# PROFARMA FOR AGREEMENT BOND IN THE FORM OF AFFIDAVIT (ON NON-JUDICIAL STAMP PAPERSFO RS:100/-

# BOND FOR POST GRADUATE ADMISSION FOR THE ACADEMIC YEAR 2026-27

THIS DEED OF BOND IS EXECUTED AT _____, ON THIS DAY OF BY _____

Name:_____, D/O. _____ Residing At (Permanent Address); _____Mail ID_____Mobile No._____AADHAR NO._____

TO IN FAVOUR OF PRINCIPAL GOVT MEDICAL COLLEGE, WANAPARTHY, Whereas the Party of the FIRST PART have applied for admission to PG Medical course in Telangana State and the Party of the FIRST PART has been selected to the said course.

As per the GO.Ms.No. 155, HM&FW (CI), Department, Dated:18-11-2021 and the Prospectus of KNRUHS, the Party of the FIRST PART has agreed to serve the Government of Telangana at any of the Government Institutions as per the orders of State Government for a period one year (For Non Service Candidates) after successful completion of the PG course on such failure of not completing the full bond period of service, the Party of the FIRST Ashall forthwith pay a sum of Rs. 20,00,000 for PG Degree and Rs.10,00,000 for PG Diploma course.

AND WHEREAS for the better protection of the Government, the Party of the FIRST PART has agreed to execute the bond with 2 sureties who are Government Gazetted Officers/Income Tax assesses to stand guarantee for the above said amount.

AND WHEREAS the Party of the FIRST PART have also agreed that on successful completion of the Post graduation course, the Party of the FIRST PART shall successfully complete the requisite bond period of one year service or pay to the Government of Telangana (Director of Medical Education) on demand the sum of Rs.20,00,000/- (Rs. Twenty Lakh only) and on such default together with interest at Government rates there on from the date of demand on the said amount.

The Party of the FIRST PART _____ or his/her legal heirs, executors and administrators shall forthwith pay to the Government on demand the said sum of Rs.20,00,000/-(Rupees Twenty Lakhs Only) together with interest in the event of default by the Party of the FIRST PART.

AND up on the Party of the FIRST PART _____ of

1._____ 2._____

The sureties aforesaid making such payment, the above written bond shall be void andbe of no effect, otherwise it shall remain in force and virtue.

PROVIDED always that the liability of the sureties hereunder shall not be impairedor discharged by reasonable time being granted or by any forbearance, act or omission of the Government or any person authorized by them (Whether with or without the consent knowledge of the sureties) nor shall it be necessary for the Government to sue the Partyof the FIRST PART before suing the sureties.

1. _____

2. _____

Or any of them for the amount due here under

This bond shall in all respects be governed by the Laws of India, for the time being inforce, and the rights and liabilities shall, where necessary, be accordingly determined by the appropriate courts in India.

This bond is exempted from stamp duty, under Article 57 of Schedule 1 of the Indian Stamp Act, 1899. (Central Act II of 1899).

**NOW THE DEED OF INDEMNITY BOND WITNESSES AS FOLLOWS:**

1 The Party of the FIRST PART has agreed to serve the Government of Telangana for a period of one year on successful completion of the PG course and in the event of default the Party of the FIRST PART shall pay forth with a sum of Rs.20,00,000/- (Twenty Lakhs only) to the Government of Telangana (Director of Medical Education).

2. For the afore said amount of Rs.20,00,000/- (Twenty Lakhs only) the event of such default till payment of Rs.20,00,000/- (Twenty Lakhs only) is paid to the Government of Telangana.

Signed and dated at _____

on this the _____ day of _____

Signed and delivered by the Party of the FIRST PART_____

Signature of the Candidate.:

PAN No. of Surety 1:_____ Aadhaar No:_____

Signed and delivered by the Surety 1: _____

Signature of the Surety 1 with seal: _____

In the presence of:

| | |
|---|---|
| Witness 1: | Witness 2: |
| Name:<br>Address: | Name:<br>Address: |
| Signature: | Signature: |

PAN No. of Surety 2:_____ Aadhaar No: _____

Signed and delivered by the Surety 2: _____

Signature of the Surety 2 with seal: _____

In the presence of:

| | |
|---|---|
| Witness 1: | Witness 2: |
| Name:<br>Address: | Name:<br>Address: |
| Signature: | Signature: |

**ACCEPTED**
For and on behalf of any of the order and direction of the Government of Telangana.

Date:
Station :

Addl DME/Principal
Government Medical college
Wanaparthy