



**GOVERNMENT OF TELANGANA
GOVERNMENT MEDICAL COLLEGE NARSAMPET, WARANGAL DIST.
ADMISSIONS FOR MBBS COURSE 2025-26.**

UG ADMISSION COMMITTEE.

01. Dr. D. Mohandas, Principal, Govt .Medical College, Narsampet, Wgl (Dt)
02. Dr. S. Lakshmi Narayana, Prof &HOD, Dept. of Orthopedics, Govt. Medical College, Narsampet, Wgl (Dt)
03. Dr. S. Sreedevi, Prof & HOD, Dept. of Microbiology, Govt. Medical College, Narsampet, Wgl (Dt)
04. Dr. K. Ramesh, Associate Professor in Biochemistry, Nodal Officer, GMC, Nspt,Wgl (Dt)

DAY-1 & 7	DAY-2 & 8	DAY-3 & 5	DAY-4	DAY-6
Dr. S. Lakshmi Narayana, Prof &HOD, Dept. of Orthopedics & Admin vice principal	Dr. M. Damodari Bai, Prof & HOD, Dept. of Pharmacology	Dr. N. Parashuram, Prof &HOD, Dept. of ENT	Dr. S. Sreedevi, Prof &HOD, Dept. of Microbiology & Academic vice principal	Dr. B. Giridhar, Prof &HOD, Dept. of Ophthalmology
Dr. Akhila Roshini, Asst. Prof, Dept. of Pathology	Dr. B. Chathurya, SR, Dept. of Pharmacology	Dr. B. Rakesh, Tutor, Dept. of Physiology	Dr. Jasmine, Tutor, Dept. of Anatomy	Dr. A. Pooja, SR, Dept. of Physiology
A. VINOD, DEO 9618120956	M. NARESH, DEO 8985061652	B. JAGAN, DEO 9959429772	D. SAI KIRAN 9182906326	A. VINOD, DEO 9618120956
A. Anil kumar, O.S 9550740671	O. Arun, O.S 9014586433	B. Rakesh, H.A 8309790596	K. Kishan Rao, O.S 7013207062	G. Rakesh, O.S 7330624107

For Queries and Information (Administrative Staff).

01. Sri. A. SRINIVAS, (Assistant Director (Admin)
02. Sri MD. RIAZ AHMED, Sr. Asst.
03. Sri. MD. Yousufuddin, office superintendent.

Reporting time from 10:00 A.M. to 04:00 P.M.

- Candidate who want to give willingness for up gradation for Round-II while retaining Round – I **“Have to Report Physically”** at the allotment institute to confirm their admission.
- For allotment under **OBC Quota, OBC Certificate issued by Concerned State Government Only is Valid.**
- For allotment under PWD Quota, **Certificate Issued should be latest-by the Medical Board of Medical Counseling Committee authorized Centers.**

All the candidates who have been allotted MBBS Seats in UG Counseling, in this Institute are hereby directed to submit the Following Documents.

**Sd/-
Principal
GMC, Narsampet**

THE FOLLOWING DOCUMENTS ARE TO BE SUBMITTED AT THE TIME OF ADMISSION

1	Provisional Allotment Order	Yes	No
2	NEET UG ADMIT Card -2025 (Mandatory)	Yes	No
3	NEET UG Rank Card-2025 (Mandatory)	Yes	No
4	Birth Certificate (SSC Marks Memo or Its Equivalence) (Mandatory)	Yes	No
5	Qualifying Exam Certificate(Intermediate Marks Memo/Equivalent, (Mandatory) . {Grade Certificate Not Accepted}	Yes	No
6	Study & Conduct Certificates VI to X (Mandatory)	Yes	No
7	Study & Conduct Certificates XI & XII (Intermediate) (Mandatory)	Yes	No
8	Latest Caste Certificate (Mandatory – if applicable) with father Name	Yes	No
9	Transfer Certificate (Mandatory)	Yes	No
10	Minority Certificate (Mandatory-if applicable)	Yes	No
11	EWS (Economically Weaker Section) Certificate for the year 2025-26 Claiming Reservation under EWS Categories issued by Competent Authority (Tahsildar) of State of Telangana (Mandatory - if applicable)	Yes	No
12	Latest Parental Income Certificate (If applicable)	Yes	No
13	Residence Certificate of the Candidate or either parent issued by MRO/ Tahsildar of Telangana / competent authority for a period of Ten (10) years (Period to be specified with exact month and year) excluding the period of Study/ employment outside the state (Mandatory - if applicable)	Yes	No
14	GAP Certificate Issued by Tahsildar / MRO / competent authority (Mandatory-if applicable)	Yes	No
15	NCC Certificate (Mandatory-if applicable)	Yes	No
16	CAP (Children of Armed Personnel) Certificate (Mandatory-if applicable)	Yes	No
17	PMC (Post Matriculation) (Mandatory-if applicable)	Yes	No
18	Anglo Indian Certificate (Mandatory-if applicable)	Yes	No
19	PWD (Persons with Disability) certificate (Mandatory - if applicable) certificate issued this year (December 2024 – January 2025) by the Medical Board of Medical Counseling committee authorized centers.	Yes	No
20	Migration Certificate (if applicable)	Yes	No
21	Equivalent Certificate (If student from other state)	Yes	No
22	Employment Certificate of Parent (For Non- Local Status)	Yes	No
23	D.D in favour of "THE REGISTRAR, KNRUHS, WARANGAL") Fee Rs.12,000/- (All India Quota) (Mandatory) must be drawn from a Nationalized Bank Only	Yes	No
24	College Fee DEMAND DRAFT in favour of the PRINCIPAL, GOVERNMENTMEDICALCOLLEGE,NARSAMPET,WARANGAL DIST payable at NARSAMPET,WARANGAL DIST Amount of Rs. 29,000/- (OC, BC) and Rs.27,000/- (SC, ST) (Mandatory) must be drawn from a Nationalized Bank Only	Yes	No
25	4 Passport Size Photos-Latest (Mandatory)	Yes	No
26	Aadhaar Card Xerox Copy (Mandatory)	Yes	No
27	Form I & II (Enclosed)	Yes	No
28	Specimen Signature of the Candidate (Mandatory)	Yes	No

29	Undertaking in the form of Affidavit on Rs.100 Non- Judicial stamp paper by the parent and candidate stating that all the certificates including the caste and category certificates are genuine and they are responsible for any further consequences as per law shall be submitted at the time of admission. If any Discrepancy is noticed, the admission will be cancelled.(Mandatory)	Yes	No
30	Bond of Rs.20,00,000/-(Rupees Twenty Lakhs) (Mandatory)	Yes	No
31	2 sets of self- attested Xerox copies of all certificates and Bonds.	Yes	No
32	Processing Charges of Rs. 2,000/- DEMAND DRAFT in favour of the PRINCIPAL,GOVERNMENT MEDICAL COLLEGE, NARSAMPET, WARANGAL DIST payable at NARSAMPET, WARANGAL DIST *All DD (Demand Draft) must be drawn from a Nationalized Bank Only	Yes	No
33	Self-Attested copies of Aadhaar and PANcard of sureties along with last 3 years of ITR forms. (Mandatory)	Yes	No

The above certificate will not be returned to him/ her unless he/she completes the course as per norms of KNR University of Health Sciences, Warangal, Telangana State.

“Signature of Verification Officers”

S. NO.	Name of the officer	Signature
01.		
02.		
03.		
04.		

GOVERNMENT MEDICAL COLLEGE: NARSAMPET, WARANGAL DIST: NEET – 2025 MBBS BATCH

2025-26 PERSONAL DATA SHEET OF CANDIDATES ADMITTED ON:

SHOULD BE FILLED BY THE CANDIDATE OWN HAND WRITING:

1. Full Name of the Candidate :
(In block letters as per Intermediate Certificate)
2. Age and Date of Birth (As per SSC certificate) :
3. Sex :
4. Name of Father & Occupation :
5. Literacy status of Father :
6. Name of the Mother & Occupation :
7. Permanent Address of the Parents :
Parents Phone No. (Or) Mobile
8. Temporary Address of the Candidate :
Phone No (Or) Mobile
9. Name of the College where the candidate :
Where last studied (Inter 2nd year or +2)
10. Name of the Coaching Centre :
(If Studied)
11. Number of attempts of NEET :
12. After Completion of MBBS Course
Whether you will join in : Govt. Service/Private Service
13. Whether you wish to pursue Postgraduate :
Course if yes which specialty

Signature of the Parent/Guardian

Signature of the Candidate

FORM-I
FORMAT OF UNDERTAKING BY THE STUDENT (ANTI-RAGGING)

01. I, _____ Son/Daughter of Mr./Mrs./Ms.
_____ Admitted to the course of MBBS at
Government Medical College, NARSAMPET, WARANGAL DIST with
_____ Admission Number affiliated to **Kaloji Narayana Rao**
University of Health Sciences, have received a copy of the National Medical Commission (Prevention
and Prohibition of Ragging in Medical Colleges and Institutions) Regulations, 2021 (Here in after
referred to as the said Regulations).
02. I have carefully read and fully understood the provisions in the said Regulations.
03. I have particularly per used the provisions of regulations 3 and 4 of the said regulations and have fully
understood what constitutes – Ragging.
04. I have also in particular per used the provisions of chapter–IV and read and understood the
administrative and penal actions that may be taken against me in case I am found guilty of ragging or
abetting ragging actively or passively or being part of conspiracy to promote ragging.
05. I hereby undertake that. _____
- I. I will not indulge in any behavior or act that may come under the definitions of ragging as may
be constituted under regulation 3 of the said regulations.
- II. I will not participate in or abet or propagate ragging in any form included but not limited to those
that may be constituted under regulation 3 of the said regulations.
- III. I will not hurt anyone physically or psychologically or cause any other harm.
06. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of
the said regulations or as per the applicable laws for the time being in force.
07. I also declare that I have never been found to be guilty of ragging or abetting ragging, actively or
passively, or being part of conspiracy to promote ragging and have never been punished in any manner
for these offences and further affirm that if these declarations is incorrect or false, my admission is liable
to be cancelled/withdrawn.

Signed on this _____ Day of _____ Month of _____ Year.

Signature Name
of the Student Phone No.
Address.

Witness–I

Name and Signature Address

Witness–II

Name and Signature Address

FORM-II

FORMAT OF UNDER TAKING BY THE PARENTS /GUARDIAN OF THE CANDIDATE / STUDENT (ANTI-RAGGING)

01. I, _____ Father/Mother/Guardian of Mr./Mrs./Ms.
_____ Admitted to the course of MBBS at
Government Medical College, NARSAMPET, WARANGAL DIST with _Admission Number affiliated to
Kaloji Narayana Rao University of Health Sciences , hereby declared that, I have received a copy of
the National Medical Commission(Prevention and Prohibition of Ragging in Medical Colleges and
Institutions) Regulations, 2021(Here in after referred to as the said Regulations).
02. I have carefully read and fully under stood the provisions in the said Regulations.
03. I have particularly per used the provisions of regulations 3 and 4 of the said regulations and have fully
understood what constitutes – Ragging.
04. I have also in particular per used the provisions of chapter –IV and read and understood the
administrative and penal actions that may be taken against my Son/Daughter/ward incase he/she is found
guilty of ragging or a betting ragging actively or passively or being part of conspiracy to promote
ragging.
05. I hereby undertake that My Son/Daughter/Ward _____
- I. Will not indulge in any behavior or act that may come under the definitions of ragging as may be
constituted under regulation 3 of the said regulations.
 - II. Will not indulge in any behavior or act that may come under the definitions of ragging as may be
constituted under regulation 3 of the said regulations.
 - III. Will not participate in or a bet or propagate ragging in any form included but not limited to those
that may be constituted under regulation 3 of the said regulations. I will not hurt anyone physically
or psychologically or cause any other harm.
06. I hereby agree that my Son/ Daughter / Ward is found guilty of any aspect of ragging, he/she may be
punished as per the provisions of the said regulations or as per the applicable laws for the time being in
force.
07. I also declare that, my Son/ Daughter / Ward have never been found to be guilty of ragging or abetting
ragging, actively or passively, or being part of conspiracy to promote ragging and have never been
punished in any manner for these offences and further affirm that if these declarations is incorrect or false,
his/her admission is liable to be cancelled/ withdrawn.

Signed on this _____ Day of _____ Month of _____ Year.

Signature

Name of the Parent/Guardian.

Phone No.

Address.

Witness-I

Name and Signature Address

Witness-II

Name and Signature Address

KNRUHS DISCONTINUATION BOND

**PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT(ON NON-
JUDICIAL STAMP PAPERS OF RS.100/-WITH NOTARY)
BOND FOR UG MBBS/ BDS ADMISSION FOR THE ACADEMIC YEAR 2025-26**

I, _____ (Name of the candidate) S/o, D/o. _____ (Name of the parent), Selected for MBBS/BDS Course do hereby under take to complete the course as per the requirement of **KNR University of Health Sciences, Telangana, Warangal**. In the event of my discontinuing the studies after joining the course or after the date of announcement of second phase of admission, I under take to pay KNR University of Health Sciences, a sum of **Rs. 20,00,000/-(Rupees Twenty Lakhs only)** and I am aware that I will be debarred for three years for admission in to MBBS/BDS course in the state of Telangana be sides payment of **Rs.20,00,000/-(Rupees Twenty Lakhs only)** towards forfeiture of the bond in accordance to the G.O.Ms.No.125,126 and 127 HM&FW Dept.Dated:22.09.2022

Signature of the Candidate

I, _____ (Name of the Parent), Parent of Mr/Ms. _____ (Name of the candidate), do here by under-take to pay **KNR University if Health Sciences, Warangal** a sum of **Rs.20,00,000/-(Rupees Twenty lakhs only)** in case of discontinuation of MBBS Course after joining or after the date of announcement of second phase of admissions by my son/Daughter and I am aware that my son/daughter will be debarred for three years for admission into MBBS/BDS course in the state of Telangana besides payment of **Rs.20,00,000/-(Rupees Twenty lakhs only)** towards forfeiture of the bond in accordance to the G.O.Ms.No.125,126 and 127 HM&FW Dept. Dated: 22.09.2022.

Signature of the Parent

Witness:

1)

2)

"SURETIES MUST BE INCOME TAX PAYERS /GAZETTED OFFICERS ONLY"

(TO BE FILLED BY TWO SURETIES)

(I.) In consideration of the Surety Bond executed by the student (Mr./Ms. _____)

_____ Son of/Daughter of _____
Resident of _____ in favour of The **Registrar, KNRUHS, Warangal** and the **Principal, Govt. Medical College, NARSAMPET, WARANGAL DIST** to sum of **Rs.20,00,000/- (Rupees Twenty lakhs only)**. I _____ hereby stand as surety, jointly and severally, for the payment of the said amount on the terms mentioned above. In case the student fails to pay on demand a sum Rs.20,00,000/-(Rupees Twenty lakhs only). I the said surety, shall, without any objection, pay the said due amount to the **Govt. Medical College, NARSAMPET, WARANGAL DIST** on demand.

I, the said surety do solemnly affirm that I am solvent to the extent of the amount of surety and I have been regularly filing income tax return.

Signature.....
Name of the Surety.....
Present Address.....
.....Pin.....
Permanent Address:.....
.....Pin.....
Aadhaar No..... PAN
No..... Mobile
No.....

(II). In consideration of the Surety Bond executed by the Student (Mr./Ms. _____) Son /daughter of _____ resident of _____ in favour of The **Registrar, KNRUHS, Warangal** and the **Principal, Govt. Medical College, NARSAMPET, WARANGAL DIST** to a sum of **Rs.20,00,000/- (Rupees Twenty lakhs only)**, I _____ hereby stand as surety jointly for the payment of the said amount on the terms mentioned above. In case the student fails to pay on demand a sum of **Rs.20,00,000/- (Rupees Twenty lakhs only)**, I the said surety, will pay the amount of Rs. **20,00,000/-**, without any objection to the **Govt. Medical College, NARSAMPET, WARANGAL DIST**.

I, the said surety do solemnly affirm that I am solvent to the extent of the amount of surety and I have been regularly filing income tax return.

(Attach self-attested copies of PAN and Aadhar)

Signature.....
Name of the Surety.....
Present Address.....
.....Pin.....
Permanent Address:.....
.....Pin.....
Aadhar No..... PAN
No..... Mobile
No.....

Note: The sureties must submit the last 3 years income tax returns.

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

UNDERTAKING

I, _____ (Candidate Name) S/o. D/o. _____,
Bearing UG NEET-2025 Rank No. _____, and I, _____ (Parent
Name) F/o. _____ (Candidate Name), Bearing UG NEET Rank No.

_____ Hereby give an undertaking as below in connection with our claim with regards to certificates
submitted for admission into UG Medical Course for the academic year 2025-26 in Colleges affiliated to Kaloji
Narayana Rao, University of Health Sciences.

We, hereby declare that all our **Certificates are genuine**.

I am aware that if the submitted relevant certificates (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 **Kaloji Narayana Rao University of Health Sciences
(KNRUHS), Warangal**

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

(Attach self-attested copies of PAN and Aadhar)

Signature of the Parent / Guardian

Signature of the Candidate.

Aadhar No.

Mobile No. Address.

Dated.

Place.

GOVERNMENT OF TELANGANA
GOVERNMENT MEDICAL COLLEGE NARSAMPET, WARANGAL DIST. NEW UNDER GRADUATE
(MBBS COLLEGE FEE STRUCTURE)

Sl.No.	Description	OC/BC	SC/ST	Frequency
1	Tuition Fee	₹ 10,000.00	₹ 10,000.00	Yearly
2	CDS	₹ 5,000.00	₹ 5,000.00	One Time
3	E-Library	₹ 2,000.00	₹ 2,000.00	Yearly
4	Central Stores	₹ 2,000.00	₹ 2,000.00	One Time
5	Library Fee	₹ 2,000.00	₹ 2,000.00	Yearly
6	Caution Deposit	₹ 3,000.00	₹ 3,000.00	One Time
7	Academic Development Fund	₹ 3,000.00	₹ 1,000.00	One Time
8	Non-Government Fund	₹ 2,000.00	₹ 2,000.00	One Time
TOTAL		₹ 29,000.00	₹ 27,000.00	

Demand Draft in Favour of **“PRINCIPAL GOVERNMENT MEDICAL COLLEGE, NARSAMPET, WARANGAL DIST”**,

Payable at NARSAMPET, WARANGAL DIST from any Nationalized Bank.

HOSTEL FEES

Sl.No.	Description	Amount	Frequency
1	Non-Refundable Amount	₹ 5,000.00	One Time
2	Caution Deposit(Refundable)	₹ 5,000.00	One Time
3	Rent(Rs.1000/-PerMonth-12Months)	₹ 12,000.00	Yearly
4	Hostel Admission Application Fee	₹ 1,000.00	One Time
TOTAL		₹ 23,000.00	

Demand Draft in Favour of **“ PRINCIPAL GOVERNMENT MEDICAL COLLEGE, NARSAMPET, WARANGAL DIST”**,

Payable at NARSAMPET, WARANGAL DIST from any Nationalized Bank.

UNIVERSITY FEE(FOR AIQ Students Only)

Sl.No.	Description	Amount
01	University Fee	₹ 12,000.00

Demand Draft in Favour of **“ The Registrar KNR University of Health Sciences, Warangal”**, Payable at Warangal.

Processing Charges of Rs.2000/- (Two Thousand Rupees only) Demand Draft in favour of the **Principal, Government Medical College, NARSAMPET, WARANGAL DIST** Payable at NARSAMPET, WARANGAL DIST (Non - Refundable).

****Note. All DD (Demand Draft) Must be Drawn from a Nationalized Bank Only.**

ANNEXURE I
AFFIDAVIT BY THE STUDENT

I _____Registration No. _____

S/o, D/o _____, having been admitted to **Government**

Medical College, Narsampet, Warangal district, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions 2009. (Here in after called the "Regulations") carefully read and fully understood the provisions constrained in the said Regulations.

2) I have, in particular, per used clause 3 of the Regulations and am aware as to what fully constitutes ragging.

3) I have also, In particular, Per used clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly ever and undertake that

a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.

b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, I am liable punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.

6) I hereby declare that I have not been expelled or debarred form admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further that affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of the Student Name:

ANNEXURE – II
AFFIDAVIT BY PARENT / GUARDIAN

- 1) Mr./Mrs./Ms. _____ (full name of parent / guardian) father / mother / guardian of _____
(full name of student with admission / registration / enrolment number) having been admitted to **Government Medical College, Narsampet, Warangal District** have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions 2009. (Hereinafter called the "Regulations") carefully read and fully understood the provisions constrained in the said Regulations.
- 2) I have, in particular, per used clause 3 of the Regulations and am aware as to what fully constitutes ragging.
- 3) I have also, In particular, Per used clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly ever and under take that
- a) My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
- b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, my ward liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
- 6) I hereby declare that my ward has not been expelled or debarred form admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further that affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.
- Declared this-----day of-----month of----- year.

Signature of the Parent

Name:

Address:

Telephone/Mobile No.

**UG Admissions 2025-26 Student details
for Admission register**

PHOTO

NEET Rank	
NEET Ht. No.	
KNRUHS Rank	
Allotted Phase	
NEET Marks obtained out of 720	
SSC Board	
Full Name of the student as per SSC	
Gender	
Identification marks	1. 2.
Date of Birth	
Category	
Sub Caste	
Local/Non Local	
Email ID	
Aadhar Number	
Address	
Father Name as per SSC	
Mother Name	
Admission details	
Mobile Number	Student: Father: Mother:

Signature of the Student