## (TUITION FEE AFFIDAVIT SUBMITTED BY PG MEDICAL / DENTAL STUDENTS ADMITTED TO PG COURSES IN PRIVATE UNAIDED NON MINORITY MEDICAL / DENTAL COLLEGES OF ANDHRA PRADESH FOR THE ACADEMIC YEAR 2021-22)

(ON Non Judicial Stamp Paper for Rs.100/-)

| I. Dr.   | (AADHAR No:   |  |
|--|---|--|
| S/o / D/o  | , R/o   | do here by   |
| solemnly affirm and state on   |   |  |
| That I Have been allo  | tted a Post Graduate Medical / Dental Se  | eat in   |
| University of Health Sciences  | Medical Sciences & Research, Kuppan<br>s, Vijayawada in counselling conducted<br>ota for the Academic year 2021-22 for  | on under   |
| filed Writ Petitions bearing N<br>Petition before the Hon'ble<br>Government of Andhra Prade<br>through the said G.O is abysn<br>9812, 9814, 9879 of 2020 cha | he fact that your college and other Me<br>lo's: 9973 of 2020, 9969 of 2020 and 90<br>e High Court of A.P., challenging the<br>esh through G. O. Ms. 56, dated: 29.05<br>hally low. Further, batch of writ petitions<br>allenging the action of colleges not perm<br>before Hon'ble High Court of Andhra Pra | 880 of 2020 and batch of Write Fee Structure fixed by the .2020 saying that the fee fixed sfiled by students vide W.P.No. nitting the candidates to report |
| under G.O Ms. No.56, Dt. 29.0<br>academic year, 2 <sup>nd</sup> year and<br>pay the tuition fee including o  | aying the half yearly instalment of tuitio 05.2020 and I undertake to pay the ream 3 <sup>rd</sup> year as well. I further undertake, wither fees payable pursuant to the decisis or by the Hon'ble Supreme court of In   | ning Fee for second half of first<br>thout prejudice to my rights, to<br>on of the Hon'ble High Court in   |
| Medical Sciences & Research, and other fee (not exceeding  | I am fully conversant with the rules and Kuppam, Andhra Pradesh on matter of Rs.45,000/- per year for three years sunts and the Dean & Principal of the institute dues from us.   | recovery of pending tuition fee ubjected to the decision of the  |
|  | emnity Bond as executed by me as a cor<br>tute of Medical Sciences & Research, Kup  |  |
| FULL ADDRESS ( Aadhar card (   | copy to be attached):   |  |
|  |   | DEPONENT   |
|  |   | (Student Signature)  |
| Solemnly sworn and signed bo   |   |  |