## PROFORMA FOR FURNISHING COLLGEGE, FEE, BOND CONDITIONS ETC. (FOR POST- GRADUATE COURSES ACADEMIC SESSION 2013-14)

NAME OF THE MEDICAL COLLEGE/ INSTITUTE

GOVT, MEDICAL COLLEGE KOTA

CODE NO: RA-06

State

Rajasthan

1. Date of start session

2013-14

2. Annual fee for AIQ candidates

Consolidated amount to be paid at

The time of admission

2375/-

3. Stipend paid to MD/MS/PG diploma/MDS students

19000+ DA, Per month as per rules

(Specify clearly if any P.G. Courses are Non- stipendiary against the subject in Annexure-I also)

4.

(A) Hostel facility for male students

(B) Hostel facility for female students

(C) Monthly Hostel dues

Yes Yes

3800/- Rs. per Year

Dr. R.K. Aseri

Name of Dean/Principal

Tele No.(i) Office Tele No.(ii) Residence

E-mail address Fax No.

0744-2470674 0744-....

principalmck@gmail.com, pncmck@yahoo.co.in 0744-2471157

Name of Secretary (Medical Education/Health) Official address

Tel.No.Fax No

Tapesh Panwar

Principal Secretary, Medical Education Dept.Govt.of Raj Secrated Jaipur.

0141-2227795

Name of Director Medical Education

Official Address

Tapesh Panwar

Principal Secretary, Medical Education Dept.Govt.of Raj

Secretariate Jaipur.

Tel.No./Fax No.

0141-2227795

Bond if any, (A) Indicate the terms & conditions (B) Copy of Bond/ Agreement Performa

(to be enclosed)

Enclosed

Note: - Any additional State Condition shall not be Applicable to All India Quota candidates. As per Supreme Court directions it is not open to Any State to fix any additional eligibility criteria in cases of candidates who fall under the All India Quota vide its order dated 27/07/01 in L.A.No.9-13 In Civil Appeal 1944/93

Signature

Name Designation.

प्रधानाचार्य एवं रिषंत्रक राजकीय आयुर्विज्ञान महाविद्यालय

Office Seal principalmck@gmail.comenten(ck@y)hoo.co.in

Website address of the College site

10. Any other relevant information

Signature of Principal /Dean/Director Name:

Dr. R.K. Aseri

Date

: 15 n n

ten Dr. Ach ope Dr. Dulane

Point 8 .— (i)

## **BANK GUARANTEE**

(On Rs. 100/- Non-judicial Stamp)

Principal & Controller,	*
Medical/Dental Col	ege,
(Rajasthan)	
Dear Sir,	*
*	Guarantee No.
a*	Amount of Guarantee Rs.
	Guarantee Cover fromto
	Last date for lodgement of Claim
	(Last date of completion of Course)
constituted under the	ntee executed by the(Bank's Name)(RBI Act) having its branches all over India and amongst other places, a
	(Place of Bank, herein after referred to as 'the Bank') in [avour of
amount not exceeding Rs.	ollege, (hereinafter referred to as 'the Beneficiary') for an 1,50,000/- (Rs. One Lac Fifty Thousand Only) at the request of
	(Candidate's Name, hereinafter referred to as 'the Contractor/s')
	ued subject to the condition that the liability of the Bank under this
	force up to (Date of completion of Course) and
	than by a written demand or claim under this Guarantee saved on the
Bank on or before the	(Last date of claim, i.e. date of completion of Sidegree and 2 yrs for diploma courses).

## MAIN GUARANTEE MATTER

This guarantee is made on demand in favour of the Principal & Controller, Medical/ Dental College, who has allotted a seat to MD/MS/Diploma/MDS for the post graduate course in the speciality of in the Medical/ Dental College for the duration of 2 yrs for diploma/3 years for degree upon the completion.  a. If the student leaves the PG course before its completion
b. If the admission of the student is cancelled/terminated by the concerned Medical/Dental College on account of unsatisfactory performance/misconduct/indiscipline, etc.  Whereas the Bank undertake a bank guarantee amount maximum upto 1.5 lac till the completion of entire course. The Principal, Medical/Dental College, on behalf of State of Rajasthan may recover a sum of Rs. 1.5 lac from the bank.
Not withstanding anything contained herein the liability of Bank under this guarantee limited to a maximum of Rs. 1,50,000/- (Rupees One Lac Fifty Thousand only) and the guarantee shall remain in full force upto (date of completion of course) and cannot be revoked otherwise than by a written demand or claim under this guarantee served on the Bank on or before the (last date of claim; i.e. completion of course).

N.J. STAMP Res. 100.00

## :: SURETY B O N D ::

		I is made on the
	This bon	I is made on the
itate of	Rajastha	(hereinafter) called the Government Dr
-	MUEDE	s on the basis of merit the student was offered various course(s) at various institutions,
		imp of his/her counseling and he/she has voluntarily opted for the course at the conege and
avallabl	e at the	admitted in the course at the college with the understanding and subject to the undertaking that
he/she	has been dent shal	undergo the course on full time and regular basis and shall maintain the required standard of
perform	nance an	shall not indulge in indiscipline/misconduct.
enocial	tv of	in the Medical
a "	.,	upon the conditions : -
College	(a)	If the (P.G. Student) does not join the course at the allotted institution on or before the
		stipulated date;
	(b)	If the student leaves the P.G. Course before its completion;
	(c)	the admission registration
		University/Medical Confese
		performance/misconduct/indiscipline.

	N N N
	ne entire course a surety amount Rs. 5.00 Lac (Rupees Five Lacs
4. WHEREAS, the student undertake that till tr	ne entire course a sample certificate of the student.
4. WHEREAS, the student undertake that the only) is paid to the college and/shall have the right to	o retain the original certification of sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor/or sureties who are responsible of the collowings are my Guarantor of the collowing are my Guarantor of the coll
5. In case, I fail to pay the above amount t	ollowings are my downson,
2. Sureties (with address)	Resident of
	Be bound, myself and I execute a personal section 1   I leave this course/seat I will pay a sum of Rs. 5.00 lac
A B S 00 Jac (In words Rupees Five	Lac) that, if I leave this course/seat I will pay a sum of Rs. 5.00 lac
(In words Rupees Five Lac) to the Government of	Rajasthan.
(In words Rupees Five Lac) to the	Rajasthan.  on behalf of State of Rajasthan may recover a sum of Rs.
The Medical College,	
5.00 Lac (In words Rupees Five Lac) from me.	(Signature of P.G. Student)
(Signature of Witness)	Name of P.G.Student
Name of Witness	Present Address
Present Address	Present Address
	Phone/Mobile No.
. Filotopina	Resident of
Son/Daughter or	Resident of
lac (In words Rupees Five Lac) I,	hereby stand as surety, jointly ount on the terms mentioned above. In case the student falls to pay
and severally, for the payment of the said am	ount on the terms mentioned above. In case the student falls to pay upees Five Lac) I, the said surety shall without any objection pay the
on demand a sum of Rs. 5,00 fac (in words in said due amount to the college on demand.	
	(Signature of surety)
(Signature of Surety)	Name of Surety
Name of Witness	Present Address
Present Address	
	, Phone/Mobile No
Phone/Mobile No	
(Signature of Witness)	( Attested by First Class Magistrate
With Name & Address	or Notary Public )
With legine or may,	or Novary runting
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