



GOVERNMENT MEDICAL COLLEGE, JANGAON

24, Weavers Colony, Jangaon

Jangaon Dist., Telangana, Pin code No. 506167

Email: gmc.jangaon@gmail.com **Website:** <https://gmcjangaon.org>
(Affiliated to Kaloji Narayana Rao University of Health Sciences Warangal)



ADMISSIONS FOR MBBS COURSE 2026-27

UG Admission Committee :

1. Dr. K. Nagamani, Principal / Addl. DME.
2. Dr. R. Jitendra, Professor & HOD of Anatomy (Vice Principal-Admn.).
3. Dr. I. Sridhar, Professor & HOD of Pharmacology (Vice Principal-Academic).
4. Dr. G. Jyothi Lakshmi, Professor & HOD of Microbiology.
5. Dr. Mohd Anwar Miya, Professor & HOD of Pathology.
6. Dr. Syed Ahmed Mohiuddin, Associate Professor & I/c HOD of SPM.
7. Sri. Ch. Surya Prakash Rao, Administrative Officer (Academic).
8. Sri. M. Bramhanandam, Assistant Librarian.
9. Sri. S. Srinivasan, Office Superintendent (Academic).
10. Sri. N. Gopinath, Office Superintendent (Accounts).

For Queries and Information (Between 11:00am to 04:00pm):

1. Sri. Ch. Surya Prakash Rao, Administrative Officer (Academic). Mobile No. 7989491292.
2. Sri. S. Srinivasan, Office Superintendent (Academic). Mobile No. 9542554280.
3. Sri. Ch. Vamshi Krishna, Junior Assistant (Academic). Mobile No. 9010139349.
4. Sri. J. Aravind, Data Entry Operator (Academic). Mobile No. 9347603625.
5. Sri. M. Sreekanth, Data Entry Operator (Academic). Mobile No. 6301182541.
6. Sri. G. Paramesh, Data Entry Operator (Hostels). Mobile No. 9908060595.

Reporting Time from 10.00 A.M to 4.00 P.M

Guidelines:

1. All the candidates who have been allotted MBBS seats during UG counseling in this College are hereby directed to submit the documents mentioned in the check list.
2. AIQ Candidates who are not willing for any further Sliding/ Upgradation, have to report physically at the allotted Institution to confirm their admission.
3. It is preferred to have a separate Contact Number and E-mail ID for the student.

All the candidates who have been allotted MBBS seats in UG counselling, in this institute are hereby directed to submit the following documents:

I. THE FOLLOWING DOCUMENTS ARE TO BE SUBMITTED AT THE TIME OF ADMISSION :

1. Provisional Allotment Order (Mandatory)
2. Neet UG Admit Card-2026 (Mandatory)
3. Neet UG Rank Card-2026 (Mandatory)
4. SSC/10th Class Marks Memo (Date of Birth Reference) or its equivalence (Mandatory)
5. Qualifying Exam Certificate (Intermediate/10+2 Marks Memo OR Equivalent – Grade Certificate not Accepted) (Mandatory)
6. Study and Conduct Certificates of VI to X (Mandatory)
7. Study and Conduct Certificates of Intermediate/12th (Mandatory)
8. Transfer Certificate (Mandatory)
9. Latest Caste Certificate from Tahsildar (Mandatory-if applicable) with father Name/Mother Name(for SC candidate must mention SC sub group i.e. SC Group-I/SC Group-II/SC Group-III for State quota students)
10. OBC Certificate in the standard Central Government format(on or after 01.04.2026 for AIQ candidates only) (Mandatory-If applicable)
11. Minority certificate (if applicable).
12. EWS Certificate for the year 2026-27-Claiming Reservation under EWS Categories issued by Competent Authority (Tahsildar) (on or after 01.04.2026) (Mandatory- if applicable)
13. Latest Parental Income Certificate from Tahsildar (on or after 01.04.2026) (Mandatory-If applicable)
14. NCC certificate / CAP certificate / PMC certificate / Anglo Indian Certificate (if applicable).
15. Physically Handicapped Certificate from University Medical Board / Physical disability Certificate issued by competent authority as specified by MCC. (if applicable)
16. GAP certificate (If Applicable)
17. Certificate of employment from the Competent Authority for the candidate's father/mother's service outside the State for the period corresponding to the candidate's year/s of study outside Telangana - As per G.O.Ms.No. 150, Health, Medical & Family Welfare (C1) Department, Dated: 08.09.2025. (If applicable)
18. Form I & II
19. **KNRUHS Genuinity Bond** : 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 admission. If any discrepancy is noticed, the admission will be cancelled.
20. **KNRUHS DISCONTINUATION Bond** of Rs.20,00,000/- (Rupees Twenty Lakhs) with two Sureties and their Aadhaar & Pan Card copies to be enclosed with Self Attestation. (The Surety Must Be A Gazetted Officer Or must be a Income Tax Payee) (Mandatory)
21. Undertaking/declaration on **Anti- Drug** in the attached format. (Notarized)
22. Aadhaar Card Xerox Copy of the student.
23. (4) Passport Size Photos of the student
24. (2) Sets of Xerox copies of all certificates/documents and Bonds.
25. i) D. D in favor of **"The Registrar, KNR University of Health Sciences, Warangal"** Fee of Rs. 12000/- (For All India Quota Students).
ii) College Fee (only **D.D**) in favor of **"Principal, Government Medical College, Jangaon"** Amount of Rs. 24,000/- (OC/BC) and Rs. 22,000/- (SC/ST).
iii) CDS Fee (only **D.D**) in favor of **"Principal, Government Medical College, Jangaon"** Amount of Rs. 5,000/-

II. **NOTE :**

1. Processing charges Rs. 2000/- (Two Thousand Only) in case of candidates sliding to other college, in subsequent rounds.
2. Preferred mode of payment for the candidates who are willing to participate in the subsequent rounds of counselling is Demand Draft for both University and college fee, to avoid delay in refund process.
3. The above certificates will not return to him/her unless he/she completes the course as norms of KNR University of Health Sciences, Warangal, Telangana State.
4. Students willing to stay in hostel should submit a Demand Draft (DD) of Rs. 23000/- in favour of **“Principal, Government Medical College, Jangaon.”**

GOVERNMENT MEDICAL COLLEGE: JANGAON: NEET – 2026: MBBS BATCH 2026-27.

PERSONAL DATA SHEET OF CANDIDATES ADMITTED ON:_____.

Should be filled by the candidate own handwriting:

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 Phone No. :
(O)
(R)
(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. Number of attempts of NEET :
11. Any significant medical history (epilepsy /Heart :
disease / Any condition under treatment)
12. Contact Details of Parents / Guardian :
13. Hobbies/Special talents :
14. Name and Contact details of local guardian :

Signature
Name of the Student

Form – I

FORMAT OF UNDER TAKING BY THE STUDENT

1. I _____ (BLOCK LETTERS)
Son/Daughter of Mr./Mrs./Ms _____ (BLOCK LETTERS)
admitted to the course of MBSS at Government Medical College, Jangaon, 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 (Herein after referred to as the said
regulations).
2. I have carefully read and fully understood the provisions in the said regulations.
3. I have particularly perused the provisions of regulations 3. And 4. of the said regulations
and have fully understood what constitutes – ragging.
4. I have also in particular perused 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 a abetting ragging actively or passively or being part of conspiracy to promote
ragging.
5. 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.
6. 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.
7. 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 this declaration is incorrect or false, my
admissions 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

1. I _____(BLOCK LETTERS) Father/Mother/Guardian of Mr./Mrs./Ms. _____(BLOCK LETTERS) admitted to the course of MBSS at Government Medical College, Jangaon, with Admission No. _____affiliated to Kaloji Narayana Rao University of Health Sciences, hereby declare that, I have received a copy of the National Medical Commission (Prevention and Prohibition of Ragging in Medical Colleges and Institutions) regulations, 2021 (Herein after referred to as the said regulations).
2. I have carefully read and fully understood the provisions in the said regulations.
3. I have particularly perused the provisions of regulations 3. And 4. of the said regulations and have fully understood what constitutes – ragging.
4. I have also in particular perused the provisions of chapter IV and read and understood the administrative and penal actions that may be taken against my son / daughter / ward in case he / she is found guilty of ragging or a abetting ragging actively or passively or being part of conspiracy to promote ragging.
5. 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 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). Will not hurt anyone physically or psychologically or cause any other harm.
6. 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.
7. I also declare that he / she 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 this declaration is incorrect or false, his / her admissions is liable to be cancelled/ withdrawn.

Signed on this _____ day of month of _____ year.

Signature
Name of the Parent /
Guardian Address
Phone no.

Witness I
Name and Signature
Address

Witness II
Name and Signature
Address

KNRUHS GENUINITY BOND

PROFORMA FOR UNDERTAKING IN THE FORM OF AFFIDAVIT (ON NON- JUDICIAL STAMP PAPERS OF Rs.100/-) (Should be Notarized)

I, _____ (candidate name), S/o / D/o
_____, bearing UG NEET-2026 Roll No
_____, UG NEET 2026 Rank _____

And

I, _____ (parent/guardian name), F/o
_____, bearing UG NEET-2026 Roll No _____,
UG NEET 2026 Rank _____

Hereby give an undertaking as below, in connection with our claim with regard to certificates submitted for admission into MBBS/BDS courses for the Academic Year 2026-27 in _____ (college name), 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 certificate (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.

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

Signature of the Parent / Guardian

Signature of the Candidate

Aadhar No.

Aadhar No.

Address:

Address:

Date:

Date:

Place:

Place:

KNRUHS ANTI-DRUG UNDERTAKING

PROFORMA FOR ANTI-DRUG UNDERTAKING / DECLARATION IN THE FORM OF AFFIDAVIT (ON NON-JUDICIAL STAMP PAPER OF Rs. 20/- WITH NOTARY)

We, the undersigned, hereby solemnly affirm and undertake the following:

1. The student shall not consume, possess, procure, manufacture, transport, distribute, sell, purchase, promote or engage in any activity relating to narcotic drugs, psychotropic substances or any other prohibited intoxicating substances during the period of study in the College/University.
2. The student shall abide by the provisions of the Narcotic Drugs and Psychotropic Substances Act, 1985, the Rules made thereunder, the Regulations of Kaloji Narayana Rao University of Health Sciences, Government Orders, and all instructions issued by the University/College from time to time.
3. The parent/guardian undertakes to monitor the conduct and activities of the student and extend full cooperation to the College and the University in maintaining a drug-free campus and preventing drug-related activities.
4. We understand that any involvement of the student in drug-related activities shall be treated as a serious act of misconduct and may result in disciplinary action, including suspension, cancellation of admission, expulsion from the institution, withholding of certificates, and/or initiation of legal proceedings under the applicable laws, without prejudice to any other action that may be taken by the competent authorities.
5. We further declare that the information furnished herein is true and correct to the best of our knowledge and belief, and we agree to abide by this undertaking throughout the period of study.

Name of the Student:

NEET Roll No:

Course:

College:

Academic Year:

Name of Parent / Guardian:

Relationship with Student:

Address:

Mobile No.:

Signature of the Student

Signature of the Parent / Guardian

Place :

Date :

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 2026-27

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 admissions. 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 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 Candidate

I, _____ (Name of the parent), parent of Mr/Ms. _____ (Name of the candidate), do hereby undertake to pay KNR University of Health Sciences, Telangana a sum of Rs 20,00,000.00/- (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

Witnesses:

1)

2)

Contd. on page-2

Sureties by Income Tax Payees / Gazetted Officers only.
(TO BE FILLED BY TWO SURETIES) **(Should be Notarized)**

(1.) In consideration of the Surety Bond executed by the student (Mr. /Ms. _____
 _____ Son of/ daughter of _____ resident of _____ in
 favor of The Registrar, KNRUHS, Warangal and the Principal of Government Medical College,
 Jangaon to a sum of Rs. 20,00,000/- only (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 of Rs.
 20,00,000/- only (Rupees Twenty lakhs only), I, the said surety, shall, without any objection, pay
 the said due amount to the Government Medical College, Jangaon 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.:

(2.) In consideration of the Surety Bond executed by the student (Mr. /Ms.
 _____ Son of/ daughter of _____ resident of _____ in favor
 of The Registrar, KNRUHS, Warangal and the Principal of Government Medical College, Jangaon
 to a sum of Rs. 20,00,000/- only (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 of Rs.
 20,00,000/- only (Rupees Twenty lakhs only), I, the said surety, shall, without any objection, pay
 the said due amount to the Government Medical College, Jangaon 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.:

GOVERNMENT MEDICAL COLLEGE: JANGAON: UG - MBBS
ADMISSION FEE STRUCTURE (2026-27)

Sl. No.	Description	OC/BC	SC/ST	Frequency
01.	Tuition Fee	Rs. 10000-00	Rs. 10000-00	YEARLY
02.	E-Library	Rs. 2000-00	Rs. 2000-00	YEARLY
03.	Central Stores	Rs. 2000-00	Rs. 2000-00	ONCE
04.	Library Fee	Rs. 2000-00	Rs. 2000-00	YEARLY
05.	Caution Deposit	Rs. 3000-00	Rs. 3000-00	ONCE
06.	Academic Development Fund	Rs. 3000-00	Rs. 1000-00	ONCE
07.	Non-Government Fund	Rs. 2000-00	Rs. 2000-00	ONCE
	TOTAL	Rs. 24000-00	Rs. 22000-00	

DEMAND DRAFT IN FAVOUR OF “Principal, Government Medical College, Jangaon”. (College Fee Amount of Rs. 24,000/- (OC/BC) and Rs. 22,000/- (SC/ST) Only).

Sl. No.	Description	OC/BC	SC/ST	Frequency
01.	CDS	Rs.5000-00	Rs.5000-00	ONCE

DEMAND DRAFT IN FAVOUR OF “Principal, Government Medical College, Jangaon”. (CDS Fee Amount Rs. 5000/- Only).

University Fees DD Only (For AIQ Students only)

Sl. No.	Description	Amount
01.	University Fees	Rs. 12000-00

DEMAND DRAFT IN FAVOUR OF “The Registrar, KNR University of Health Sciences, Warangal” PAYABLE AT WARANGAL.

Hostel Fee Structure

Sl. No.	Description	Amount
01.	Non-Refundable Amount	Rs. 5000-00
02.	Caution Deposit (Refundable)	Rs. 5000-00
03.	Rent (Rs. 1000/- Per Month×12 Months)	Rs. 12000-00
04.	Hostel Admission Application Fee	Rs.1000-00
Total		Rs. 23000-00

DEMAND DRAFT IN FAVOUR OF “Principal, Government Medical College, Jangaon”. (Hostel Fee Amount Rs. 23000/- Only).

		NAME & ADDRESS OF THE COLLEGE (As per College Letter Head) GOVERNMENT MEDICAL COLLEGE, JANGAON.		Photo
KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES, TELANGANA, WARANGAL-506007				
DETAILS OF THE CANDIDATE ADMITTED INTO UG (MBBS) COURSE FOR THE ACADEMIC YEAR 2026-27				
S. No.:	NEET Rank:	NEET Roll NO:	KNRUHS Merit:	
Student Name:				
Father's Name:			Gender:	
Address:				
Category/Caste:		Local/Non-Local:		
		DOB (DD/MM/YYYY):		
Qualifying Examination Board:		Allotted Quota (AIQ, CQ, MQ) :		
Allotted Details as per KNRUHS Allotment Letter:				
Site/College Code:				
Mobile Number (10 Digits Only):				
Email ID:				
Aadhaar Number:				
Total Marks Obtained in Eligibility Exam:			Maximum Marks in Eligibility Exam:1000	
Identification Marks (As per SSC/Birth Certificate)		1)		
		2)		
Signature of the Candidate		Signature of the Principal along with the Official Seal		

KNRUHS DETAILS		
1	NEET ROLL NUMBER	
2	NEET RANK	
3	STUDENT NAME (AS PER INTERMEDIATE CERTIFICATE/ EQUIVALENCE)	
4	FATHER NAME (AS PER INTERMEDIATE CERTIFICATE/ EQUIVALENCE)	
5	MOTHER NAME (AS PER INTERMEDIATE CERTIFICATE/ EQUIVALENCE)	
6	GENDER	
7	ADDRESS	
8	DOMICILE STATE OR UT (YOUR NATIVITY OR PERMANENT ADDRESS)	
9	CATEGORY OC SC ST BC A BC B BC C BC D BC E EW S OTHERS FOR CANDIDATES JOINED IN AIQ WHOSE CATEGORY IS OBC- PLEASE SELECT OTHERS IN CATEGORY LIST	
10	LOCALITY OU- (Telangana Region) AU- (Andhra Region) SVU- (Rayalaseema Region) NL- (Non Local)	
11	SERVICE CANDIDATE (YES OR NO) TYPE NO IF YOU ARE UG(MBBS) STUDENT	
12	DOB (DD/MM/YYYY)	
13	ALLOTTED QUOTA:- CQ- COMPETENT AUTHORITY QUOTA AIQ- ALL INDIA QUOTA STRAY	

14	PHASE :- P1 P2 P3- Aka Mop Up P4 P 5 P 6 STRAY Those Who Got Government Medical College, Jangaon In P1 And Applied For Sliding And Got Government Medical College, Jangaon Again In P2 Must Select P2 Not P1	
15	ALLOTTED LOCALITY LOC- Local UNR- Unreserved Region AIQ- All India Quota	
16	ALLOTTED CATEGORY OC SC ST BC A BC B BC C BC D BC E EW S OBC	
17	ALLOTTED SPL CATEGORY NCC CA P PH O NA NA- NOT APPLICABLE	
18	MOBILE NUMBER (10 DIGITS ONLY)	
19	EMAIL ID(EX: XXXXXX@GMAIL.COM)	
20	AADHAR NUMBER (12 DIGITS)	
21	SSC /CBSE /ICSE(X) HALL TICKET NUMBER	
22	SSC /CBSE /ICSE(X) Month and year of pass	