

Execution of bonds by Candidates

Execution of bond by Candidates who select MBBS seats in Medical Colleges of Karnataka (On Rs.100/- e- Stamp Paper)

I, Mr. / KumS/o. /
D/o a candidate with 'NEET-2019'
Admission Ticket No..... residing at

.....
.....
.....
..... have on my own volition allotted a MBBS seat on In
..... vide admission order
number dated and do hereby undertake as follows:

In accordance with the Amendment to Rule 11 of the Karnataka Selection of Candidates for Admission to Government seats in Professional Educational Institutions Rules, 2006, vide Government Notification – 1. No.HFW 79 RGU 2011 dated 17-07-2017 and Amendment Act 2017 dated 06/07/2017.

I am prepared on completion of the course to serve in any Primary Health Center or Primary Health Unit situated in Rural Areas in the State of Karnataka for a minimum period of ONE YEAR, and I will abide to Rules and Regulation of Government of Karnataka.

What is stated above is true and correct and I and my Parent/Guardian hereby undertake to act accordingly.

Signature of the candidate

Date:.....

Place :.....

Signature of the Parent

(Father / Mother)

TO BE TYPED IN RS.50/- E-STAMP PAPER

UNDERTAKING

MBBS DEGREE PROGRAMME AS PER RGHUS CURRICULUM

I _____ So/Do of _____ (herein after called the Natural Guardian of the Student) hereby given an undertaking that on admission to I MBBS at **Belagavi Institute of Medical Sciences, Belagavi**, during the year _____, read the rule No.11 of the ordinance of Governing M.B.B.S. Degree Program of Rajiv Gandhi University of Health Sciences, Bangalore, vide Notification No. ACA/BOS-27/97-98, dated: 24.03.1998, and I shall abide / by the ordinance that reads that no student shall be permitted to join Phase-II (Para Clinical & Clinical) Group of subjects until he / she passes in the Phase-I (pre-clinical) subject for which he / she will be permitted not more than four chances (Actual Examination) provided four chances are completed within three years from the date of enrolment.

Signature of the student
with full address

Witness :

1)

2)

TO BE TYPED IN RS.20/- E-STAMP PAPER

UNDERTAKING CONCERNING RAGGING

I, Mr. / Kum S o
D/o seeking admission to MBBS Course
during the year of 2019-20 at Belagavi Institute of Medical Sciences, Belagavi hereby give undertaking
that;

1. I am aware of college approach towards ragging. That I am aware that ragging is banned in the college and any one found including in ragging is likely to be punished appropriately, which may include expulsion from the college.
2. I am aware of Definition of ragging: Any disorderly conduct whether by words spoken or written or by an act which as the effect of teasing or handling with rudeness any other student, indulging in rowdy or in-disciplined activities which causes or is likely to cause annoyance, hardship or psychological harm or to raise fear or apprehension thereof in a fresher or a junior student or asking students to do any Act or perform something which such student will not do in the ordinary course and which has the effect of causing or generating a sense of shame or embarrassment so as to adversely affect the physique or psyche of a fresher or a junior student.
3. I shall upon my own conscience, neither suffer nor make others suffer by virtue of my position and contribute my best in upholding the rich tradition of the professional course and sanctity of the campus.
4. I shall abide by the steps taken by the college to curb Ragging the Laws, Rules and Regulation framed for the purpose either by Government or University or College or any other Authority is binding on me.
5. Given the undertaking on (DD/MM/YY) _____/2019

Signature of the Student

Name:.....

Address & Mobile No:

UNDERTAKING CONCERNING RAGGING

IF/O..... who is taking
admission to MBBS course during the year 2019-20 hereby authenticate the undertaking given by my
son above. I undertake to state that I am responsible directly for any violation of code of conduct on part
my son and that I shall accept the decision of the college take under the provisions of related law.

Signature of the Parent/Guardian

Name:.....

Address & Mobile No: