

ANNEXURE - IV

BOND TO BE EXECUTED BY ALL MANAGEMENT (S1/S2/S3) CANDIDATES

AS PER G.O.MS. NO.57, HM & FW (C1) DEPARTMENT; DATED 28.04.2023

OF GOVERNMENT OF ANDHRA PRADESH

This Deed of Bond is executed on ____ day of August ,2023 at _____ by Dr. _____ Aadhar No. _____ PG NEET Roll No. _____ PG Rank _____ Resident of _____, in favour of Dean & Principal, PES Institute of Medical Sciences and Research, Kuppam, Chittoor District, Andhra Pradesh, do hereby swear an oath as follows:

1. I am admitted in to MD/MS _____ course under Management Quota S1/S2/S3 for the academic year 2023-24.
2. I am herewith submitting the bond after reading and fully understanding the contents of G.O. Ms. No. 57, dt. 28.04.2023 in Para 17 of II, the party of first part shall serve as a Senior Resident in the above college, for a period of one year after successful completion of the PG course.
3. I understand that, all the admitted candidates admitted under Management quota S1/S2/S3, after successfully completed the Post Graduate Degree course shall under go one year Senior Resident in the above college as per G.O. Ms. No. 57, dated 28.04.2023 of Govt. of Andhra Pradesh.
4. If, I fail to abide by the bond either by not joining (or) by not completing the stipulated one year service period of one year within a maximum period of 18 months after obtaining the PG (Medical) Degree course, a penalty of Rs. 40,00,000/- (Rupees forty lakhs) shall be levied against me.

Date :

Witnesses:

1. Signature:
Name and address in full

1. Signature:
Name and address in full

Signature of the candidate

Name:
Address:

Aadhar No:

Mobile No:
E- mail ID :

PERSONAL DETAILS

(To be submitted by the Candidate along with the bond for the academic year 2023-24)

1	Name	
2	Age & date of birth	
3	Father's Name	
4	Mother's Name	
5	Present Address	
6	Permanent Address	
7	Mobile Number	
8	E-mail ID	
9	Aadhar No	
10	State Medical Council Registration Number	
11	NEET Rank	
12	NEET Roll Number	
13	Allotment number issued by Dr. YSR UHS	
14	Name of the College to which candidate is admitted	
15	PG (Medical) Degree Speciality	

Date :

Signature of the Candidate

Name :

Mobile No:

Aadhar No :

E-mail ID:

Address: