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VIJAYANAGAR INSTITUTE OF MEDICAL SCIENCES,  
BALLARI-583104, KARNATAKA.

2018-19



**INSTRUCTIONS FOR THE STUDENTS WHO ARE TAKING ADMISSIONS  
FOR FIRST-MBBS COURSE DURING 2018-2019 AT  
VIJAYANAGARA INSTITUTE OF MEDICAL SCIENCES, BALLARI.**

1. Students must report in Principal's office at Vijayanagara Institute of Medical Sciences, Ballari (VIMS) for MBBS admission on date indicated on their allotment order issued by KEA/NEET-2018 (AIQ)/SQ @ 10-00 am.
2. One of Parent/Guardian must compulsorily accompany student at the time of admission as certain documents are to be signed by them.
3. The admission process is likely to take two days.
4. The students are instructed to keep 3 sets of Xerox copies of all original documents submitted to the office of VIMS, Ballari at the time of admission and preserved for future use until they are returned from Rajiv Gandhi University of Health Sciences, Bangalore after getting approved.
5. The students are instructed to DOWNLOAD all the below mentioned forms and must be filled by the candidate his / her own handwriting in blue or black pen neatly and legibly in English or computer typed in CAPITAL LETTERS ONLY, except for signature and submit the same at the time of admission. Overwriting, strike-through and erasing in the form should be avoided. Submission of incomplete forms will lead to rejection. Check thoroughly whether you have filled all your relevant details truly, correctly in the concerned forms.
6. Important :- No forms / proformas will be issued in VIMS office, as they are made available in VIMS website – [www.vimsbellary.org.in](http://www.vimsbellary.org.in).
7. The students are informed to submit the original certificates shown below with three sets of attested xerox copies of all original documents without fail.
8. Office working hours: 10-00am to 1.30pm & 2.15 pm to 5.30pm on all government working days.
9. Two Separate Demand Drafts to be purchased at any **STATE BANK OF INDIA Branch only in favour of DIRECTOR, VIMS, BALLARI**. Payable at State Bank of India VIMS Branch, Branch Code 40916. (Fee Details shown in Page No.5).
10. Students are informed to take the print outs of the proforma's in LEGAL SIZE PAPER ONLY i.e. 8 ½" x 14".
11. PLEASE REFER TO THE WEBSITE:- [WW.MCIINDIA.ORG](http://WW.MCIINDIA.ORG) REGARDING RAGGING TERMS AND CONDITIONS AND ADHERE TO THEM. RAGGING IN ANY FORM IS PUNISHABLE BY LAW.
12. Students admitted to VIMS, Ballari institute are expected to strictly follow the code of discipline.
13. Students are expected to maintain discipline inside and outside the college. Drinking alcohol, smoking or indulging in any anti-social activities are strictly prohibited.
14. Candidates are strictly instructed to bring soft copies of the documents on DVD Format. The documents should be scanned as separate files named individually as 10<sup>th</sup>, PUC Marks cards, Income Certificate, Study Certificate HK eligibility certificate and Individual bonds which are to be submitted at the time of admission to this office, name of the candidate and NEET Reg No. & Rank should be written legibly on the DVD while submitting to this office.

## CHECK LIST / OFFICE NOTE

**Original documents to be submitted in the following order (along with two sets of attested photocopies of documents) for admission to under-graduate (MBBS) medical courses for admission required at the time of joining in Vijayanagara Institute of Medical Sciences, Ballari are as mentioned below.**

Sl.No	Particulars	Remarks	Submitted/Not Applicable- Please Tick(✓)
1	Demand Draft in favour of Director, VIMS, Ballari./Remittance in VIMS Account <b>Category wise payment details shown in Page-No.5</b>	For all students	
2	Requisition letter addressed to the Principal, <u>VIMS</u> , Ballari	For all students <b>(download proforma-1)</b>	
3	Provisional allotment letter generated through on-line	For AIQ Students	
4	Admission order issued by Karnataka Examination Authority	For Karnataka Students	
5	Form-I	For all students <b>(download proforma-2)</b>	
6	Form-II	For all students <b>(download proforma-3)</b>	
7	Form-III	For all students <b>(download proforma-4)</b>	
8	Form-IV	For all students <b>(download proforma-5)</b>	
9	Four (4) Recent Passport size photograph with Name of the student printed on it.	For all students	
10	Admit Card of Exam issued by Central Board of Secondary Education (CBSE) Rank letter	for AIQ Students	
11	Result Sheet issued by CBSE	for AIQ Students	
12	Rank Sheet issued by CBSE	for AIQ Students	
13	Date of Birth Certificate (if Metric Certificate does not bear the same)	For all students	
14	Class 10 <sup>th</sup> Certificate	For all students	
15	Class 10+2 Certificate	For applicable students	
16	Class 10+2 Marks Card	For all students	
17	Hyderabad-Karnataka Region Certificate (Article-371(j))	For Karnataka Students	
18	Transfer certificate from the institution last studied.	For all students	
19	Study / Character & Conduct certificate from the institute last attended	For all students	
20	Caste Certificate issued by the competent authority	For applicable students	
21	Income Certificate issued by the competent authority	For applicable students	
22	Proof of Identity – Preferably Aadhar Card.	For all students	
<b>23</b>	Eligibility Certificate issued by Rajiv Gandhi University of Health Sciences, (RGUHS), Bangalore  <b>OR</b> Acknowledgement for having applied Eligibility Certificate through online from Rajiv Gandhi University of Health Sciences, (RGUHS), Bangalore.  <b>Refer website for applying EC through online : <a href="http://www.rguhs.ac.in">www.rguhs.ac.in</a> / <a href="http://www.ecms.online.com">www.ecms.online.com</a></b>	for students other than Karnataka PU board	
24	Domicile certificate (□□□ □□□□□□ □□□□□□ □□□□)	for students other than Karnataka State.	
25	<b>Migration certificate</b>	<b>for students other than Karnataka PU board</b>	
26	Physical fitness certificate (Medical Certificate)	For all students	
27	The students if selected for MBBS course under Defense, Jammu & Kashmir, NCC, PH,Sports etc; shall submit the concerned certificate issued from competent authorities.	For applicable students	

Sl.No	Particulars	Remarks	Submitted/Not Applicable- Please Tick(✓)
<b>Bond Papers shown in Proforma 6 to 11 &amp; rural service bond in Sl. No.32 to be submitted at the time of admission in Government of Karnataka E-stamp paper compulsorily.</b>			
28	<b>Annexure-I, Part-I</b> :- undertaking by the candidate	For all students <b>(download proforma-6)</b>	
29	<b>Annexure I, Part II</b> :- undertaking by parent/ guardian -	For all students <b>(download proforma-7)</b>	
30	<b>Undertaking</b> :- for MBBS Degree Programme as per RGUHS Curriculum	For all students <b>(download proforma-8)</b>	
31	<b>Undertaking</b> :- For Hostel Facility	For all students <b>(download proforma-9)</b>	
32	<b>Undertaking</b> :- Rural Service (1)	For all students <b>(download proforma-10)</b>	
33	<b>Undertaking</b> :- Rural Service (2)	For all students <b>(download proforma-11)</b>	
34	It is mandatory to all the students who are continuing their studies after casual rounds at VIMS, Bellary, that as per the Hon. Supreme Court & UGC/MHRD Regulations they shall fill in an Anti Ragging Undertaking on any of the two websites mentioned below.  Henceforth submit a copy of the same to VIMS office before start of academic session compulsorily.  <b>Website Details :</b> <a href="http://www.amanmovement.org">www.amanmovement.org</a> (OR) <a href="http://www.antiragging.in">www.antiragging.in</a>	MBBS Seats Upgraded /Re-allotted/ Surrendered by students may need not apply/submit.	

PLACE : BALLARI

SIGNATURE OF THE CANDIDATE :

DATE :

SIGNATURE OF THE PARENT :

**FOR OFFICE USE ONLY**

The concerned student has submitted the above documents for admission to I Year MBBS course at VIMS, BALLARI. If approved he/she will be admitted provisionally at VIMS, BALLARI.

1) CASE WORKER :

1) OFFICE SUPERINTENDENT :

2) A.A.O. :

4) PRINCIPAL :

## FEE STRUCTURE DETAILS

**TWO SEPARATE DEMAND DRAFTS TO BE PURCHASED AT ANY STATE BANK OF INDIA BRANCH ONLY IN FAVOUR OF : DIRECTOR, VIMS, BALLARI  
PAYABLE AT STATE BANK OF INDIA VIMS BRANCH-40916.**

### **I. FOR ALL INDIA QUOTA STUDENTS (15% QUOTA)**

<b>Sl. No.</b>	<b>Category</b>	<b>*First DD Amount</b>	<b>**Second DD Amount</b>
1	<b>SC / ST</b> (Parent's Income below 2.5 lakhs)	17955.00	1995.00
2	<b>SC / ST</b> (Parent's Income above 2.5 lakhs but below 10.00 lakhs)	26280.00	2920.00
3	Other Categories	26280.00	2920.00

### **II. FOR KARNATAKA STATE QUOTA STUDENTS (85% QUOTA)**

<b>Sl. No.</b>	<b>Category</b>	<b>*First DD Amount</b>	<b>**Second DD Amount</b>
1	<b>SC / ST</b> (Parent's Income below 2.5 lakhs)	13554.00	1506.00
2	<b>SC / ST</b> (Parent's Income above 2.5 lakhs but below 10.00 lakhs)	11754.00	1306.00
3	Other Categories	11754.00	1306.00

**FOR THOSE WHO WISH TO TAK TRANSFER FROM VIMS., BALLARI TO OTHER MEDICAL COLLEGES**

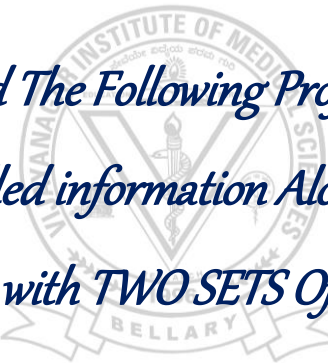
**Note :-**

**\* First Demand Draft will be returned back to such of the students who surrender / upgrade / re-allotment of MBBS Seats during casual rounds at other colleges during the **counseling period only**.**

**\*\*Amount in the Second Demand Draft will be forfeited by the institute towards 10% of processing fees as per the guidelines of Government of India.**

**Income Certificates issued by the competent authority to be submitted to VIMS office whose parents income is below Rs.2.50 lakhs**

Candidates who wish to stay back at VIMS, Bellari and do not opt for up gradation during counselling can pay the amount through bank challan



*Download The Following Proformas  
And Submit the filled information Alongwith Original  
Documents with TWO SETS Of Attested  
Xerox Copies To VIMS Office During  
Admission To First Year MBBS Course.*

## **Candidates Willingness Form**

Name of the candidate :
Roll Number :
Seat selected in 1 <sup>st</sup> / 2 <sup>nd</sup> / 3 <sup>rd</sup> /round counseling:
Course : _____ College : _____

SI No	Particulars	Yes/No
1.	PH certificate	
2.	Provisional allotment letter	
3.	Caste Certificate	
4.	Admit card issued by NEET –UG	
5.	Rank letter issued by NEET –UG	
6.	Mark sheet of 10 <sup>TH</sup> , PUC	
7.	Transfer Certificate	
8.	Proof of Date of Birth	

I declare that I was personally present at the time of counseling and the seat **Selected or Surrendered** by me is purely my own choice. I have produced all the original documents and I agree to confirm my verification **and Accept/ Surrender** my seat.

The MBBS Seat which I have surrendered on -----, is purely at my own risk and I am aware that I have no right to hold back the seat and will not claim the seat.

Date :

Signed by me

Name of the Candidate

(download proforma-1)  
**REQUISITION LETTER**

To  
The Principal,  
VIMS, Ballari.

Place :  
Date :

Sir,

Sub:- Application for admission to I Year MBBS course at VIMS, BALLARI allotted through **AIQ / KEA through NEET-2018** – reg.

-----

I, Sri / Kum. \_\_\_\_\_ S/o, D/o. \_\_\_\_\_

have been allotted MBBS seat at VIMS, Ballari by AIQ / KEA through NEET-2017 Entrance Exam. My details are as follows : **(Strike out whichever is not applicable)**

**FOR AIQ STUDENTS**

Roll Number :  
AIQ Rank :  
Category :  
Sub Category :  
Allotted Category :

**FOR KEA STUDENTS**

Admission Order No :  
CET No :  
CET Rank No :  
NEET Roll No :  
NEET All India Rank :  
Amount paid at KEA :

I am herewith enclosing the Demand Draft for Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_  
\_\_\_\_\_) (Only) Bearing No. \_\_\_\_\_ Dated \_\_\_\_\_  
of \_\_\_\_\_ (Name of the Bank)  
towards admission fees along with necessary original documents.

Hence, I request your kind self to admit me at VIMS, Ballari for I MBBS course. Admission taken is at my own request. I am aware that my admission is subject to the approval of the concerned competent authorities for which VIMS, BALLARI will not be held responsible for any consequences / objections arise in future with regard to my admission. I have not furnished any false information.

Yours faithfully,

(Signature of the candidate)

(Signature of the parent / Guardian)

**ADDRESS FOR CORRESPONDENCE :**

**From :**



**GOVERNMENT OF KARNATAKA**  
**VIJAYANAGAR INSTITUTE OF MEDICAL SCIENCES,**  
**BALLARI**

[Web: [www.vimsbellary.org.in](http://www.vimsbellary.org.in) ]



Reg.No:205/1995-96-Recognized by Medical Council of India, New Delhi vide No:MCI-57(3)/79-Med/1912, Dtd.16-04-1979  
 Director: '08392-242387, PA : '08392-235201, FAX : 08392-235202, Principal : '08392-235204,  
 e-mail-ids : [directorvimsbellary@gmail.com](mailto:directorvimsbellary@gmail.com), [vims\\_42366@yahoo.com](mailto:vims_42366@yahoo.com), [principalvimsbellary@gmail.com](mailto:principalvimsbellary@gmail.com)

**FORM-I**

**APPLICATION FORM FOR ADMISSION TO MBBS COURSE**

Candidate Details (ALL THE ENTRIES IN THE FORM SHOULD BE IN **CAPITAL LETTERS ONLY**)  
 (Strike out whichever is not applicable)

Affix Passport  
Size  
Photograph

<b>1</b>	<b>Candidate's Name:</b> (As mentioned in SSLC/ 10 <sup>th</sup> marks card)									
<b>2</b>	<b>Date of Birth</b>									
<b>3</b>	<b>Father's / Mother's Name</b> (please specify guardian's name, if parents are not alive).			Father's Name : Mother's Name : Guardian's Name :						
<b>4</b>	<b>Annual Income &amp; Occupation of Father/Mother</b>			Father : Mother :						
<b>5</b>	<b>Religion / Caste / Category (please tick:✓) particulars</b>			Religion : _____ Caste :- _____ Category: GM[ ] OBC[ ] SC[ ] ST[ ] OTHERS[ ]						
<b>6</b>	<b>Address for Communication</b>									
	City									
	Pin									
	District									
	State									
<b>7</b>	<b>E-mail</b>									
<b>8</b>	<b>Telephones :</b>			Land Line		Mobile No.				
<b>9</b>	<b>Details of Education :</b>			(10+2) / PUC						
	Name of the Board / University									
	Name of College studied									
<b>10</b>	<b>Please enter the percentage of Marks scored in Qualifying exam</b>									
	Exam Passed	Register No.	Name of the Board / University	Year of Passing	Maximum Marks	Secured Marks	% of marks obtd. in aggregate of all subjects			
	SSLC/*Equivalent									
	10+2/PUC/*Equivalent									
	Any Other									
<b>11</b>	<b>Please enter the of Marks scored and percentage in Qualifying exam</b>									
	Subjects	Max. Marks	Marks obtained	% of Marks	PCB aggregate %					
	Physics									
	Chemistry									
	Biology									
	Total									
	English									
<b>12</b>	<b>Seats allotted through KEA (Neet-2018)</b>									
	KEA-Admn. Order No.	CET No	CET Rank	NEET Roll No	NEET AIR No	Cate-gory	Allotted Category	Max. Marks	Marks Obtained	% of Marks
<b>13</b>	<b>Seats allotted through AIQ (Neet-2018)</b>									
	Roll No.	All India Quota Rank	Category	Sub-Category	Allotted Category	Max. Marks	Marks Obtained	% of Marks		
						<b>720</b>				
<b>14</b>	<b>Selected under</b>						PH / Sports /J&K / Others			
<b>15</b>	<b>Total amount paid during admission</b>									
<b>16</b>	<b>DD No. &amp; No &amp; Date :</b>									

**PLACE :** \_\_\_\_\_ **SIGNATURE OF THE CANDIDATE** \_\_\_\_\_ :

**DATE :** \_\_\_\_\_ **SIGNATURE OF THE GUARDIAN / PARENT** \_\_\_\_\_ :



**GOVERNMENT OF KARNATAKA  
VIJAYANAGAR INSTITUTE OF MEDICAL SCIENCES,  
BALLARI**

[Web: [www.vimsbellary.org.in](http://www.vimsbellary.org.in) ]



Reg.No:205/1995-96-Recognized by Medical Council of India, New Delhi vide No:MCI-57(3)/79-Med/1912, Dtd.16-04-1979  
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e-mail-ids : [directorvimsbellary@gmail.com](mailto:directorvimsbellary@gmail.com), [vims\\_42366@yahoo.com](mailto:vims_42366@yahoo.com), [principalvimsbellary@gmail.com](mailto:principalvimsbellary@gmail.com)

**FORM-II**

**APPLICATION FORM FOR ADMISSION TO MBBS COURSE**

Candidate Details (ALL THE ENTRIES IN THE FORM SHOULD BE IN CAPITAL LETTERS ONLY)  
(Strike out whichever is not applicable)

Passport Size  
Photograph

1	<b>Candidate's Name</b> (As given in SSLC/ 10 <sup>th</sup> Certificate)	
2	<b>Father's Name :</b>	
3	<b>Mother's Name</b>	
4	<b>Sex</b>	
5	<b>Student's Address</b> Cell No. Email-id.	
6	<b>Religion</b>	
7	<b>Mother Tongue</b>	
8	<b>Category – Please specify</b> SC/ST/CAT.I/IIA/IIB/IIIA/IIIB/OBC/GM/OTHERS	
9	<b>Nationality</b>	
10	<b>State</b>	
11	<b>Urban / Rural</b>	
12	<b>Seat Category</b>	<b>Government Seat</b>
13	<b>Seat Type – KEA / AIQ</b>	
14	<b>AIQ Rank</b>	
15	<b>AIQ %age</b>	
16	<b>CET Rank No.</b>	
17	<b>CET %age</b>	
18	<b>Qualifying Exam (12<sup>th</sup> / PUC)</b>	
19	<b>Register No</b>	
20	<b>Passed Date &amp; Year</b>	
21	<b>University / Board</b>	
22	<b>Optional Subjects</b>	<b>PHYSICS / CHEMISTRY / BIOLOGY</b>
23	<b>Total Max. Marks in PCB</b>	
24	<b>Total Marks secured in PCB</b>	
25	<b>Date of Admission</b>	
26	<b>Date of Birth</b>	
27	<b>Blood Group</b>	

PLACE : SIGNATURE OF THE CANDIDATE :

DATE : SIGNATURE OF THE GUARDIAN / PARENT :

(download proforma-4)

**FORM-III**

**REGISTER PROFORMA TO BE FILLED BY THE CANDIDATES**

**(ADMITTED) TO MEDICAL COLLEGE VIMS BALLARI**

01	Register Number/ CET/RANK:-	
02	Date of Admission	
03	Name in Full (Capital Letters)	
04	Father's Name, Occupation & Address (Or Guardian when a father is not alive)	
<b>05.</b>	<b>Mobile No, &amp; Email I.D</b>	
<b>06</b>	<b>Blood Group</b>	
07	Income of parent or Guardian per annum	
08	Place of Birth	
09	Date of Birth	
10	Race of Caste & Religion	
11	Native District	
12	Karnataka or Non-Karnataka	
13	Former School or College length of attendance in it.	
14	Highest Examination passed	
15	Class on entering	
16	Reg.No.12 <sup>th</sup> Marks Card Max/Sec, & Passing Date:	
17	Whether vaccinated or had small pox	
18	Amount of admission and other fees paid on admission	
19	Receipt No. and Date	
20	Category	

NOTE: The candidates are required to fill only 1 to 20 columns.

**PLACE :** **SIGNATURE OF THE CANDIDATE :**

**DATE :** **SIGNATURE OF THE GUARDIAN / PARENT :**

**FORM, - IV**

**VIJAYANAGAR INSTITUTE OF MEDICAL SCIENCES, BELLARY  
ADMISSION PROFORMA TO BE FILLED BY THE CANDIDATES  
(ADMITTED) TO THE MBBS MEDICAL COLLEGE VIMS BELLARY.**

01	Course for Admission ( CAPITAL)	MBBS
02	Name of the Candidate NAME IN FULL ( CAPITAL)	
03	Date of Birth	
04	Sex	
05	Father Name/Husband's Name NAME IN FULL ( CAPITAL)	
06	Mother Name NAME IN FULL ( CAPITAL)	
07	Nationality	
08	Permanent Address NAME IN FULL ( CAPITAL)	
09	Contact no.(Cell No.)	
10	Date of Admission	
11	Fees paid	
12	Receipt No.	

**PLACE :**                      **SIGNATURE OF THE CANDIDATE**                      :

**DATE :**                      **SIGNATURE OF THE GUARDIAN/ PARENT**                      :

**ANNEXURE I, PART I**  
**UNDERTAKING BY THE CANDIDATE**

1. I, \_\_\_\_\_ S/o or D/o. of Mr./Mrs. \_\_\_\_\_, have carefully read and fully understood the law prohibiting ragging and the directions of the Supreme Court, Central/State Government, MCI, Delhi and RGUHS, Bangalore in this regard.
2. I have received a copy of the MCI Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009.
3. I hereby undertake that -
  - I will not indulge in any behavior or act that may come under the definition of ragging,
  - I will not participate in or abet or propagate ragging in any form,
  - I will not hurt anyone physically or psychologically or cause any other harm.
4. I hereby agree that if I found guilty of any aspect of ragging, I may be punished as per the provisions of the MCI Regulations mentioned above and/or as per the law in force.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year

**1. Witness (Signature & Address)**

**SIGNATURE :-**

**ADDRESS: \_\_\_\_\_**

\_\_\_\_\_

\_\_\_\_\_

**2. Witness (Signature & Address)**

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**Rs. 100/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Student's Name

**Second party**- Principal, VIMS, Ballari.

**TO BE TYPED IN RS.100/- E-STAMP PAPER**

**ANNEXURE I, PART II**  
**UNDERTAKING BY PARENT/GUARDIAN**

1. I, \_\_\_\_\_ F/o /M/o / G/o  
\_\_\_\_\_ have carefully read and fully understood the law prohibiting ragging and the directions of the Honorable Supreme Court and the Central/State Government in this regard as well as the MCI regulations on curbing the menace of Ragging in Higher Educational Institutions, 2009.
2. I assure you that my son/ daughter will not indulge in any act of ragging.
3. I hereby agree that if he/she is found guilty of any aspect of ragging, he/she may be punished as per the provisions of the MCI Regulations mentioned above and/or as per the law in force.

Signed this \_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ Year

**1. Witness (Signature & Address)**

( \_\_\_\_\_ )

**SIGNATURE & ADDRESS:**

**2. Witness (Signature & Address)**

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**Rs. 100/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Parent / Guardian Name

**Second party**- Principal, VIMS, Ballari.

**TO BE TYPED IN RS.50/- E-STAMP PAPER**

**UNDERTAKING**

**MBBS DEGREE PROGRAMME AS PER RGUHS CURRICULUM**

I \_\_\_\_\_ So/Do of \_\_\_\_\_ (herein after called the Natural Guardian of the Student) hereby given an undertaking that on admission to I MBBS at **Vijayanagara Institute of Medical Sciences, BALLARI**, during the year **2018-19**, read the rule No.11 of the ordinance of Governing M.B.B.S. Degree Program of Rajiv Gandhi University of Health Sciences, Bangalore, vide Notification No. ACA/BOS-27/97-98, dated: 24.03.1998, and I shall abide / by the ordinance that reads that no student shall be permitted to join Phase-II (Para Clinical & Clinical) Group of subjects until he / she passes in the Phase-I (pre-clinical) subject for which he / she will be permitted not more than four chances (Actual Examination) provided four chances are completed within three years from the date of enrolment.

Signature of the student  
with full address

Witness :

1)

2)

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**Rs. 50/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Student Name

**Second party**- Principal, VIMS, Ballari.

**AFFIDAVIT**

To,

The Warden,  
Girls and Boys Hostel,  
VIMS, BELLARY

**DECLARATION**

I Dr./ Mr/Ms -----, daughter/ son of -----  
-----, solemnly declare that I will agree to abide by the ladies/girls and boys hostel rules and regulations and maintain good conduct during my stay in the college and hostel. I hereby undertake to take food in the mess attached to the hostel. If I go against the rules and regulation of the hostel and the college authorities, I understand that I may be expelled from the hostel without notice. Further, I understand that ragging is strictly prohibited in the hostel and college premises. I solemnly declare that, I will not directly or indirectly indulge in ragging. If I am caught for involving myself in ragging activities directly or indirectly legal action may be taken against me as deemed fit or as directed by the competent authorities.

**Name and Signature of the candidate**

I Mr./ MS. Name -----, Address-----  
-----is the father/mother/husband/guardian of Dr./Mr/Ms.....  
----- solemnly declare that the ladies/girls and boys hostel admission procedure and fee structure has been explained to me prior to admission and agree to take admission as per the hostel rules and regulation. Further, I declare that my ward will abide to the hostel rules and regulations. If my ward goes against the rules and regulations of the hostel or gets involved with any kind of misbehavior, disciplinary action may be taken against her as decided by the college authorities.

**Place**

**Date**

**Name and Signature of the parent/guardian**

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**Rs. 50/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Student Name

**Second party:-** Principal, VIMS, Ballari.

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(download proforma-10)

**To be typed in Rs. 20/- E-stamp paper**

**Undertaking should be given by the candidates who select MBBS seats in Vijayanagara Institute of Medical Sciences, Bellary.**

**UNDERTAKING**

I \_\_\_\_\_, S/o, D/o \_\_\_\_\_ Resident of  
(permanent address) \_\_\_\_\_

\_\_\_\_\_ hereby give  
undertaking that I am prepared to serve in any Primary Health Center or Primary Health Unit situated in  
Rural Areas in the State of Karnataka for a minimum period of ONE year OR as decided by Government of  
Karnataka on / after completion of the MBBS course at Vijayanagara Institute of Medical Sciences, Bellary

I and my parent hereby undertake to act accordingly.

Signature of the candidate

Date:.....

Place :.....

Signature of the Parent

(Father / Mother)

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**Rs. 20/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Student Name

**Second party**- Principal, VIMS, Ballari.

**Execution of bond by Candidates who select MBBS seats in Government Medical Colleges OR  
Government seats in Private Medical Colleges  
(On Rs.100/- e- Stamp Paper)**

I, Mr. / Kum .....S/o. / D/o  
..... a candidate with NEET–2018’ Admission  
Ticket No..... residing at .....  
.....  
.....  
have on my own volition allotted a MBBS seat on \_\_\_\_ / \_\_\_\_ /2018 In Vijayanagara Institute of Medical  
Sciences, Ballari vide admission order number ..... dated \_\_\_\_ / \_\_\_\_ /2018 and do  
hereby undertake as follows:

**In accordance with the Amendment to Rule 11 of the Karnataka Selection of Candidates for Admission to Government seats in Professional Educational Institutions Rules, 2006, vide Government Notification – 1. No.HFW 79 RGU 2011 dated 17-07-2017 and Amendment act 2017 dated 6-7-2017, I am prepared on completion of the course to serve in any Primary Health Center or Primary Health Unit situated in Rural Areas in the State of Karnataka for a minimum period of ONE year and I will abide to rules and regulation of Government of Karnataka.**

What is stated above is true and correct and I and my parent hereby undertake to act accordingly.

Signature of the candidate

Date:.....

Place : Ballari.

Signature of the Parent

(Father / Mother)

**Witnesses :**

1)

2)

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**Rs. 100/- - E-Stamp Papers to be purchased in the name of :-**

**First party** :- Student Name

**Second party**- Govt. of Karnataka



### CONTACT DETAILS

**PHONE** : 08392 235210 (Office)  
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For more details contact **Mr. K. Lakshminarayana FDA**, VIMS,  
Ballari to **08392 235210** during working hours  
**(10-00 AM TO 5-30 PM ONLY)**

