

**MBBS COURSE DISCONTINUATION BOND FORMAT
UNDERTAKING/ BOND for General Category & NRI**

I, Mr/Ms (Name of the Candidate), aged about

..... years,S/D/o(Name of the Parents) resident of

.....

..... (permanent/Present address of Parent) do

hereby swear an oath as follows

I, have been selected to the 1st MBBS course for the academic year 2019-20 at **Dr. D.Y. Patil Medical College, Hospital and Research Centre, Pimpri, Pune Maharashtra, India** constituent college of **Dr. D.Y. Patil Vidyapeeth, Deemed to be University Pimpri, Pune** under Section 3 of the UGC Act 1956 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 and along with my parents/guardian took admission to the MBBS course at **Dr. D.Y. Patil Medical College, Hospital and Research Centre, Pimpri, Pune Maharashtra, India** as per the DGHS Provisional Allotment letter. Dated

I, further state that, in consideration of admission to 1st year MBBS course, I shall complete the MBBS course and accordingly undertake to pay all the tuition and other fees as prescribed by **Dr .D.Y. Patil Medical College, Pune / Dr. D.Y. Patil Vidyapeeth, Deemed to be University Pune**

In the event of my discontinuation of MBBS course due to any reason at any point of time after my admission; I along with my parent/guardian hereby undertake to pay balance tuition and other fees to **Dr .D.Y. Patil Medical College, Pimpri, Pune payable for the entire course** without any demur.

I, along with my parents/guardian say that am binding to pay the entire amount of entire course fee in the event of my leaving the course before its completion the total MBBS course fee to, **Dr .D.Y. Patil Medical College, Pune / Dr. D.Y. Patil Vidyapeeth, Deemed to be University Pune.**

What is stated above is true and correct. I along with my parent/guardian do hereby undertake to act accordingly. This, undertaking is made on the day of 2019 at Pimpri, Pune, Maharashtra.

Signature of the Candidate

Signature of the Parent/Guardian

Name of the Candidate

Name of the Parent/Guardian

