

(To be printed on Rs 100/- Non Judicial stamp paper duly notarized)

BDS COURSE DISCONTINUATION BOND

UNDERTAKING/BOND for General/NRI Category

I, Mr. /Ms (Name of the Candidate),
Aged about.....years, D/of (Name of the Parent)
Resident of (Permanent/
Present address of parent) do hereby swear an oath as follows-

I have been selected to the First Professional BDS course for the academic year 2025- 2026 at **Malla Reddy Dental College for Women, Suraram 'X' Roads, Jeedimetla, Hyderabad, Telangana State, India** a Constituent College of **Malla Reddy Vishwavidyapeeth (Deemed to be University) Hyderabad** through the Common Counseling conducted by the Directorate General of Health Services (DGHS), Government of India, New Delhi through NEET Rank No..... (All India Rank)

I, state that on my own will along with my parents/guardian I am taking admission to the BDS course at **Malla Reddy Dental College for Women, Suraram 'X' Roads, Jeedimetla, Hyderabad, Telangana State, India** as per the DGHS/MCC Provisional Allotment letter dated

I, further state that, in consideration of admission to BDS Course, I shall complete the full BDS Course (as per DGHS/MCC Norms) and accordingly undertake to pay all the tuition fee and other fees as prescribed by **Malla Reddy Dental College for Women, Suraram 'X' Roads, Jeedimetla, Hyderabad / Malla Reddy Vishwavidyapeeth (Deemed to be University) Hyderabad, at the time of starting of my academic year for the subsequent years of my BDS Degree.**

In the event of my discontinuation of BDS course due to any reason at any point of time after my admission; I along with my parent/guardian hereby undertake to pay the balance tuition fees for the Entire remaining course, any pending fees and other fees which would have accrued in the normal flow of the course Malla Reddy Dental College for Women, Suraram 'X' Roads, Jeedimetla, Hyderabad. I understand that I become liable to pay the whole course fee immediately upon securing a seat and therefore it is equitable to ensure that the total course fees are paid in the event of a premature termination of the course admission. I further undertake that, if in case I discontinue my course for any reason I will not claim for refund of the fees which I have already paid during my admission.

This undertaking is given without any coercion, undue influence, or threat and by my free consent. The contents herein above are read over and understood by me and true to the best my knowledge and belief. I along with my parent/guardian do hereby undertake to act accordingly.

This, undertaking is made on the.....day of.....2025 at Hyderabad, Telangana

Signature of the Candidate	Signature of the Parent/Guardian
Name of the Candidate	Name of the Parent/Guardian and Relation

PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT
(ON NON- JUDICIALSTAMP PAPERS OF RS.100/-)

GENUINITY BOND

I..... (Candidate name)

D/o....., bearing UG NEET 2025

Rank No

And

I (Parent name)

F/O, bearing UG NEET 2025

Rank No

Hereby give an undertaking as below, in connection with our claim with regard to certificates submitted for admission into UG Medical and Dental Courses for the Academic Year 2025-26 in Colleges affiliated to Malla Reddy Vishwavidyapeeth (Deemed to be University). We, hereby declare that all our certificates are genuine.

I am aware that if the submitted relevant certificate (s) is / are found to be not genuine at a later date, my admission is liable to be cancelled and I am liable for criminal prosecution, as may be legally deemed fit. Further I agree that I abide by the Rules and Regulations of Malla Reddy Dental College for Women, (A Constituent unit of Malla Reddy Vishwavidyapeeth (Deemed to be University)).

I also hereby undertake that I shall not enter into legal litigation, if the seat allotted to me is cancelled, for the above reasons.

Parent Mobile No:

Address:

Place:

Date: