ANNEXURE – A

(Non – Judicial Stamped Paper for Rs.100/-)

I, Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ selected for Super Specialty Course for the year 2023-2024 do hereby undertake to complete the said course as per the requirements of the University. In the Event of my leaving the studies after joining the course, I undertake to pay to the Dr. YSR University of Health Sciences, Vijayawada a sum of Rs.3,00,000/- (Rupees Three Lakh only) with 18% G.S.T. (Total Rs.3,54,000/-). and refund the amount received as Stipend up to the date of Discontinuation to the Government.

Date: SIGNAUTRE OF THE CANDIDATE

Witness:

1 Signature

Name and Address in Full

2 Signature

Name and Address in Full