



**KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES,
TELANGANA:: WARANGAL
UG AYUSH ADMISSIONS 2019-20**

PROFORMA FOR BOND UG AYUSH (ON NON-JUDICIAL STAMP PAPER FOR Rs.100/-)

I, Mr/Ms. _____ S/o: _____ D/o: _____
_____ selected for UG AYUSH Course do hereby undertake to complete the course as per the requirements of KNR University of Health Sciences, in the event of my discontinuing the studies after joining the course after the date for free exit , I undertake to pay KNR University of Health Sciences, a sum of Rs. 1,00,000 (Rupees One Lakh only).

Signature of the Candidate

I, Mr/Mrs. _____ parent of
Mr/Ms. _____ do hereby undertake to pay KNR University of Health Sciences, a sum of Rs. 1,00,000 (Rupees One Lakh only) in case of discontinuation of UG AYUSH Course after joining after the date for free exit by my Son/Daughter.

Date:

Signature of Parent

Witness

1. Signature:

Name and Address in full.

2. Signature:

Name and Address in full.