SPECIMEN FORM OF BOND TO BE EXECUTED BY THE SELECTED CANDIDATE WHILE JOINING SUPER SPECIALITY (DM/M.Ch) COURSES

(To be submitted on Non Judicial stamp paper worth of Rs.100/-)

**ANNEXURE-III A**

I, Dr....................................................................... selected for Super Speciality Course for the Academic year 2022-23 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.NTR University of Health Sciences, Vijayawada, A.P. a sum of Rs.3,00,000/- + 18% GST (Rupees Three Lakhs Fifty four thousand only) and refund the amount received as stipend upto that date of Government.

**Date: Signature & Name of the student**

**Witness Sureties:**

**1. Signature……………. 1. Signature………………….**

**Full name and permanent address Full name and permanent address**

**2. Signature…………………. 2. Signature………………….**

**Full name and permanent address Full name and permanent address**

**N.B. : Sureties should be two permanent Govt. Gazetted officers (refer rule 8.5 of**

**Regulations)**

**Note: The following documents of the witnesses are required to be submitted**

**along with the bond 1) Copy of Aadhar card 2) Copy of PAN car**

SPECIMEN FORM OF BOND TO BE EXECUTED BY THE SELECTED CANDIDATE WHILE JOINING SUPER SPECIALITY (DM/M.Ch) COURSES

(To be submitted on Non Judicial stamp paper worth of Rs.100/-)

**ANNEXURE-III B**

I, Dr....................................................................... selected for Super Specialty Course for the Academic year 2022-23 do hereby undertake to serve the Government of Andhra Pradesh for a period of three years after successful completion of the Course. If I fail to serve the Government I undertake to pay a sum of Rs.50,00,000/- (Rupees Fifty lakhs only) to Government.

**Date: Signature & Name of the student**

**Witness Sureties:**

**1. Signature……………. 1. Signature………………….**

**Full name and permanent address Full name and permanent address**

**2. Signature…………………. 2. Signature………………….**

**Full name and permanent address Full name and permanent address**

**N.B. : Sureties should be two permanent Govt. Gazetted officers (refer rule 8.5 of**

**Regulations)**

**Note: The following documents of the witnesses are required to be submitted**

**along with the bond 1) Copy of Aadhar card 2) Copy of PAN card**

**GO attached : G.O.MS.No.150 dated 06-09-2017 Government of Andhra Pradesh**