do hereby undertake to serve the Government of Andhra Pradesh by working in the public sector Hospital as a Senior Resident for a period of one year after successful completion of the PG Degree/ Diploma Course. If I fail to join as senior resident or not completing one year of service with in a maximum period of 18 months, I undertake to pay a sum of Rs.20,00,000/- / Rs. 15,00,000/- (Rupees Twenty lakhs only/Rupees Fifteen Lakhs only) to Government.

Date :

Signature of the Candidate

Witness :

Suretias

1. Signature :

1.Signature :

Name and Address in full

Name and Address in full

2. Signature :

2.Signature :

Name and Address in full

Name and Address in full

- N.B.:** 1. The bond format shall be typed on the Non Judicial stamped paper.
2. Sureties should be of two permanent Gazetted Officers of Andhra Pradesh Government.

STUDY BOND

(Non-Judicial stamped paper for Rs.100-00)

For all candidates

I, Dr. _____ selected for Post Graduate Degree / Diploma _____ for the year 2014-15 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 Dr. N.T.R. University of Health Sciences a sum of Rs.50,000-00 (Rupees Fifty Thousand Only) and refund the amount received as stipend up to that date to Government.

Date :

Signature of the Candidate

Witness :

Sureties

1. Signature :

1. Signature :

Name and Address in full

Name and Address in full

2. Signature :

2. Signature :

Name and Address in full

Name and Address in full

- N.B.:**
- 1. The bond format shall be typed on the Non Judicial stamped paper.**
 - 2. Sureties should be of two permanent Gazetted Officers of Andhra Praesh Government.**

B.G.No.:
 Date of Issue :
 B.G. amount :
 Date of Expiry :

IRREVOCABLE BANK GUARANTEE
 (for PG Degree Clinical)

We, Bank, having its Branch at (hereinafter to be referred as BANK) do hereby issue this irrevocable Bank Guarantee at the request, upon application and on behalf of Mr. / Ms., S/o. / D/o. (hereinafter to be referred as 'STUDENT') in favour Narayana Educational Society, represented by its Secretary, Narayana Medical College, Chinthareddypalem, Nellore – 524 003, Andhra Pradesh (hereinafter to be referred as 'BENEFICIARY')

WHEREAS the above named student got admitted into PG Degree (Clinical) course with the subject MD / MS for the academic year 2014-15 for the duration of full course of three years in the Beneficiary Institute and paid the 1st year fee of Rs.5,25,000/- and is also obligated to pay the balance fee of Rs.10,50,000/- for the remaining 2nd and 3rd year period of course.

WHEREAS as per the conditions for admission and Rules governed thereunder, the Student is required to furnish an Irrevocable Bank Guarantee to the Beneficiary from any Nationalized Bank to protect the interest of the Beneficiary in the event of any default of the Student in payment of balance fee during the entire course.

Hence, in the event of default on the part of the student in payment of balance fee of rs.10,50,000/- or any part thereof during the balance course period, the Bank on behalf of the student thereby irrevocably, unequivocally and unconditionally agrees and undertakes to pay forthwith the said sum of Rs.10,50,000/- or part thereof the Beneficiary without any condition, protest demur or proof and without reference to the student and irrespective of and notwithstanding any contest / objection from the student or the existence of any dispute between the student and the beneficiary upon the beneficiary invoking this Bank Guarantee with the letter of Invocation by surrendering this Original Bank Guarantee to the Bank. The Bank agrees to make the payment of invoked amount to the Beneficiary simultaneously on the Beneficiary submitting the Letter of Invocation along with Original Bank Guarantee.

The Bank further agrees that this Guarantee shall constitute an independent and autonomous contact between the Bank and the Beneficiary and shall not in any way be affected by any dispute or difference between you viz., the Beneficiary and the student of whatsoever nature.

Finally, the Bank confirms that a mere letter from the Beneficiary that there has been a default on the part of the Student in payment of the fees, shall without any other or further proof be final, conclusive and binding on the Bank to treat the same as a valid invocation and for making the simultaneous payment of the demanded amount upto the maximum of rs.10,50,000/-.

This Bank Guarantee shall remain in force upto 31.05.2017 and all claims should be received by the Bank on or before the said date.

* For Pre and Para clinical the Bank Guarantee shall be as per the Tuition Fee.