ANNEXURE – I

Following original documents along with \underline{TWO} sets of attested photocopies to be submitted at the time of admission:

Sl. No	Arrange the following documents in the given sequence only						
1	DGHS Confirmation Letter / Provisional Allotment Letter.						
2	Admit Card / Hall Ticket						
3	NEET Score Card						
4	10 th Standard marks Card for proof of Date of Birth						
5	Marks Card of 10+2 (12 th)						
6	Degree Certificate (UG AND PG)						
7	Certificate of completion of compulsory rotatory internship						
8	Permanent Registration Certificate from any State Medical Council/Medical Council of						
	India						
	AND						
	Permanent registration Certificate from Karnataka Medical Council						
9	Marks cards of all professional examinations (UG AND PG)						
10	Post graduate diploma certificate, if any						
11	Fees: As prescribed (Refer Mode of Payment)						
12	Two recent passport-sizes colored photographs with name and date.						
13	Rs.2,000/- (Rs. two thousand only) will be charged towards eligibility fee (non-						
	refundable).						
14	Photo Copy of PAN CARD						
15	Copy of Aadhaar Card of candidate.						
16	Annexures						

Note: - The allotted candidates should report to KLE University, Belagavi, Karnataka, on or before the Last date mentioned in DGHS allotment Letter, along with the above documents and fee paid details.

- Anti ragging undertaking by students and parents/guardians. (This has to be submitted on or before 1st week of September 2017). www.antiragging.in

ANNEXURE – II

SUPER SPECIALTY (DM / M.Ch) COURSE DISCONTINUATION BOND FORMAT

UNDERTAKING

(to be stamped on Rs.200/- stamp Paper)

Advocate No. of corrections.	DEPONENT						
Identified by me							
Verified aton this the day	of 2017.						
This is to verify that the contents of this affidavit an	e true to the best of my knowledge, information and belief.						
:	<u>VERIFICATION</u>						
Signature of the Candidate	Signature of the Parent/Guardian						
coercion to either sign or execute the	nis Affidavit.						
I have executed this affida	vit in sound mind, out of free will without any force or						
University, Belgaum payable for the entire course without any demur.							
along with my parent /guardian hereby undertake to pay balance tuition and other for							
In the event of my disconting	nuation of course due to any reason, I						
as per University Norms.							
the course and a	ccordingly undertake to pay all the tuition and other fees						
In consideration of admissi	on to 1 st year course, I shall complete						
New-Delhi through NEET Rank No(All India Rank).							
conducted by the Directorate Gen	eral of Health Services (DGHS), Government of India,						
University under Section 3 of t	he UGC Act 1956 through the Common Counseling						
	onstituent college of KLE University , Deemed-to-be						
,	the course at Jawaharlal Nehru						
	nt) do hereby swear an oath as follows:						
S/D/o(Na	ame of the Parents resident of						
aboutyears,							
I, Mr/Ms	(Name of the Candidate), aged						

Annexure-III

KLE UNIVERSITY, BELAGAVI

Undertaking for Demand Draft

Format of the Undertaking to be submitted if the Demand Drafts are purchased by any person other than the candidate/parents for paying the tuition fee.

I the undersi	igned				
S/O / D/O					
				number	
da	ited	for Rs	favoring,	Registrar, KLE University 1	for paying
tuition fee of Dr				(Rank No)	who is my
(mention the relatio	n with the	candidate)		·	·
Name of the person	who has	purchased the Dei	nand draft:		
Signature of the per	rcan wha	has nurchasad tha	Domand draft		
Signature of the per	ISOH WHO	nas pur chaseu the	Demand drant		
Complete Name, Ac	ddress:				
PAN Number:					
I AIN MUIIIDEI .					
(Photocopy of PAN	card to b	e enclosed)			
(_ notocop; or rint					