



Dr. PATNAM MAHENDER REDDY INSTITUTE OF MEDICAL SCIENCES

Chevella (Village & Mandal), Rangareddy (Dist), Telangana-501 503. Permitted by NMC/MCI, Govt. of India vide Lr.No.MCI-34(41)/2019-Med./108799, dt:02.05.2019. Affiliated to Kaloji Narayana Rao University of Health Sciences, Warangal, Telangana.

PG (CLINICAL) FEE & PAYMENT DETAILS

PG (CLINICAL) FIRST YEAR (to be paid at the time of Admission)

Cat-B-Tuition Fee: Rs. 23,00,000/- [DD]

Cat-C(NRI)-Tuition Fee: Up to 3 Times of Cat-B Tuition Fee [DD]

Fee other than Tuition Fee: Rs.75,000/- [DD]

MICROBIOLOGY: Cat-B - 5,30,000/-

Cat-C (NRI): Up to 3 Times of Cat-B Tuition Fee

PATHOLOGY: Cat-B - 5,30,000/-

Cat-C (NRI): Up to 3 Times of Cat-B Tuition Fee

Payment Details:

- Demand Draft in Favor of “**DR PATNAM MAHENDER REDDY
INSTITUTE OF MEDICAL SCIENCES**”

Payable at **Telangana**.

For Details Contact:

Mr. K. VINODH REDDY

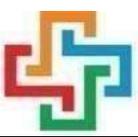
-- Phone No: 8688315735.

Mr. T. VIJAY BHASKAR REDDY

--Phone No: 8688315739.

Email id: pmrims@gmail.com

Website: WWW.PMRIMS.COM



LIST OF CERTIFICATES/DOCUMENTS FOR SUBMISSION WITH APPLICATION FORM

- 1) University Allotment Letter.
- 2) NEET Merit Card.
- 3) 3) NEET Hall Ticket.
- 4) S.S.L.C./S.S.C/Senior Cambridge/Certificate showing the Date of Birth. (Long Memo)
- 5) Intermediate (Long Memo).
- 6) Transfer Certificate from the Medical College.
- 7) M.B.B.S Original Certificates/ Provisional Certificate.
- 8) 4 Yrs MBBS Memo of marks & Study certificate.
- 9) Internship Completion Certificate.
- 10) Transcript of Memorandum of marks issued by university.
- 11) M.B.B.S. Registration Certificate issued by TSMC.
- 12) Migration Certificate in case of university other than KNRUHS.
- 13) 06 latest Passport size & 04 stamp size photographs
- 14) Latest Social Status Certificate issued through Mee Seva.
- 15) Minority Certificate issued by Competent Authority of Government of Telangana if applicable (CQ quota)
- 16) Copy of PAN card
- 17) Copy of Address proof Aadhar Card /Passport/Driving License/Voter's ID
- 18) Discontinuation Certificate if applicable.
- 19) Undertaking on Rs. 100/- Non-Judiciary Stamp paper as per Prospectus of KNRUHS in case of discontinuation of course as per enclosed format (With Signatures of two witness & Notary)
- 20) Service Bond for Non-Service Candidates –
- 21) Declaration by In-service Candidate –
- 22) Service Certificate to Be Considered for P.G. Medical Selection as Per Government Orders Annexure III B
- 23) Anti-ragging bonds on 100/- Non – Judiciary Stamp paper by the student and parent.
- 24) Bank Guarantee for 2nd year.
- 25) Candidates seeking admission in NRI quota (MQ2) 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.
 - NRI Sponsorship certificate (DECLARATION Form)
 - NRI status certificate of the financial supporter issued by embassy of respective country under their seal.
 - Copy of NRI latest Bank account pass book of the financial supporter. (for last 1 year)
 - Copy of Pass port of NRI financial supporter
- 26) 10 years Residency proof/Study certificate for non-Local candidates claiming unreserved quota seats (Who studied MBBS outside AP/TS or other country)
- 27) 2 Sets of Xerox copies all certificates (1 Set self-attested)
- 28) Payment may be made by DD/ RTGS/ NEFT as per the details given.
- 29) Genuinity Bond (Undertaking notarized)

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

I, Dr S/o, D/o..... Selected for Post Graduate Degree/Diploma for the year 2025-26 do here by undertake to complete the said course as per the regulations of the university and Government rules for admissions. In the event of my leaving the studies after joining the course, I undertake to pay to KNR University of Health Sciences a sum of Rs. 50,00,000/- (Rupees fifty lakhs only) and refund the amount received as stipend up to that date to Government of Telangana.

Signature of the Candidate
Name and address in full

Date:
Witness:

➤ Signature:

Name and address in full
Mobile. No
Mail. Id:

Name and address in full
Mobile. No
Mail. Id:

➤ Signature

Name and address in full
Mobile. No
Mail. Id:

Signature of parent

Name and address in full
Mobile. No
Mail. Id:

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

**(Non-Judicial Stamped paper for Rs.100/-)
(FOR NON-SERVICE CANDIDATES)**

I, _____ Selected for Post Graduate Degree/Diploma
Courses for the year 2025-26 do here by undertake to serve the _____
(Institution where they pursued the course) as a Senior Resident for a Period of one year after successful completion of the
PG Degree / Diploma Course.

Signature of the Candidate
Name and address in full

Date:

Witness:

1. Signature:

Name and address in full

Mobile. No

Mail. Id:

Name and address in full

Mobile. No

Mail. Id:

2. Signature

Name and address in full

Mobile. No

Mail. Id:

Signature of parent

Name and address in full

Mobile. No

Mail. Id:

N.B : 1. The Bond format shall be typed on Rs – 100/- Non Judicial stamped paper.

AFFIDAVIT BY THE STUDENT Rs.20/- Bond

I, _____, Admin. No. _____

S/o. / D/o _____, having been admitted to Dr. PATNAM MAHENDER INSTITUTE OF MEDICAL SCIENCES, CHEVELLA (V&M), RANGAREDDY -501503 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, in particular, perused 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.
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 and www.amanmovement.org.
Declared on this Date: _____ .

Signature of deponent

Name:

Address: Mobile.

No:

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

AFFIDAVIT BY THE PARENT Rs.20/- Bond

I, _____, F/o / M/o. _____

Admn. No. _____, having been admitted to

Dr. PATNAM MAHENDER REDDY INSTITUTE OF MEDICAL SCIENCES, CHEVELLA (V&M), RANGAREDDY – 501503 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, in particular, perused 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 my ward in case he is 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 and www.amanmovement.org.

Declared on this date: _____ .

Signature of deponent Name:

Address: Mobile

No:

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

Undertaking Genuinity Bond

PROFORMA FOR UNDERTAING IN THE FORM OF AFFIDAVIT

(ON NON- JUDICIAL STAMP PAPERS OF RS.100/-)

UNDERTAKING

I..... S/o / D/o,

bearing PG NEET 2025 Rank No

and

I.....M/o/ F/o , bearing

PG NEET 2025 Rank No hereby give an undertaking as below, in connection with our claim with regard to certificates submitted for admission into PG Medical course for the Academic year 2025–26 in colleges affiliated to KNR University of Health Sciences. We, hereby 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 into 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 :

Aadhar No :

Address :

Address :

Date (DD/MM/YYYY):

Place:

B.G. No.:

Date of Issue:

B.G.Amount:Rs23,00,00/-

Date of expiry: 30/09/ 2026

IRREVOCABLE BANK GUARANTEE

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 favor of (College Name with full address), represented by its Dr. Patnam Mahender Reddy Institute of Medical Sciences, Chevella, Ranga Reddy, Telangana [herein after to be referred as **'BENEFICIARY' "INSTITUTE"**].

WHEREAS the above-named Student got admitted into 1st PG Course for the academic year 2024-25 and paid the 1st year fee of Rs./-. (Rupees) and is also obligated to pay the fees of Rs./- for the remaining period of the course as

follows on -

1. Second year fee payable on or before 1st OCTOBER -2026, Rs./- (Due date of Payment of Fees)
2. Third year fee payable on or before 1st OCTOBER -2026, Rs./- (Due date of Payment of Fees)

WHEREAS as per the conditions for admission, 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 as above during the entire course.

Hence in the event of default on the part of the student in payment of fee of Rs./- per year for 2nd year period i.e.1st OCTOBER -2026, Rs./- (Due date of Payment of Fees)

or any part thereof during the balance course period of PG, the Bank on behalf of the student hereby irrevocably, unequivocally and unconditionally agrees and undertakes to pay forthwith the said sum of Rs./- or part thereof to the Beneficiary without any condition, protest, demur or proof and without reference to any consent of 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 for any part amount of the 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 for any part amount of the Bank Guarantee.

Not with standing anything contained herein, the bank further under takes to pay the full amount of the bank guarantee to the beneficiary without any reference to the due date of the payment of the fee structure as mentioned in the guarantee, simultaneously on the beneficiary submitting the letter of invocation along with the original bank guarantee.

The Bank further agrees that this Guarantee shall constitute an independent and autonomous contract 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 along with submission of the original Bank Guarantee for making the simultaneous payment of the demanded amount up to the maximum of Rs. _____/- all claims should be received by the Bank on or before within three months from the said date.

The Bank's liabilities under this guarantee is restricted to Rs. _____/- (Rupees:.....Only) and the guarantee shall remain in force up to dt. 30 /09/2026. Unless a claim is made on the Bank within three months from the said date i.e. 31 /12/2026 all the claims' rights and interest etc. Whatsoever of the Institute Dr. Patnam Mahender Reddy Institute of Medical Sciences, Chevella, Ranga Reddy, under this guarantee shall be lapsed and shall have no right to enforce this guarantee and the Bank shall be relieved and discharged from all liabilities there from.

Notwithstanding anything contained Herein:

- A. Our Liability under this Bank Guarantee shall not exceed
Rs..... (Rs Only).
- B. This Guarantee shall be valid up to 30 /09/2026
- C. We are liable to pay the guarantee amount or any part thereof under this Bank Guarantee only and only if you serve upon us a written claim or demand received by us on/or before 31 /12/2025
- D. (Date of expiry of claim period of guarantee).

Dated:

THE BRANCH MANAGER, _____ BANK, _____ BRANCH.

DECLARATION BY CANDIDATE

(Non-Judicial Stamped paper for Rs. 20/-)

I, Dr.S/o, D/o_____ selected for Post Graduate Degree in MD/MS_____for the year 2025-2026 under Management Quota MQ-1, MQ-2 Categories) at _____Medical College affiliated to KNRUHS. I do hereby declare that I am not admitted into PG Medical Course in any Medical College in the country at present which amounts to seat blocking. I have been informed by the principal that in the event of detection at a later date of the candidate being admitted in any other Medical College for PG 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

Signed in my presence Attested by

Principal of the College with seal

Annexure-1
DECERALTION

(This declaration is to be given by a student/parent/Blood Relative (family member) who is seeking admission under NRI category (Management quota of NRI)

I, Mr./Ms.....NEET-2025 P G Roll No _____ Rank
NEET-2025(PG) Son/daughter of Mr./ Ms seeking admission into UG
course in Management Quota (NRI quota seats) for the academic year 2025- 2026 into _____
Medical/Dental College of Telangana Private Non- Minority / Minority Medical & Dental Colleges do hereby
declare and state as under:

I declare that I am Son/Daughter/Niece/Nephew/Brother/Sister of

Mr/Ms.....S/o.....R/o.....

.....(here incorporate
the complete address of NRI to whom the candidate is related).

I declare that the said family member NRI is paying my fee for my UG course and I further declare that the above
facts stated are true and correct and I am liable for any action in the event of concealment of facts.

Hence, this declaration.

(Signature of the Candidate)

I,..... S/o here declare and confirm that the above
candidate viz., Mr/Ms.....is related to me as
Son/Daughter/Niece/Nephew/Brother/Sister and I hereby irrevocably agree and undertake to
provide finance support to him/her by payment of entire fees and other expenses for pursuing UG
course in the Medical/Dental College of Telangana State under KNR UHS.

Date:

(Signature of the NRI)

NOTARY