ANNEXURE - V

DECLARATION

I					Son	of/D	of/Daughter	
year	of		(Name	of	the	PG	course)	at
(Name of the College) for the academic year 2023-								
24 do hereby solemnly affirm and sincerely state as follows:								
I declare that I shall abide by the rules and regulations prescribed by the Dr. YSR University of								
Health Sciences, Vijayawada for the (course) including regulations for								
re-admission after the break of study.								
Date :					Signature	of candid	ate	
					- 191111110	or carrara	ato	
/ Countersigned /								

Dean / Principal / Director (Office date with seal)